

Guidelines for the BCIT Preceptorship 2 Student in High Acuity

The following is a general outline for practice of the Preceptorship 2 student working with a preceptor in a High Acuity Unit prior to graduating from the BCIT BSN program.

Scope of practice

The student is in the final level of the BCIT nursing program. As such the student can practice under the direction of an RN, any of the nursing skills for which he/she has received education during his/her clinical placements. These generally include the skills that would be performed on the medical/surgical units. The student will require guidance and/or supervision when first performing a new skill but will continue to become independent in his/her practice of these skills

These skills include but are not limited to:

- ☐ Physical assessments (head to toe - focusing on patient and equipment)
- ☐ Administration of medications (see BCIT policies)
- ☐ Central line management. Students can:
 - change bags, administer medications via minibags through a CVC with **continuous infusion once approved by the preceptor RN**
 - administer direct IV push through a CVC with **continuous infusion only under preceptor supervision.**
- ☐ Chest tube management
- ☐ Tube feeds and TPN
- ☐ Tracheostomy care
- ☐ Suctioning – trach
- ☐ Wound management
- ☐ Sterile Dressings
- ☐ VAC dressings (following initial training by CNE)
- ☐ Cardiac monitoring (if the student has the dysrhythmia course NSCC 7150)
- ☐

For a detailed list please see the Clinical Techniques: Skills List on the BCIT Guide for BSN Preceptors web site <http://www.bcit.ca/health/bsnpreceptors/> under the section Links and Resources.

The student **may not** perform any of the advanced skills deemed critical care.

Skills outside of the student's scope of practice

- ☐ Management of cardiac and/or hemodynamic medication
- ☐ Management of External ventricular drains
- ☐ Intracranial pressure monitoring
- ☐ Initiating IV therapy unless certified by the health authority and with RN supervision
- ☐ CVC dressing changes unless certified by the health authority and with RN supervision

- Accessing capped CVC lumens unless certified by the health authority and with RN supervision

The responsibility for management of these aspects of patient care will remain with the preceptor at all times.

Practice at the bedside

The goal for the clinical placement prior to graduation is to provide exposure to the type of care given to the acutely ill adult.

The student should provide patient care to the full extent of his/her scope of practice. Since the student can't take responsibility of those components deemed critical care skills, these must be performed by the preceptor RN. The student should perform and document the head to toe assessment (focusing on the patient). The preceptor will read and co-sign any documentation to confirm the accurate capturing of this information. During the course of the shift, it is up to the discretion of the preceptor who will document specific events. He/she may assist the student in documenting or if the acuity exceeds that deemed appropriate for the student, the preceptor will chart as necessary.

Patient assignments

Patient assignments should be as uncomplicated as possible to start. The focus should be on assessments and critical thinking. The goal is for the student to become adept at assessing the high acuity patient, anticipating problems and needs and making safe, well thought out care decisions.

As this is an educational experience, it is important that the student not be considered an extra staff member. The preceptor should not be required to "help" beyond what would also normally be expected. He/she should only leave the student unsupervised when another Registered Nurse is also providing coverage.

Please refer to the BCIT Nursing (3 year) Program Student Guidelines, Policies, and Procedures on the BCIT Guide for BSN Preceptors web site <http://www.bcit.ca/health/bsnpreceptors/> under Links and Resources for detailed policy information. Remember always follow the most restrictive policy whether it be your agency or BCIT. If in doubt please contact the BCIT BSN Instructor. Thank-you,

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