Introduction and Purpose:
It is essential for quality education and safe, quality patient care, that Post Secondary Institution (PSI) educators in both direct care and support positions are competent in the practice setting within which they are supervising and teaching students. They must be familiar with the function of setting, including its policies, procedures, guidelines, routines, and reporting structures. All BC Health Authorities abide by Accreditation Canada standards; leadership standards outline requirements for the creation and sustainment of culture that promotes a safe and healthy workplace environment. Additionally, WorkSafeBC Occupational Health and Safety (OHS) regulations outline employer requirements for workplace environments that promote occupational health and safety and to protect staff, students and other persons from work-related risks to their health, safety and well-being.

The purpose of this guideline is to outline the pre-requisites, orientation requirements, and expectations for PSI educators who will be supervising / teaching students at a practice education site. The guideline reinforces the collaborative partnership between the Health Care Organization (HCO) and the PSI that is required for supporting the orientation of the PSI educator and subsequently, supporting the successful integration of students to the practice setting.

Definitions:
Also refer to: Standardized Guideline definitions in the Practice Education Guideline (PEG) Introductory Module.

Orientation: a process for supporting adjustment or adaptation to a new environment, situation, custom or set of ideas. Introductory instruction concerning a new situation.

Practice Standards Guidelines:
Post Secondary Institutions are responsible to ensure that assigned PSI educators have satisfied all placement pre-requisites prior to the start of the placement, including:
- Signed the approved health authority specific confidentiality form (See: PEG 2-1: Protecting Privacy and Maintaining Confidentiality).
- Current professional registration (where applicable)
- Criminal record check, including advanced vulnerable populations check where applicable C(See PEG 1-2: Criminal Record Check)
- Current immunizations / vaccinations as per HCO policies / guidelines (See: PEG 1-3: Immunizations)


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- Current working knowledge of Workplace Health and Safety principles and practices (See Appendix A: Workplace Health and Safety Education/Certification Standards), including:
  - Site specific Fire Safety
  - Infection Prevention /Control
  - Workplace Hazardous Materials Information Systems
  - Workplace Violence Prevention
  - Musculoskeletal Injury Prevention
  - Waste Management
- Current Cardiopulmonary Resuscitation certificate (as required by profession)
- Respiratory Mask Fit Test (as required by the practice setting) (See PEG 1-4: Respiratory Protection)
- Additional prerequisites as required by the practice setting.

The Post Secondary Institution is primarily responsible for orientation of PSI educators to the practice education setting. Every effort should be made to have the previous PSI educator orient the new educator. If this is not possible, the PSI must contact the HCO liaison to arrange for orientation support.

PSI Educator orientation must be completed prior to start of the placement, ideally within two weeks of the placement start date.

The PSI must support PSI educator attendance at required HCO site orientation sessions.

PSI educators are responsible for keeping current on professional / practice requirements, as well as workplace health and safety practices (See Appendix A: Workplace Health and Safety Education/Certification Standards). The PSI educator must be able to practice competently and independently in the practice education setting.

In learning situations where the PSI educator does not feel competent and the need for student supervision arises, the PSI educator must communicate needs to the HCO educator and arrange for alternate supervision for the student for the particular learning activity.

The HCO may cancel the practice education experience if there is evidence that the PSI educator has not met pre-requisites or orientation requirements, or that there is evidence that the PSI educator is not competent in the practice setting to supervise/ teach students.

Roles, Responsibilities and Expectations:
Post Secondary Institution:
Ensure PSI educators are aware of and meet the HCO pre-requisites.

Inform the HCO who the PSI educator will be for each practice placement and what the orientation support needs are. Be aware that the HCO requires sufficient time to organize PSI educator orientation support.

Ensure PSI educators are prepared and supported to facilitate learning in the practice education setting.

PSI Educator:
Complete the HCO pre-requisites and orientation requirements within the expected timeframe.
Maintain currency of all professional/practice requirements, as well as workplace health and safety practices.

Complete self-assessment of practice setting competencies, identify learning needs and arrange for learning opportunities to achieve competency prior to start of placement experience.

Contact the HCO liaison to plan orientation to practice education setting.

*Health Care Organization:*
Communicate Health Authority specific policies and protocols related to Privacy and Confidentiality (See: PEG 2-1: Protecting Privacy and Maintaining Confidentiality).

Support orientation to the practice setting as required, including access to resources (including online, e-learning courses), documents, the practice environment, and other learning opportunities required to meet HCO pre-requisite and orientation requirements.

**Resources and References:**
Accreditation Canada. (2012). *Required organizational practices 2012.* Available at: www.accreditationcanada.ca


Vancouver Coastal Health Authority, Providence Health Care, Fraser Health Authority & Provincial Health Services Authority. (2012). *Student practice education core orientation.* Available at: https://ccrs.vch.ca/catalog.aspx?cid=2992


**Guideline Review History:**

<table>
<thead>
<tr>
<th>Revision #</th>
<th>Date</th>
<th>Author(s)</th>
<th>Brief Description of Change (reason for change)</th>
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<tr>
<td>Original</td>
<td>March 2007</td>
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<tr>
<td>1</td>
<td>February 2013</td>
<td>Carrie Edge (FHA), Heather Straight (VCHA), Carmen</td>
<td>Revised to new template Pre-requisite requirements updated Confidentiality requirements updated</td>
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<tr>
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<td>Kimoto (VCC), Debbie McDougall (BCAHC)</td>
<td>References updated</td>
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Integrated Guidelines for Student Practice Education

Integrated Guidelines for Student Practice Education

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Appendix A: Workplace Health and Safety Education / Certification Standards

<table>
<thead>
<tr>
<th>Health and Safety Topic</th>
<th>Knowledge / Skill</th>
<th>Renewal</th>
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<tbody>
<tr>
<td>Code Red / Site specific Fire Safety</td>
<td>General principles for fire safety, processes/protocols for site specific fire response, evacuation principles and use of fire extinguishers.</td>
<td>Annual at same site Must complete program for each new practice education site</td>
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<tr>
<td>Infection Prevention and Control</td>
<td>Principles of infection control and handwashing. May also require completion of broader concepts of standard precautions depending on program of study.</td>
<td>No formal recertification/review Maintain knowledge/practice currency</td>
</tr>
<tr>
<td>Workplace Hazardous Materials Information Systems (WHMIS)</td>
<td>Basic information for identification, handling and response to exposure/spills of hazardous materials for those who work with or in proximity to hazardous or controlled substances/products.</td>
<td>Annual</td>
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<tr>
<td>Workplace Violence Prevention</td>
<td>Mandatory provincial program for all health care staff. Education includes measures to prevent or minimize any risk of violence to oneself and others, and the general actions to take should violence occur</td>
<td>Annual</td>
</tr>
<tr>
<td>Musculoskeletal Injury Prevention</td>
<td>Education includes risk identification related to work, including recognition of early signs and symptoms of Musculoskeletal Injuries and their potential health effects. For those involved in direct care, education should also include principles and practices of safe manual handling, as well as the use of lifting equipment.</td>
<td>Maintain ongoing competence</td>
</tr>
<tr>
<td>Waste Management</td>
<td>Education includes principles and practices related to disposal of materials, sharps, biohazardous wastes and chemotoxic wastes.</td>
<td>Maintain ongoing competence</td>
</tr>
<tr>
<td>Respiratory Mask Fit Testing</td>
<td>Education on the correct use and care of respirators, respirator limitations, donning and doffing procedures and proper disposal</td>
<td>Fit Testing required annually</td>
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