

# BACHELOR OF SCIENCE IN NURSING PROGRAM STUDENT GUIDELINES AND PROCEDURES

2024

BCIT

## ACKNOWLEDGEMENT OF TERRITORIES

The British Columbia Institute of Technology acknowledges that our campuses are located on the unceded traditional territories of the Coast Salish Nations of xwməθkwəyəm (Musqueam), Skwx wú7mesh (Squamish), and sə́lilwətaʔ (Tsleil-Waututh).

## **Purpose**

The BSN program is guided by various BCIT and BSN policies, procedures, processes, and regulations. In addition, policies and procedures of all clinical agencies will also apply to students during the time they are scheduled for clinical.

This document contains significant information regarding the BCIT BSN program, and important details about being a nursing student which are important throughout the student's learning experience at BCIT. All students in the program are responsible for the information contained in this document which details practices, procedures, and provisions of the BSN program related to academic progress, professional expectations, and related matters. It is the BCIT BSN student's responsibility to familiarize themselves with the information in this document.

The faculty and administration of the BCIT BSN program reserve the right to change the policies and procedures in this document at any time.

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# A – INSTITUTE AND BSN POLICIES

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## A-1 INSTITUTE POLICIES

BCIT policies apply to all BCIT students and can be found on the website. The most relevant policies related to students are:

### Student Regulation Policy 5101

The purpose of this policy is to set forth regulations and conditions regarding student attendance, uniforms (attire), and ownership of works produced by students.

### Student Code of Conduct (Non-Academic) Policy 5102

The purposes of this policy are to:

- Define the standard of general conduct expected of students.
- Describe the process for reporting potential breaches of this policy
- Describe the procedure the Institute will follow for allegations of non-academic student misconduct.

### Student Evaluation Procedure 5103-PR1

This procedure includes information on how students will be evaluated, and complete definitions of each different grade notation that could appear on a BCIT transcript.

### Student Code of Academic Integrity Policy 5104

This policy outlines academic integrity standards expected of students and the process which will be used in situations where an act of academic misconduct is suspected to have occurred

### Procedure for Violations of Code of Academic Integrity Procedure 5104-PR1

The purpose of this procedure is to outline the manner in which the Institute will respond to suspected violation of Policy 5104, Student Code of Academic Integrity

### Decision Review Board (DRB) Procedure 5104 PR2

This procedure describes the processes to request an appeal to be heard by the DRB and the administration; and the process for the DRB hearings.

### Institutional Appeal Tribunal Procedure 5104 PR3

This procedure describes the processes to request an appeal to be heard by the BCIT Board of Governors and the administration; and details the process for the Board of Governors' appeal hearings.

### Privacy and Protection of Information Policy 6700

This policy describes how BCIT complies with its obligations under FIPPA, including setting out the responsibility of employees, service providers, and volunteers regarding the right of access to records and information, and the protection of personal information.

The BSN program adheres to BCIT Policy 6700, Freedom of Information and Protection Privacy.

## A-2 BSN POLICIES

The BSN program has a few program-specific policies that apply exclusively to BSN students. These policies are designed to ensure the highest standards of education and practice within the nursing profession, addressing unique aspects of the BSN curriculum, clinical placements, and professional conduct expected of nursing students.

## BSN Minimal Grading

The minimal passing grade for courses in the BSN program is as follows:

- BSNC courses: 65% for courses graded in percentages
- Liberal Studies courses: 65%
- Specialty Nursing theory courses: 75%

### *Limits to Number of Attempts to Complete a Course in the BSN Program*

Theory Courses: Students are allowed a maximum of three attempts to successfully complete a theory course. A student who has attempted a course twice will only be allowed to attempt it a third time with written permission from the BSN Associate Dean, who will detail any special considerations or conditions in writing.  
(BCIT Policy 5103)

Practice Courses: Students who have any combination of two instances of withdrawal or failure in any BSN practice course(s) will not be readmitted to the program. (Education Council approval Nov. 2005)

### *Time Limit to Complete BSN Program*

BCIT time limit to complete a credential is 7 years. (Policy 5103)

Effective for the January 2023 cohort intake the BCIT time limit to complete the BSN credential is 5 years.  
(Education Council approval May 2022)

The time limit includes any leaves and is at the discretion of the Associate Dean.

## A-3 ATTENDANCE

In addition to BCIT policy 5101 on attendance, the following applies to students in the BSN program.

Students are expected to be available until the end of the last day of the Term. Final clinical evaluations will **not** be rescheduled for students for non-medical reasons.

In order to be fully prepared to provide safe and competent nursing care to the public, students are expected to attend all scheduled classes, simulations (including labs), and clinical hours, except in the case of medical issues or other extenuating circumstances.

Instructors and/or Program Heads do not give or deny students permission to miss class, simulation/lab, or clinical time. As adult learners and developing professionals, students themselves must determine appropriate reasons for being absent from scheduled program activities.

Students who need to be absent from a class, simulation/lab, or clinical practice need to consider the following:

- Absences may affect a student's grades, ability to meet course outcomes/clinical competencies and ability to provide safe competent patient care. If a student is absent from lab or clinical, instructors may limit a student's clinical activities until safe and competent practice can be ensured.
- Missed clinical hours will not be made up. Course outcomes and clinical competencies must be met within the set hours and course dates as per the course outline.
- Missed skills labs **must** be made up in the lab setting before the related skill can be performed in the clinical setting. It is the student's responsibility to organize.

## A-4 STUDENT ABSENCE

### Notification

Regular and punctual attendance is expected of all students for all orientations, classes, seminars, simulation/lab, and clinical experiences. If a student must be absent from class, orientation, lab or clinical experiences, they are to follow the communication process outlined by instructors in individual courses.

Students absent from clinical practice must notify the instructor as soon as possible. If the reason for absence is sudden, the student notifies the agency and the instructor prior to the beginning of shift. If a student expects to have a prolonged absence, they must notify the instructor to discuss their situation.

### Returning to Clinical Practice after an Injury, Serious illness, or Surgery

1. The student must notify the instructor of their return date to clinical practice with as much notice as possible.
2. Prior to returning to clinical practice, students must submit a medical clearance confirming that they are physically and/or mentally fit to return to clinical practice – see the BCCNM Requisite Skills and Abilities document and/or the BCCNM Fitness to Practice guidelines. The form is to be completed by the student's regular health care provider, which must be a Medical Doctor or Nurse Practitioner.
3. The student must present the medical certificate to the instructor prior to returning to the clinical setting.

## A-5 ACADEMIC ACCOMMODATIONS

By the completion of the BCIT nursing program all student nurses must demonstrate the capacity to meet BCCNM's 'Requisite Skills and Abilities: Becoming a Registered Nurse in British Columbia', meet the BCCNM Entry-level Competencies for RN and be able to practice following the BCCNM Standards of Practice. Nursing students need to perform certain foundational skills and abilities in various practice settings to provide safe patient care, meet course outcomes and clinical competencies.

Any student with concerns about whether they have the required skills and abilities for admission to or progression through the BCIT BSN program should contact BCIT's Accessibility Services (BCIT Policy 4501 and Procedure 4501-PR1).

## A-6 LATE ASSIGNMENT SUBMISSION — FOR PERCENTAGE GRADED COURSES

All required materials must be submitted/completed by the stated due date and time. At the course instructor's discretion, an alternate due date may be arranged at least 48 hours in advance of the scheduled due date.

Assignments will be listed on the course outline and due dates are found in the course Learning Hub.

A late (date and/or time) assignment will be assessed and graded with a ten percent (10%) decrement for each day it is late, including holidays and weekends. All assigned work will be initially graded according to the assignment's original marking guideline, and then the mark will be reduced as explained above.

## A-7 LATE ASSIGNMENT SUBMISSION — FOR SATISFACTORY/UNSATISFACTORY GRADED COURSES

Any assignments submitted late will not be accepted and will receive an unsatisfactory (U) grade unless prior arrangements have been made with the instructor.



## B – CLINICAL PLACEMENT

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### B-1 BCIT BSN STUDENT PRACTICE: STANDARD, LIMITS, CONDITIONS

All BCIT BSN students are required to adhere to the BCIT BSN Scope of Practice. This document outlines the professional standards and guidelines that students must follow to ensure the delivery of safe and competent nursing care. Students are expected to familiarize themselves with the Scope of Practice and consistently apply its principles in all clinical settings. For detailed information, students should refer to the BCIT BSN Scope of Practice document available on all practice course LearningHub sites.

### B-2 CLINICAL REQUIREMENTS

- Students must maintain and **annually** recertify CPR HCP/BLS and Respirator Fit Test certifications, and complete all BCIT, BSN and health authority or clinical placement orientation requirements prior to participating in any practice courses.
- All BCIT BSN students are to follow Provincial and BC Health Agencies' immunization policies and guidelines for workers in health care. Students who fail to meet these requirements will not be able to commence practice courses and may be required to withdraw from the BSN program.

*COVID vaccination:* By order of the Provincial Health Officer (PHO), all students admitted into an academic program at a post-secondary institution who are in a care location for training, research or associated administrative purposes, must have provided proof of COVID vaccination. This includes all readmitted students. This directive is in effect until further notice by the PHO.

This may be subject to change as per public health orders or direction from health authorities on vaccine requirements to enter clinical practice sites.

### B-3 DRESS CODE AND APPEARANCE FOR CLINICAL PRACTICE

The purpose of a dress code is to provide guidance to present a professional image in the clinical practice setting. The dress code requirements are based on principles for professionalism, infection control, personal safety, and role identification.

Good judgment should be exercised when making decisions as to what is appropriate in each clinical experience. If an agency has specific requirements not covered by this policy, students must conform to those requirements.

Students who do not conform to the requirements for appearance for clinical practice may be asked to leave the practice learning area. Any time away from clinical practice will then be considered under the conditions outlined in Section A-3, Attendance.

#### Dress code for hospital clinical settings

##### *Uniforms*

- a standard BCIT BSN program uniform is worn
- non BCIT BSN scrub pants are accepted if they are the same dark gray colour or black
- uniform to be clean and wrinkle-free
- t-shirts worn under uniforms must be:
  - no more than  $\frac{3}{4}$  length sleeves (must be no more than 2 inches below the elbow)
  - tight to skin
  - white, black, or the colour of the uniform

- underclothing must not be visible
- ensure that pants are hemmed above the heel line

#### *Shoes*

- closed heels and toes – shoe must protect entire foot from injury
- must be able to wipe clean – no mesh
- running shoes are acceptable
- no platform soles
- non-slip soles – footwear must provide traction
- not to be worn outside of clinical
- must comply with WorkSafeBC guidelines 'Policies Part 8 – Footwear': [WSBC Policies Part 8](#)

#### *Identification*

- required to wear school photo Identification in all practice settings for identification and liability purposes
- ID appropriately attached to the left side of uniform

#### *Watch*

- watch with a second hand is essential
- no ornamental watch bracelets

#### *Hair*

- must be clean and controlled so that it does not fall in front of the face
- hair clips must be a neutral colour - no other adornments to be worn
- unscented hair products only
- beards and moustaches must be neatly maintained
- a plain religious head covering, fastened securely and non-dangling, is permitted

#### *Fingernails*

- must be clean and short
- false nails such as acrylic nails, gel nails, and shellac are NOT permitted.
- light coloured nail polish only

#### *Jewelry*

- not permitted with the exception of the following: plain wedding ring, one stud earring per ear, religious and medical-alert bracelets (no necklaces or chains; no dangling earrings)
- small stud jewelry only in any visible body piercing

#### *Make-up*

- to be used with discretion
- unscented products only

#### *Fragrances*

- use of scents, such as perfumes, heavily scented lotions or deodorants are not allowed on campus or hospital/clinical settings
- personal hygiene products must be scent free
- students who smoke should not do so in uniform (or non-uniform dress code)

#### *Fanny packs, tool belts or aprons*

- are not permitted

## Dress code for community, mental health, continuing care and prevention sites

Students represent the BCIT BSN program and must adhere to a professional non-uniform dress code. In practice areas such as community and mental health, students do not need to wear scrubs.

Non-uniform dress code to present a professional image:

- Neat, clean casual business attire is worn
- Jeans are usually not acceptable
- Sweatpants, hoodies, athletic wear, shirts with logos or brand names, tights and leggings are not acceptable
- Clothing should not leave your role, actions or intentions open to misinterpretation, and must allow you to participate fully in activities and situations where you may need to move quickly, e.g., run, bend, etc.
- Clothing that is revealing, not sized appropriate, or clings tightly to the body are inappropriate
- All other requirements are the same as for hospital clinical settings.

## Experiential learning spaces

- Lab spaces are scent-free zones
- Name tag and closed toed footwear required
- Dress code is according to your clinical sites and BSN guidelines. Scrub top is sufficient for sites that use scrubs. No outerwear or sweaters to be worn over scrubs.

Refer to the 'BCIT BSN Experiential Learning Open Lab Space Guidelines' document located in each practice course LearningHub site for full lab guidelines.

## B-4 TECHNOLOGY USAGE

### Mobile Devices

- are not permitted in clinical for personal use.
- may be used for research and resource purposes only, as per agency policy.

### Electronic Communication

- Students must only use their myBCIT email address for corresponding with BCIT faculty and staff. Instructors may not send or reply to any other email address.
- Students must advise ETS immediately of any problems encountered with institute email accounts.
- To avoid missing important communications, it is recommended that you do not forward your BCIT directed e-mail to other non-BCIT email addresses.
- Failure to receive or read BCIT communications sent to the BCIT email address in a timely manner does not absolve students and applicants from knowing, responding to, or complying with the content of that communication.

### Ethical and Professional Use of Technology

- Patient privacy and confidentiality is a fundamental ethical and legal obligation of a nurse.
- Confidential information should be shared only:
  - with a patient's informed consent
  - when legally required to provide confidential information
  - where failure to disclose the information could result in significant harm to others.
- Privacy relates to the patient's expectation and right to be treated with dignity and respect. Nurses may breach confidentiality or privacy in a wide variety of ways including with information they post via social media, pictures of patients, comments on social media sites etc. It is important to recognize that instances

of inappropriate use of social media can and do occur, but with awareness and caution, nurses can avoid inadvertently disclosing confidential or private information about patients.

#### Guidelines for usage of Technology in practice setting

##### *Nursing students are strictly prohibited from:*

- transmitting or placing online any electronic media or any patient-related images or information.
- sharing, posting or otherwise disseminating any information, including images, about a patient or information gained in the nurse-patient relationship with anyone unless there is a patient care related need to disclose the information or other legal obligation to do so.
- identifying patients by name or posting information that may lead to the identification of a patient. limiting access to postings through privacy settings will not sufficiently ensure privacy.
- referring to patients in a disparaging manner, even if the patient is not identified. taking photos or videos of patients on personal devices, including cell phones. follow employer policies for taking photographs or videos of patients for treatment or other legitimate purposes using only employer-provided devices.

##### *Nursing students should:*

- maintain professional boundaries in the use of electronic media. Like in-person relationships, the nurse has the obligation to establish, communicate and enforce professional boundaries with patients in the online environment. The fact that a patient may initiate contact with the nurse does not permit the nurse to engage in a personal relationship with the patient.
- consult employer policies or an appropriate leader within the organization for guidance regarding work related postings.
- promptly report any identified breach of confidentiality or privacy bringing any questionable social medical content posted by a colleague that violates ethical or legal standards to the attention of the colleague. If the posting could threaten the patients' health, welfare or right to privacy, the nurse has the obligation to report the matter to their supervisor.
- be aware of and comply with agency policies regarding use of agency-owned computers, cameras and other electronic devices and use of personal devices in the clinical setting.
- not make disparaging comments about clinical sites, co-workers, instructors, or students. This includes any comments that are threatening, harassing, profane, obscene, sexually explicit, racially derogatory, homophobic, or otherwise offensive.
- not post content or otherwise speak on behalf of the agency unless authorized to do so and follow all applicable agency policies.

##### *To ensure safety and security while using electronic devices, students must:*

- not use camera, video or recording features in any clinical, hospital, or agency environment.
- maintain patient confidentiality and privacy: students will not use patient names, numbers, or other identifying data.
- follow agency policies/best practice guidelines regarding medical asepsis and use of electronic devices in clinical settings.
- maintain awareness of their surroundings while using a device.
- maintain vigilance and keep the device on their person to prevent theft. Do not loan out to others.
- ensure that the device is password protected and locks automatically after 3 minutes of non-use.

##### *Professional Conduct:*

- Students are not permitted to engage in personal business while in clinical without instructor permission, this includes voice calls, texting, or internet browsing for nonclinical information.

- Mobile devices are to be put away and set on quiet mode when interacting with patients.
- Permission must be obtained by a patient, health care team member, or instructor prior to any form of recording. Adhere to BCIT Policy 5201 Recording in the Classroom.
- When a device is going to be used in the presence of a patient/client, health care team member, or instructor, students must first state their purpose for using the device.
- All sounds on devices are turned off when in clinical, classes, meetings, or conferences.
- Students will inform their supervising nurse when they are using the device to access information for clinical practice.

#### References

BCCNM Practice Standard Practice for Registered Nurses Privacy and Confidentiality

Canadian Nurses Association Code of Ethics for Registered Nurses

## B-5 STUDENT CLINICAL PLACEMENTS

All student practice placements are arranged through HSPnet and are coordinated with other health care programs in BC. The BCIT BSN program must follow the Inter-School Guidelines for clinical placement selection, as such students are NOT able to arrange their own practice placements or preceptors. The BSN program aims to provide a consistent and comprehensive approach to arranging clinical and practice education experiences for all BSN students. The following guidelines have been developed to assist this aim.

### BSN Program Clinical Placement Guidelines

- Students rotate through a variety of practice settings.
- Clinical placements are determined by the program faculty prior to the student entering the term.
- Clinical Placements are determined by HSPnet availability and the Term's specific focus of learning. A student's personal demographics are not a determining factor.
- The BSN program is responsible for providing students with clinical experiences that allow students to meet the program and/or course learning outcomes and/or competencies. Individual student learning experiences will vary.
- Clinical placements can be at any lower mainland hospital, health unit or agency site, and are scheduled during various days and times of the week.
- Focus of Practice (FOP) requests for the preceptorship requires a selection process.
- Clinical placements may be changed due to agency closures and other variables.
- The BSN program reserves the right to make changes to a student's clinical site or schedule.
- All students are required to find their own transportation throughout the duration of the BSN program. Students are responsible for their own transportation including the associated costs of travel.
- As an expectation of the BSN program, all students will be expected to commute throughout the lower mainland.

### Practice Education Requirements

- Students are responsible for ensuring that their practice education requirements are up to date throughout the program.
- The site-specific requirement for each health authority must be completed prior to beginning the clinical placement experience.

## B-6 TRANSPORTATION

- Students cannot transport patients in personal vehicles.

- With instructor permission, students may accompany a patient/client in an ambulance, provided a nurse/Paramedic is present and responsible for the patient. Students are in an observational capacity only.
- Students cannot accompany a patient off the hospital grounds, away from the client's residence, or place of contact in community, without approval from an instructor, care provider, and in accordance with agency policy.

## C – SIMULATION

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In the BCIT BSN program, simulation is integrated into nursing practice and theory courses. Simulation includes various modalities such as in-person, manikins, simulated participants, and virtual. Simulation encompasses psychomotor skills labs from nursing practice courses. In general, simulation is often referred to as a type of experiential learning.

It is expected that students engage in simulation experiences in the same ways that they would in clinical per the above. There are some additional considerations for working safely and professionally in simulation spaces. Students should review the Experiential Learning Space Orientation module in LearningHub prior to entering any experiential learning spaces.

### C-1 EXPERIENTIAL LEARNING SPACE GUIDELINES

All BCIT BSN students are required to adhere to the BSN Experiential Learning Space Guidelines. This document outlines the standards and procedures that students must follow to ensure the effective and safe use of experiential learning spaces. Students are expected to familiarize themselves with the guidelines and consistently apply its principles during simulation experiences. For detailed information, students should refer to the BSN Experiential Learning Space Guidelines document available on the LearningHub site of any course offering simulation.

### C-2 EVALUATION IN SIMULATION

Students will be informed of how they will be evaluated in a simulation/lab experience prior to the simulation learning experience. In general, students are evaluated on their preparation, participation, punctuality, and professionalism.

### C-3 RECORDING IN SIMULATION LEARNING EXPERIENCES

Recording is a tool in simulation experiences to support student learning. It allows students to review their practice and consider changes that need to be made. BSN follows BCIT Policies for privacy and confidentiality when recording simulation learning experiences.

Students will be informed if their session will be recorded prior to the simulation learning experience.

Reference

BCIT Information Access and Privacy

## D – STUDENT HEALTH

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### D-1 FITNESS TO PRACTICE

Students are expected to meet the BCCNM requirements for fitness to practice as outlined in the BCCNM Standard 1: Professional Responsibility and Accountability, Number 6: Maintains own physical, psychological, and emotional fitness to practice. Students who do not meet this Standard may be required to have a medical review. The review may include a comprehensive health assessment and related diagnostic testing to determine suitability for nursing from a health perspective and to make recommendations regarding continuation in the program.

BCIT BSN students may experience health concerns that affect their skills, abilities, and judgement at times. Students who are unwell may not be able to provide safe, competent nursing care. Students must recognize their own limitations, act professionally at all times, and take responsibility for ensuring continued competencies.

Students whose health constitutes a hazard to patients will not be permitted to attend clinical experiences.

**NOTE:** Students CANNOT attend clinical experiences if they pose a risk to patients/clients in the clinical setting. Students must consult with their instructors and/or Program Head if they are unsure of their fitness to practice or ability to provide safe care.

### D-2 SPLINT, CAST, CRUTCHES ETC. IN THE PRACTICE SETTING

Students with issues related to splints, braces, cast, or crutches, etc. may not be permitted on clinical sites due to the BCCNM Physical Requisite Skills and Ability requirement, and for personal safety and infection control.

### D-3 LATEX SENSITIVITY/ALLERGY

A student who has a latex sensitivity/allergy must inform their instructor prior to the start of the course. Accommodations for latex sensitivity and allergy are made as per Health Authority/agency policy.



## E - SAFETY

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### E-1 REPORTING SAFETY EVENTS

In the case of a safety event during clinical, the student will adhere to institute, BSN and clinical placement site policies and protocols.

Complete all agency required documentation as well as the BCIT BSN Safety Event Reporting form, which is located on each practice course LearningHub site.

Review the Guide for Injured Students located on the BCIT First Aid website, in the case of a student injury.

### E-2 STUDENT INJURY ON BCIT CAMPUS

The first aid services at BCIT are available to respond to illness, injury, or exposure concerns by any BCIT employee, student, or visitor. First aid can be accessed at the first aid office or delivered at a campus location to provide treatment as needed. See BCIT First Aid website for more information.

This section applies to a student injury that occurs while on BCIT campus. The following steps are to be taken:

- Notify your instructor immediately
- Call 911 if emergency treatment is required and BCIT Security (they will coordinate emergency services)
- If not an emergency but treatment is needed, access BCIT First Aid
- Complete the BCIT Student Injury Report Form and any other required documentation

### E-3 STUDENT INJURY IN THE PRACTICE SETTING

This section applies to any student injury that occurs in any clinical practice setting while the student is present as a nursing student.

Students participating in an approved clinical component of BCIT's programs are eligible for WorkSafeBC compensation coverage. To receive WorkSafeBC compensation coverage, ensure all documentation is completed in a timely manner.

When an injury occurs during clinical practice, the student must follow BCIT, BSN and agency policy. The following steps are to be taken:

- The student must report any injury to their instructor, preceptor when in preceptorship, immediately. The instructor and student are responsible for knowing the protocol and guidelines within the agency, and BCIT policy for reporting an injury. All injuries require reporting as per the BCIT First Aid Reporting Procedures.
- Injuries that are blood and body fluid exposure are followed up through the agency as well as the BCIT First Aid Reporting Procedure. **All blood and body fluid exposure requires students to report to the nearest Emergency Department as soon as possible**, follow the process outlined by the Emergency Room physician, including follow up care.
- Complete all required documentation including the BSN Safety Event Reporting form, and the Hospital Safety Event (PSLS) form.

The BCIT Safety, Security & Emergency Management website can be viewed for forms, process and contact information. It is the student's responsibility to familiarize themselves with institute and agency policies regarding injuries, exposures, etc.

## F – PROGRESSION & ADVANCEMENT IN THE BSN PROGRAM

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The BCIT BSN program recognizes the need to set guidelines for how students shall progress toward academic degree completion. The scope of application applies to students enrolled in any theory and practice courses in meeting academic program requirements for the BSN program.

### F-1 PROGRESSION REQUIREMENTS

A student's progression through the BSN program requires maintaining satisfactory grades and the approval of nursing instructors that a student is qualified in all relevant aspects to practice nursing safely, ethically, and competently.

The BSN program reserves the right to review at any time the student's ability to practice safely and competently and will do so automatically when the student:

- does not meet the BSN minimal grading requirement for a course (See section A-2)
- is reported by an instructor or preceptor as having practiced unsafely, unprofessionally, or unethically.

#### Academic Progression Sequence Guidelines

- Progression is based on the sequential arrangement of the curriculum. Students may not take a succeeding term course without completion of the previous term course(s) or prerequisite course(s).
- Students in the BSN program must successfully complete all courses from one term before moving to a next term. Progression is contingent upon satisfactorily completing the prescribed BSN curriculum.
- It is strongly recommended students maintain the sequential arrangement of curriculum. Only in extenuating circumstances will the student be given permission to alter sequence. This permission must be sought through the Associate Dean of nursing and will be considered on an individual basis.
- BSN theory courses that are co-requisites to BSN practice courses must be taken at the same time, or within 6 months of finishing one of the courses. Only in extenuating circumstances will the student be given permission to alter sequence. This permission must be sought through the associate dean, nursing.

#### Pre-requisite

- A prerequisite is a specific course or other requirement that must be successfully completed prior to being registered into a specific subsequent course or program.
- BSN courses are sequenced to support the integrity of nursing education and benefit the student's learning content in a logical sequential manner.
- A student who has not successfully completed all the required pre-requisite courses will not be registered for the following term. As such, the student will have to reapply for admission to the program. This will be based on availability of seats and a seat is not guaranteed. The student may need to wait to re-enter the program.

#### Co-requisite

- A co-requisite is a course or other requirement that must be taken at the same time (or prior to) as another course or requirement. In the BSN program, these may be courses that incorporate practice

- course experience in a theory course, or a course that provides required knowledge taught to ensure safe clinical practice.

#### Other Threats to Progression and Advancement

Although satisfactory academic performance, and meeting practice competencies and professional standards are prerequisites to advancement, these are not the sole criteria in the consideration of the suitability of a student's progression and graduation. See related Institute policies on academic or student conduct (non-academic).

## F-2 GUIDELINES FOR ASSESSING STUDENT PROGRESS IN NURSING PRACTICE

Nursing Practice courses include clinical placements and simulation (i.e. sims and labs). Nursing practice is a crucial and vital part of nursing education. Clinical evaluation is key to ensuring students' clinical competence, application of knowledge and clinical reasoning and judgment, all of which are important to patient safety and the provision of quality nursing care.

All students in practice courses have their learning assessed and documented on the clinical evaluation form. The form is completed by *both* the student and the instructor midway in the course (referred to as the midterm evaluation) and then at end of the course (referred to as the final evaluation). When a student is deemed competent, this means the student is capable of performing the activity as per the leveling for the assigned clinical course. The clinical evaluation form is adapted to address the learning outcomes and competencies for each of the three years of the program.

#### Assessing Student Performance Framework

Students and instructors work collaboratively to facilitate the attainment of individual student learning needs and the achievement of course and program outcomes. This partnership is based on professional open communication, respect, cooperation, mutually established goals, and reciprocal learning. The partners have the responsibility to support and maintain a positive environment for learning.

The following are stages in the assessment of learning progress and are generally carried out in this order:

1. Satisfactory standing in the course is determined by the student's demonstrated achievement of course outcomes/competencies.
2. Both the student and the instructor actively participate in the learning partnership to facilitate student learning for the student to attain the course outcomes/competencies.
3. Ongoing professional communication between the student and the instructor is essential to maintain a quality learning environment. Communication may be verbal and/or written.
4. When a student is not progressing, the student and instructor will outline the concerns and together will formulate a written Student Progress Plan. The instructor will implement this plan to support the student to meet course outcomes/competencies. The student and instructor to meet regularly (i.e., weekly, or more often as needed) to discuss progress. The instructor provides ongoing evaluation of the student's progress. The instructor may modify or reduce the student's scope of practice to ensure patient safety.
5. For students who continue to struggle to meet course outcomes/competencies, and/or are at risk of course failure, the instructor is to recommend the student meet with the Program Head. The student is responsible to initiate this meeting with the Program Head. The Program Head

and student will develop student performance goals. Further student support is recommended and/or options may also be discussed.

6. Students must demonstrate satisfactory progression throughout the term and meet course outcomes/competencies to achieve a passing grade.

### Steps to Assess Student Performance

#### *Discussions*

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- Students will share previous learning plan(s) and discuss learning strategies with the instructor.
- Student and instructor engage in discussions related to the student's learning based on course expectations (course outcomes/competencies, student individual learning plans).
- Instructor is to align and link student's progress to course outcomes/competencies.
- Trends and patterns of strengths and areas for improvement are identified by the student and instructor and discussed on an ongoing basis.
- Instructor provides feedback on student's strengths and areas for improvement on an ongoing basis.
- For a student whose performance is questionable and has had no other previous concerns, the student and instructor meet to discuss the situation. If there is no change in performance, a Student Progress Plan will be initiated.
- Any student not making progress in their practice can anticipate meeting regularly (i.e. weekly or more often as needed) to discuss their situation.
- Students can invite a class rep or BCIT SA Advocate to meetings with the instructor.

#### *Documentation*

- Student individual learning plans (assignment in practice courses) are revised by the student and discussed with instructor as per course schedule, at mid-term, or as needed.
- When a student is at risk of not meeting course outcomes/competencies, a Student Progress Plan is implemented.
- Instructor works collaboratively with the student to develop a Student Progress Plan which identifies areas for improvement along with appropriate measures to support improvement of performance.
- The student provides strategies to address areas for improvement and add these to the Student Progress Plan.
- For students who continue to struggle to meet competencies/indicators and/or are at risk of course failure, will be recommended to meet with the Program Head. The student is responsible for initiating this meeting.
- When meeting with the Program Head (PH), the student and PH will develop student performance goals. Further student support is recommended and/or options may also be discussed.
- Midterm and final clinical evaluations are completed, discussed, and signed by both student and instructor.
- Student learning plans are finalized at end of each term and carried through to the next practice experience.
- Student learning plans are maintained across the program and reviewed in collaboration with instructors.

### Student Progress Plans

The Student Progress Plan formally documents areas for student improvement to meet learning outcomes/competencies and identifies a clear plan of action (strategies). The aim of the progress plan is to support the student to address areas of concern such that, if addressed adequately, course competencies may be met and result in a passing grade. The instructor works collaboratively with the student to develop the Student Progress Plan in which the needed areas for improvement are identified along with appropriate measures to ensure the improvement of performance. The student along with the instructor provide strategies to address the practice concern. Both parties sign the document.

A Student Progress Plan will be generated for all students at risk of failing a course. Other reasons for completing a Student Progress plan may include:

- Reporting unsatisfactory performance or progress in a course when a student is not following through on suggested learning plan strategies or using available resources
- Informing a student that unsatisfactory attendance in a course may affect their ability to meet course outcomes
- Informing a student that they have breached a significant BCIT, program or Health Authority/agency policy or procedure.

If the student's behaviour/performance remains a concern, then further action is needed that could result in the creation of another Student Progress Plan, removal from clinical placement and/or course failure.

- At this point, the Program Head must be notified and consulted.
- Removal from clinical is recommended for those who create patient safety concerns. Examples, when a student:
  - demonstrates a consistent lack of understanding of their limitations
  - clearly and repeatedly cannot anticipate the consequences of their actions or lack of actions
  - consistently fail to maintain appropriate communication with faculty and staff about patient care
  - is dishonest with faculty and staff about the care provided to a patient

For students who continue to struggle to meet course outcomes/competencies and/or are at risk of course failure, instructor recommends student meet with the Program Head. The student is to initiate a meeting with the Program Head. The Program Head may develop student performance goals and initiate further student support and/or other options in consultation with the student.

## F-3 RESOLVING ISSUES WITHIN LEARNING PARTNERSHIPS

### Problem Solving within the Instructor, Student and/or Preceptor Partnerships

Effective problem-solving within the instructor, student, and preceptor partnerships is vital for fostering a collaborative and supportive educational environment. By establishing clear communication channels, these partnerships can address issues promptly and constructively. Through mutual respect and active engagement, they create a dynamic and responsive learning experience that benefits all parties involved.

When there are concerns about the instructor/student/preceptor learning partnership, the parties are to actively work toward resolving the problem by:

- Following the lines of communication
- Communicating the issue or concern clearly, professionally and directly with individuals involved in a timely manner.
- Coming to an agreement regarding strategies to follow. This may be informal (verbal) or in writing.
- Committing to review progress at agreed upon intervals, if necessary.
- Agreeing to refer the matter to an appropriate third party if it is apparent that the issue/problem cannot be resolved.

#### **Lines of Communication**

Following established lines of communication is essential for clarity, efficiency, and accountability. It ensures information is consistently and promptly disseminated, prevents misunderstandings, and fosters professionalism. Proper communication channels help manage conflicts, document important exchanges, and maintain coordination, especially in complex environments. Adhering to this process promotes a respectful, organized, and effective learning environment.

#### ***Related to a specific Theory course***

For any questions about course logistics, content, expectations, academic concessions, grading, etc., contact your course instructor first. If your questions are not resolved, then reach out to the Program Head for further assistance.

#### ***Related to a Practice course***

For practice course-related questions and concerns, including those about the preceptorship course, contact your course instructor first. If your questions remain unresolved, then contact the Program Head for further assistance.

#### ***Related to Student Group***

Any issues or concerns within a student group should first be addressed within the group, with the involvement of the course instructor. If the concerns remain unresolved, students should then contact the Program Head for further assistance.

#### ***General questions about the BSN program***

For general questions about the BSN program, including those about program structure, curriculum, and clinical practice learning, please contact your Program Head.

## G – GRADING SYSTEMS AND CIRCUMSTANCES

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### G-1 STUDENT INITIATED WITHDRAWAL

Students who withdraw before the official withdrawal date will receive a 'W' on their transcript.

Students who withdraw after the official withdrawal deadline may receive a 'LW' (Late Withdrawal) on their transcript. A 'LW' grade will be given only in extenuating circumstances with approval by the Associate Dean.

Program Heads send withdrawal requests to Student Records on behalf of the student.

Procedure:

1. The student informs the course instructor(s) and Program Head of their intention to withdraw.
2. If the student plans to withdraw from ALL the courses in the term or the BSN program, they must complete the BCIT Program Withdrawal Form and submit to the Program Head.
3. If a student plans to apply for program readmission, they must apply for readmission (refer to the BSN Readmission Policy).

### G-2 WITHDRAWAL OF A STUDENT FROM CLINICAL FOR UNSAFE PRACTICE

The BSN program reserves the right to determine unsafe practices and to prohibit a student's access to a clinical practice setting when performance during a clinical course is judged to be unsafe. The determinants for safe and professional practice are derived from the BCCNM Nursing Standards and the CNA Code of Ethics.

If a student's clinical performance endangers patient safety, the student may be removed from the clinical area by the instructor or unit. Some examples of unsafe practice are:

- working out of scope and not seeking help appropriately
- failure to focus on patient(s) needs
- inadequate preparation for patient care
- dishonesty
- performing procedures without prior teaching, adequate supervision, or in violation of program or agency policy
- inappropriate behaviour towards patients, staff, or instructor, e.g., rude, aggressive
- avoidance or omission of care
- implementing unsafe care
- illness which interferes with assumption of responsibilities

The student will meet with the Program Head and instructor to discuss the situation. The outcome of the meeting could include a recommendation for continuation in the course, further student support, or removal from the clinical setting for the remainder of the term. The recommendation is based on the following factors:

- the seriousness of the incident(s)
- the risk of further unsafe practice

- the level of supervision required by the student in question
- the level of supervision required by other students in the clinical group

If the recommendation is student support, in partnership with the instructor (and Program Head if appropriate), a Student Progress Plan is initiated.

If the recommendation is removal from the clinical setting for the remainder of the term, and an RTD (Required to Discontinue) grade is considered appropriate, the following steps are taken:

- The Associate Dean and Dean are informed of the recommendation and provided with documentation of the student's clinical practice.
- If the RTD is supported, the Associate Dean/Dean then forwards documentation to the Registrar who makes the final decision. The Registrar will notify the Student Records department and the student of the RTD grade.

### **Professional Misconduct**

Misconduct related to professional nursing practice will be regarded very seriously by the involved nursing faculty. Incidents will be investigated on an individual basis and action will be taken as appropriate. Misconduct may result in removal from the clinical course and/or denial of readmission to the program. (BCIT Procedure 5102-PR1)

## **G-3 END OF TERM FAILURE**

Students who have been unsuccessful in completing the requirements of a course will either receive a %F (e.g., 62F) or an "Unsatisfactory" standing depending on the course (refer to course outline).

The instructor makes the recommendation of 'failure' or 'unsatisfactory' based on the student's work. This grade will be presented at the Program Marks Review Committee meeting, and then to the School of Health Marks Review Committee.

Students who have failed courses will not progress on to the next term and will be notified in writing by the Office of the Registrar.

Students who wish to apply for readmission to the program should refer to Readmission to the BSN Program policy in this document.

## **G-4 CONDITIONAL STANDING (INCOMPLETE, PROVISIONAL PASS)**

The following information aligns with BCIT Policy 5103 and follows Procedure 5103-PR1.

### **Provisional Pass**

A student who has failed a course may be granted a temporary 'Provisional Pass' standing, if they meet certain criteria, and on the recommendation of the instructor and approval from the Program Head.

### **BSN process to address Provisional Pass**

Students who receive a Provisional Pass are reviewed by the School of Health Science Marks Review Committee at midterm of the following term. The instructor or Program Head of the higher-level course will present data on the student's progress and a decision will be based on:



- if the student has demonstrated satisfactory progress in the higher-level course(s), the Provisional Pass will be revoked (removed).
- if the student has not demonstrated progress and/or has not met requirements of the Provisional Pass in the high-level course(s) the provisional pass is not cleared, then:
  - the provisional pass standing is changed to %F or U (Unsatisfactory)
  - the student withdraws from the higher-level course(s) in which they are currently enrolled
  - the student withdraws from any other courses in which the failed course is a prerequisite
  - the student may apply for Readmission as per policy

The BSN Associate Dean may defer the mid-term review date, but only under extraordinary circumstances.

## F-5 READMISSION TO THE BSN PROGRAM

Students who interrupt their full-time studies may apply to re-enter their program at a future date. Readmission will depend on seat availability, time elapsed since enrolment, the successful implementation of a plan resolving previous academic difficulties, suitability of program selection, and other admission criteria.

Where a program has made significant changes to the course material, the student may be required to repeat courses and/or complete additional courses.

To request readmission to the Institute, an application form must be completed and submitted to Admissions. (BCIT Policy 5003)

### BSN Program Readmission Process

For the purpose of this policy, the term 'applicant' refers to a BSN student who has failed or withdrawn from the program and has applied for readmission.

1. The BSN program reserves the right to deny readmission to the program after a single practice course failure or withdrawal. Denial of readmission includes, but is not limited to:
  - a. Violation of BCIT, BSN and Health Authority's policies, guiding principles and standards of conduct.
  - b. Violation of the BCCNM Professional Standards for Registered Nurses and the Canadian Nurses Association Code of Ethics.
2. Applicants whose withdrawal was not related to performance and who are in good academic standing will be given priority in the selection.
3. Students who have withdrawn from or failed any theory or practice course within the BSN program that is a prerequisite for a course in the next level of the program, will be removed from the program at term end. Such students must apply for readmission to return to the program.
4. Length of time out of clinical: Readmitted applicants who have been out of the program for three (3) sequential terms may be required to repeat and successfully complete a previous clinical course, as well as theory courses and/or additional courses, to ensure they are current with the latest clinical practices and theoretical knowledge. This requirement helps maintain high standards of competency and safety in clinical practice.

5. Applicants who have been accepted to continue in the BSN program will be provisionally readmitted until all outstanding documentation has been received by the institute/program (e.g., updated CPR, medical clearance, Health Authority requirements, etc.).
6. Applicants who withdrew due to a medical reason must submit a BCIT Medical Certificate to their Program Head one week prior to term start. The certificate must confirm that the applicant is capable of resuming full nursing program responsibilities and be signed by the primary health care provider.
7. Readmission is subject to clinical availability.

### Limits to Number of Attempts to Complete a Course

Section A-2 discusses the number of attempts for theory and clinical courses. Refer to this section for specific information.

### Student Responsibilities

- A student considering withdrawing from the BSN program for any reason is advised to meet with their Program Head prior to finalizing the decision.
- A student may not withdraw after the withdrawal deadline date unless the circumstances are unusual and/or warranted. Late withdrawal requests designed to avoid failing or low grades are not acceptable. (BCIT Policy 5103)
- To request readmission to the Institute students must submit the BCIT online application form by noon on the final day of the term.
- If readmission is granted, the student is required to arrange a meeting with their Program Head to discuss their student progress plan and resources available.
- Readmitted students are subject to comply with all conditions of clinical requirements (e.g., current certifications, and immunizations, etc.)

### Readmission Committee Responsibilities

- The Readmission Committee will meet each term after the SOHS marks meetings to review all readmission applications.
- The Readmission Committee is responsible for the final selection of all readmitted students and reserves the right to accept only those applicants who are best suited for success in the program. Criteria may include:
  - academic standing
  - length of time out of the program
  - adherence to BCIT/BSN policies and BCCNM professional standards
  - overall program performance
- Students in good standing who have two instances of withdrawals from a clinical course may have their readmission application evaluated on an individual basis by the Readmission Committee.
- When the number of qualified applicants exceeds the number of available seats, a readmission waitlist will be created for the upcoming term only. If a seat becomes available prior to the start of term the waitlisted applicants will be contacted. After term start, the waitlist is closed, and applicants must reapply to be considered for the next intake.
- The Readmission Committee consists of the:
  - Associate Dean, Nursing (Chairperson)

- Program Heads
  - Placement Coordinator
  - Program Coordinator(s)
- The Program Head of the specific year presents the applicants to the Readmission Committee.
- The Registrar's Office will officially notify the applicant of the Readmission Committee decision.

# H – EXAMS

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## H-1 BSN GENERAL STUDENT EXAM GUIDELINES

### Definitions

BYOD– bring your own device. Students may need to bring their own laptop for some activities, e.g., exams.

Face to face online exams – virtual exam undertaken on a computer device proctored on the BCIT campus

Integrity Advocate (IA) – proctoring software tool integrated into the LearningHub.

Online exam – virtual exam undertaken on a computer device using the internet.

Proctor/Invigilator – an authorized person who ensures the identity of the test taker and the integrity of the test taking environment. In most cases this is a BSN instructor, however it may not always be the course instructor.

### Student Examination Guidelines

- Whenever possible, exams are scheduled during class time, and all students must write the exam as scheduled.
  - For courses that have exams scheduled outside class hours, the following statement is found on the course outline: All exams are held within the course dates, however they may be scheduled outside of regular class times. Exam dates and times are found on the course LearningHub site.
- Start and end times of exams are strictly followed.
- Exams are delivered in a face-to-face online format. However, there may be times when exams are delivered online remotely, but still requiring proctoring.
- All exams are proctored by instructors. BCIT offers limited Integrity Advocate (IA) software licenses.
  - Proctor(s) will move around the room for the duration of the exams.
  - If the exam is proctored by IA software, an instructor will be available during the exam to address any questions.
  - Integrity Advocate will be used exclusively for midterm and final exams.
- All exams are closed book unless otherwise stated.
- For a Bring Your Own Device (BYOD) exam, it is the student's responsibility to arrange access to an appropriate computer device with sufficient battery power to last the duration of the exam. The student is responsible for bringing a power cord for the exam if needed.
- Students with exam accommodations are responsible to plan in advance.
- Students must conduct themselves honestly and in accordance with established rules for a given examination, which will be articulated by the proctor prior to the examination beginning. Should dishonest behaviour be observed by the proctor(s), pleas of accident or forgetfulness shall not be received.
- Students who arrive after the exam has begun, within the first hour of the exam, will not be given extra time.

- Exam results may take up to two business days to post.

## H-2 STUDENT CONDUCT DURING EXAMS

### Face to face online exams

- Students are responsible for arriving at the exam room on time with adequate supplies (pens, pencils, calculators, valid BCIT Student ID) and may be admitted 10 to 15 minutes before the exam begins.
- Upon entering the exam room, students sign in, produce BCIT Student ID card and refrain from talking to or communicating with other students.
- All cellphones, smart watches, tablets, and other electronic devices are required to be turned off and placed away from the student's workstation for the duration of the exam. Students may be required to store personal belongings in a designated area, identified by the instructor.
- Any material brought into the examination room may be inspected.
- Once admitted into the exam, students are not allowed to have any books, study materials, bags, cell phones, or other electronic devices on their desk, unless allowed by the instructor in their written instructions. The proctor identifies an area to store items.
- Students are not to wear earphones or headsets. Earplugs are allowed.
- If scrap paper is required, proctor to hand it out. Students are to hand in scrap paper to the proctor upon exiting the exam.
- Students are not to take any exam material from the exam room.
- Students are to write their name on the paper.
- During the first hour after the exam starts, no student is permitted to leave the exam area unless all students eligible to write the exam are present. See BCIT Procedure 5103 – PR1, section 1.2, Students Entering & Leaving the Exam Room.
- If students are more than one hour late, they will not be admitted into the exam. If a student is refused admission into an exam, they should report to their instructor or Program Head immediately.
- No breaks are scheduled during the exam. However, students with approved accommodation that include breaks are the exception.
- Students must be accompanied to the washroom and cannot leave the exam room unescorted. Washroom breaks are monitored. Time missed due to a washroom break will not be made up.
- During an exam, students can only communicate with the proctor(s). The proctor cannot give any guidance or answer questions regarding exam content.
- Food is not allowed during exams; however bottled water is allowed.

### Remote online exams

- Prior to the exam, students are expected to understand technical requirements for the exam and check well ahead of time that the computer is compatible.
  - Ensure computer and browser meet proctoring software requirements.
  - Ensure working camera on computer.
  - Students are responsible to familiarize themselves with the proctoring software and its requirements prior to writing the exam.

- Students arrange accommodations on campus if they have connectivity issues or require space to write the exam. Students are to locate a private space to write their exam.
- Students have to be fully prepared, computer on and everything in hand, at least 15 minutes before start time.
- Students must produce their BCIT Student ID card.
- Students are not allowed to copy, photograph, or record exam materials.
- Students are not allowed to communicate with peers or others during the exam.
- Students must have their camera on for the duration of the exam.
- Only one monitor is permitted.
- All cellphones, smart watches, tablets, and other electronic devices are required to be turned off and placed away from the student's workstation for the duration of the exam.
- If scrap paper is approved by the proctor, students are required to show the front and the back of the scrap paper to the proctor.
- Students may be asked to show their workstation to the proctor to ensure no documents are on or open on the desk.
- If students have any technical problems with their exam, they must advise the proctor immediately.
- If the exam is proctored by Integrity Advocate (IA), go to the LearningHub Student Resources: IA Overview and Preparation for Students

### Cheating

As per BCIT Policy 5104, cheating in an exam includes:

- Using or concealing unauthorized notes or aids.
- Unauthorized possession or use of an exam questions sheet, answer book or completed exam.
- Unauthorized use of electronic devices during an exam.
- Using or attempting to view or use another student's answers.
- Unauthorized communication or attempting to communicate with others during an exam.
- Failing to take reasonable measures to protect answers from other students.

## H-3 ABSENCE FROM AN EXAM

For students missing an exam due to medically substantiated illness, or other reviewed and approved extenuating circumstances, refer to BCIT Procedure 5101-PR1 Implementation of Student Regulation – Section Titled: Absence from an Exam.

## H-4 POST EXAM REVIEW

A post-exam review provides students an opportunity to identify both strengths and gaps in knowledge, explore content to apply classroom knowledge, and differentiate correct from incorrect application of content. Though students are encouraged to engage with faculty on course content, instructors will only provide an overview of exam results (not individualized questions pertaining to content). The following guiding principles help preserve the integrity of the exams. Any breach in adhering to the following principles could result in academic or non-academic misconduct for the student.

### Post Exam Process & Guidelines:

In order to maintain the academic integrity of exams, exams are viewed in a supervised setting with the same criteria for exam writing.

- Reviews are done in-person supervised by faculty.
- Exams are not returned to students to review without supervision by an instructor.
- Students may be requested to show their student ID and sign in.
- Students viewing exams may not be accompanied by others.
- Location for viewing is determined by the faculty.
- All belongings must be placed at the side of the room or under the table. Nothing is permitted to be on the viewing table.
- Students are not allowed to have any books, study materials, bags, cell phones, or other electronic devices during review.
- Students do not receive or make a copy of the exam and/or exam questions to take with them.
- Students may not consult books, notes or any electronic devices during the exam viewing.
- Students cannot take any notes or photographs while viewing exams.
- Students may be provided with a copy of the exam and allowed to self-review for a maximum of 30 minutes.
- Post-exam reviews are not intended as an opportunity for students to challenge the validity of test items.
- Any student who violates the review's collegial setting will be asked to leave the session.
- Students are to keep exam questions confidential and may not reproduce exam questions or discuss exam questions with other students outside the post-exam review.
- Students may request a grade related review as per Policy 5103 and Procedure 5103-PR2.

### References

BCIT Policies 5101, 5102, 5103 and 5104

# I – STUDENT LEADERSHIP

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## I-1 CLASS REPRESENTATIVES

The BSN program values positive and supportive student experiences. The BCIT Student Association offers students a leadership opportunity to serve as the representative voice for their cohort as a Class Rep. The role of the Class Rep is to communicate opportunities for improvement to the Program Head as appropriate. It is considered a privilege to act in this role.

## I-2 STUDENT REPRESENTATION ON BSN COMMITTEES

A significant amount of the BSN program work is done by committees. The BSN program values students' perspectives and input, and some committees include student representatives. Committee membership provides students with leadership opportunities to observe the decision-making process and collaborative teamwork. Student Reps on BSN committees do not have formal voting privileges.

## I-3 STUDENT REPRESENTATION ON BCIT STUDENT ASSOCIATION (BCITSA OR 'SA')

Students lead and govern the affairs of BCITSA. The Board of Directors is composed of 12 elected Student Executives and Student Councilors from each of the different Schools at BCIT. For volunteer leadership opportunities available go to BCITSA.