

UNIVERSITY of
TASMANIA

This is a frequently asked question by facilitators and preceptors. The answer depends on a combination of factors such as the student's current stage in their nursing degree, previous PEP experiences, capability around knowledge and skills and **placement provider policies**. In addition, delegation of activities to students must also be in accordance with individual agency policy as well as in conjunction with the [NMBAs Decision making framework for Nursing and Midwifery](#).

For each Nursing Practice (PEP) unit, the following information is provided:

- PEP unit name, subject code and aim
- Overview of academic units of study recently completed
- Duration of placement in hours and weeks
- Expected level of student ability and performance
- Types of nursing activities students can be exposed to
- Level of suggested supervision

Please note: this information is correct as of date of publication. As course materials move through the final stages of development, some information is subject to change. For the most current version please refer to the PEP website <https://www.utas.edu.au/health/professional-experience-placement/student-information/nursing/clinical-facilitators>. If you have any feedback regarding these documents please contact Jessica Hammersley, Academic PEP Coordinator, School of Nursing at the University of Tasmania via janewett@utas.edu.au

BN Student Developmental Indicators for Nursing Practice 1 PEP

NUR 135

Nursing Practice 1

2 weeks

80hrs

Nursing Practice 1 PEP is considered a 'Foundational Unit' and represents students first time in PEP.

Students are supported to apply beginning level nursing knowledge, skills and professional behaviours. This is achieved through students assisting supervising nurses in providing low-acuity patient care, and through observation and reflection of more complex patient care provided by others.

Confidence and ability: Novice-Beginner Level Learner.

Patient care: Provide fundamental care.

Supervision: Direct supervision to guide scope of practice in conjunction with decision making frameworks as per NMBA requirements.

To note: Medication administration and invasive procedures (excluding BGL's) are not within Nursing Practice 1 scope of practice.

What could Nursing Practice 1 students be involved in?

- ✓ Beginning level patient assessment including health history, monitoring and recording vital signs (no PCA/epidural observations)
- ✓ Beginning level planning of care, demonstrating evidence-informed rationales for proposed care
- ✓ Beginning level documentation that is accurate, concise, uses appropriate health terminology
- ✓ Beginning level clinical reasoning in accordance with supervision requirements with a focus on early phases of the cycle
- ✓ Professional & therapeutic communication with patients and families
- ✓ Personal care, hygiene and mouth care
- ✓ Skin integrity and pressure area assessment
- ✓ Assist with patient nutrition and elimination needs
- ✓ Urinalysis
- ✓ Fluid balance charting (oral intake and output only)

Concurrent academic nursing units have focused on the following:

- Verbal Communication
 - Awareness of rights self and others
 - Professional respect and behaviours
 - Self-reflection of thoughts and actions
 - Supporting patients in their functional health patterns
 - Health and physical assessment at a beginning level
 - Frameworks for clinical reasoning and critical analysis at an introductory level with beginning level interpretation skills
 - Introduction to Mental Health and Primary Healthcare frameworks
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- ✓ Use of safe manual handling techniques and equipment
 - ✓ Support patient mobility and comfort
 - ✓ Bed making and maintaining a safe physical environment around the patient
 - ✓ Basic wound management
 - ✓ BGLs and reporting of blood glucose Level
 - ✓ Observe and share knowledge around medication administration
 - ✓ Practice-safe and effective infection prevention and control
 - ✓ Actively seeking constructive feedback regarding their developing practice and engage in critical reflection
 - ✓ Interprofessional learning opportunities

BN Student Developmental Indicators for Nursing Practice 2 PEP

NUR239

Nursing Practice 2

3 weeks

120hrs

PEP undertaken in Nursing Practice 2 and 3 are considered 'Contextual Units', with the expectation that students 'apply' developing knowledge, skills and behaviours in more specific contexts (patient scenarios, illness types and trajectories), of increasing complexity.

Confidence and ability: Novice-medium level beginning learner.

Students need to demonstrate increasing levels of ability and confidence across the indicators expected in Nursing Practice 1 PEP and beginning level confidence and ability in the areas outlined for Nursing Practice 2 PEP.

Patient Care: Delegation of patient care requirements as appropriate.

Supervision: Students will require **varying levels of indirect** and **direct supervision** to guide scope of practice in conjunction with **decision making frameworks** as per NMBA requirements.

Please Note: Medication administration and invasive procedures require Direct Supervision

Concurrent academic nursing units have focused on the following:

- Written communication skills
- Critical self-reflection and response
- Health assessments relating more deeply to illness trajectories in a range of diseases across the life span, including developing knowledge and skills in the following fields:
 - Cardiovascular Nursing
 - Respiratory Nursing
 - Renal Nursing
 - Pre and Post Surgical Nursing
- Enhanced clinical reasoning and critical analysis skills across a variety of patient scenarios
- Recognising and supporting the management of the deteriorating patient
- Pharmacology for and physiological effects of medications on individuals with cardiac, respiratory and renal conditions.

What could PEP 2 students be involved in?

- ✓ All PEP 1 skills and activities with increased levels of proficiency
- ✓ With adequate supervision and support appropriate to the task, assess, plan, deliver and evaluate evidence-informed and person-centred care to meet patient needs with a range of conditions, including cardiovascular, respiratory and renal disease using the clinical reasoning cycle
- ✓ Professional and therapeutic communication with patients, nurses and the multidisciplinary team
- ✓ Admission and discharge of patients including risk assessment and psychosocial assessment
- ✓ Attend to patient hydration and nutrition requirements
- ✓ Naso-gastric tube insertion and management
- ✓ Attending to patients' elimination needs
- ✓ Insertion, management and removal of indwelling catheter
- ✓ Pre and post op care
- ✓ Basic wound assessment, management & documentation
- ✓ Drainage device management and removal

- ✓ Patient assessment, including:
 - Monitoring, recording and interpretation of vital signs
 - Performing an ECG and basic rhythm interpretation
 - Pain assessment and monitoring
 - General interpretation of blood results
- ✓ Recognise and support the management of the deteriorating patient using Danger, Response, Airway, Breathing, Circulation, Disability, Exposure (DR ABCDE) framework
- ✓ Oxygen therapy
- ✓ Demonstrate an understanding of the physiological effects of medications on individuals with cardiac, respiratory and renal conditions
- ✓ Medication administration (**except S/C, IM and IV**) under **direct supervision** (Consider health agency policy regarding involvement in narcotics administration)
- ✓ Participation in handover using ISOBAR framework
- ✓ Actively seeking constructive feedback on their evolving practice and engaging in critical reflection.

BN Student Developmental Indicators for Nursing Practice 3 PEP

NUR242	Nursing Practice 3	4 weeks	160hrs
PEP undertaken in Nursing Practice 2 and 3 are considered ‘Contextual Units’, with the expectation that students ‘apply’ developing knowledge, skills and behaviours in more specific contexts (patient scenarios, illness types and trajectories), of increasing complexity. Confidence and ability: Novice-medium level beginning learner. Students need to demonstrate increasing levels of ability and confidence across the indicators expected in Nursing Practice 1 PEP and beginning level confidence and ability in the areas outlined for Nursing Practice 2 PEP. Patient Care: Delegation of patient care requirements as appropriate. Supervision: Students will require varying levels of indirect and direct supervision to guide scope of practice in conjunction with decision making frameworks as per NMBA requirements. Please Note: Medication administration and invasive procedures require Direct Supervision		Concurrent academic nursing units have focused on the following: • Enhanced development of clinical reasoning • Enhanced critical self-reflection • Enhanced communication with colleagues, other professionals, patients, families and carers • Further development of fundamental nursing interventions • Interprofessional learning and collaboration • Increased understanding of pharmacology and physiological effects of medications for illness scenarios • Assessing, planning, implementing and evaluating evidence-based care across different illness types and trajectories, with a specific focus on the following practice domains ○ Neurological Nursing ○ Endocrine Nursing ○ Gastrointestinal Nursing.	

What could PEP 3 students be involved in?

- ✓ All Nursing Practice 1 and 2 PEP skills and activities with increased levels of proficiency
 - ✓ Demonstrating increased skills in professional and therapeutic communication with patients, nurses and the multidisciplinary team
 - ✓ With supervision and support appropriate to the task, assess, plan, deliver and evaluate evidence-informed care to individuals with neurological, endocrine and gastrointestinal conditions using the clinical reasoning cycle
 - ✓ Neurological assessment and observations
 - ✓ Neurovascular assessment and observations
 - ✓ Demonstrating understanding and appropriate clinical skills for managing patients on stroke management pathways
 - ✓ Assisting supervising nurses in providing end-of-life care
- ✓ Assessment and management of diabetes
 - ✓ Wound assessment and management
 - ✓ Stoma care
 - ✓ Interpretation of blood results
 - ✓ Demonstrates safe and effective administration of medication including S/C, IM and IV - under **Direct Supervision**
 - ✓ Management of IV therapy, including: priming lines, administration of IV fluids, assessment, documentation under **Direct supervision**
 - ✓ Time management, planning and prioritisation of care for moderately complex patients
 - ✓ Documentation and clinical handover that is accurate, concise and uses appropriate professional language (ISOBAR)
 - ✓ Actively seeking constructive feedback on their evolving practice and engaging in critical reflection.

BN Student Developmental Indicators for Nursing Practice 4 PEP

NUR358	Nursing Practice 4	6 weeks	240hrs
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Nursing Practice 4 & 5 PEP are considered ‘Synthesis Units’, with students required to competently incorporate into practice, the knowledge, skills, professional behaviours and attitudes learnt throughout the Bachelor of Nursing Program.

Concurrent academic nursing units have focused on the following: Professional self-reflection, increased emphasis and practice of clinical reasoning with a major focus on managing allocated patient load with increasing complexity in care requirements. Additionally, students have learnt to apply prior knowledge and accept responsibility for the development of new knowledge and skill in more complex situations.

- Ability and Confidence:** demonstrating beginning level practitioner abilities.
- Patient Care:** Able to demonstrate increasing ability to plan and prioritise care for own patient load (where appropriate) as reasonably expected of a beginning level practitioner.
- Supervision:** Decreasing levels of direct supervision in most aspects of practice (*other than those that require direct supervision to maintain scope of practice such as medication administration or invasive procedures*) in conjunction with **decision making frameworks** as per NMBA requirements.

What could PEP 4 & 5 students be involved in?

✓ All Nursing Practice 1, 2 & 3 PEP skills and activities at a well-developed level, with the ability to clearly articulate a rationale for the care provided to all allocated patients ✓ Demonstrating necessary capabilities and safety in performing a wide range of fundamental nursing interventions ✓ Professional & therapeutic communication that is person-centred. ✓ Consistent provision of effective and comprehensive total patient care for patients with increasing complex care needs ✓ Demonstrating increased levels of proficiency in time management, prioritisation and reprioritisation of care	✓ Demonstrating higher order thinking through application of the clinical reasoning cycle ✓ Identifying and responding to the deteriorating patient with increased levels of proficiency ✓ Incorporating patient education within practice ✓ Demonstrating increased levels of proficiency in medication management including oral, SC, IM and IV medications under direct supervision (Consider health agency policy regarding involvement in S4/S8 administration) ✓ Demonstrating increased levels of initiative and independence in practice	✓ Demonstrating increased levels of accountability and responsibility for own actions within nursing practice ✓ Consistently applying comprehensive theoretical knowledge to practice ✓ Actively seeking and considering constructive feedback on practice ✓ Engaging in critical reflection on practice and incorporating strategies for ongoing development.
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BN Student Developmental Indicators for Nursing Practice 5 PEP

NUR359	Nursing Practice 5	6 weeks	240hrs
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Nursing Practice 4 & 5 PEP are considered ‘Synthesis Units’, with students required to competently incorporate into practice, the knowledge, skills, professional behaviours and attitudes learnt throughout the Bachelor of Nursing Program.

Concurrent academic nursing units have focused on the following: Professional self-reflection, increased emphasis and practice of clinical reasoning with a major focus on managing allocated patient load with increasing complexity in care requirements. Additionally, students have learnt to apply prior knowledge and accept responsibility for the development of new knowledge and skill in more complex situations.

- Ability and Confidence:** Confident, beginner level practitioner capable of entering their graduate year in nursing.
- Patient Care:** Able to demonstrate ability to plan and prioritise care for own patient load (where appropriate) as reasonably expected of a beginning level practitioner (consider graduate nurse expectations).
- Supervision:** Minimal direct supervision (*other than those that require direct supervision to maintain scope of practice such as medication administration or invasive procedures*) with the student moving towards independence in practice in conjunction with **decision making frameworks** as per NMBA requirements.

What could PEP 4 & 5 students be involved in?

✓ All Nursing Practice 1,2 & 3 PEP skills and activities at a well-developed level, with the ability to clearly articulate a rationale for the care provided to all allocated patients ✓ Demonstrating necessary capabilities and safety in performing a wide range of fundamental nursing interventions ✓ Professional & therapeutic communication that is person-centred ✓ Consistent provision of effective and comprehensive total patient care for patients with increasing complex care needs ✓ Demonstrating increased levels of proficiency in time management, prioritisation and reprioritisation of care	✓ Demonstrating higher order thinking through application of the clinical reasoning cycle ✓ Identifying and responding to the deteriorating patient with increased levels of proficiency ✓ Incorporating patient education within practice ✓ Demonstrating increased levels of proficiency in medication management including oral, SC, IM and IV medications under direct supervision (Consider health agency policy regarding involvement in S4/S8 administration) ✓ Demonstrating increased levels of initiative and independence in practice	✓ Demonstrating increased levels of accountability and responsibility for own actions within nursing practice ✓ Consistently applying comprehensive theoretical knowledge to practice ✓ Actively seeking and considering constructive feedback on practice ✓ Engaging in critical reflection on practice and incorporating strategies for ongoing development.
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Nursing Practice 1 PEP

Nursing Practice 2 PEP

Nursing Practice 3 PEP

Nursing Practice 1 PEP is considered a 'Foundational Unit', representing students first time in PEP. Students are supported to apply beginning level nursing knowledge, skills and professional behaviours by assisting supervising nurses in providing low-acuity patient care, and through observation and reflection of more complex care provided by others.

Confidence and ability: Novice-Beginner Level Learner.

Patient care: Provide fundamental care.

Supervision: Direct supervision to guide scope of practice in conjunction with decision making frameworks, as per NMBA requirements.

PEP undertaken in Nursing Practice 2 and 3 are considered 'Contextual Units', with the expectation that students 'apply' developing knowledge, skills and behaviours in more specific contexts (patient scenarios, illness types and trajectories), of increasing complexity.

Confidence and ability: Novice-medium level beginning learner.

Patient Care: Delegation of patient care requirements as appropriate.

Supervision: Varied levels of indirect and direct supervision to guide scope of practice in conjunction with decision making frameworks, as per NMBA requirements.

'Contextual Unit', application of developing knowledge, skills and behaviours in more specific contexts (patient scenarios, illness types and trajectories), of increasing complexity.

Confidence and ability: Novice-medium level beginning learner.

Patient Care: Delegation of patient care requirements as appropriate.

Supervision: Varied levels of indirect and direct supervision to guide scope of practice in conjunction with decision making frameworks, as per NMBA requirements.

What could PEP 1 students be involved in?

- ✓ Beginning level patient assessment including health history, monitoring and recording vital signs (no PCA/epidural observations)
- ✓ Beginning level planning of care, demonstrating evidence-informed rationales for proposed care
- ✓ Beginning level documentation that is accurate, concise, uses appropriate health terminology
- ✓ Beginning level clinical reasoning in accordance with supervision requirements, with a focus on early phases of the cycle
- ✓ Professional & therapeutic communication with patients and families
- ✓ Personal care, hygiene and mouth care
- ✓ Skin integrity and pressure area assessment
- ✓ Assist with patient nutrition and elimination needs
- ✓ Urinalysis
- ✓ BGL's and reporting of blood glucose level
- ✓ Fluid balance charting (oral intake and output only)
- ✓ Use of safe manual handling techniques and equipment
- ✓ Support patient mobility and comfort
- ✓ Bed making and maintaining a safe physical environment around the patient
- ✓ Basic wound management
- ✓ Observe and share knowledge around medication administration
- ✓ Practice of safe and effective infection prevention and control
- ✓ Actively seeking constructive feedback regarding their developing practise and engage in critical reflection
- ✓ Interprofessional learning opportunities.

What could PEP 2 students be involved in?

- ✓ All PEP 1 skills and activities with increased levels of proficiency
- ✓ With adequate supervision and support appropriate to the task, assess, plan, deliver and evaluate evidence-informed and person-centred care to meet patient needs with a range of conditions, including cardiovascular, respiratory and renal disease using the clinical reasoning cycle
- ✓ Professional and therapeutic communication with patients, nurses and the multidisciplinary team
- ✓ Admission and discharge of patients including risk & psychosocial assessment
- ✓ Attend to patient hydration and nutrition requirements
- ✓ Naso-gastric tube insertion and management
- ✓ Attending to patients' elimination needs
- ✓ Insertion, management and removal of indwelling catheter
- ✓ Pre and post op care
- ✓ Basic wound assessment, management & documentation
- ✓ Drainage device management and removal (as appropriate)
- ✓ Patient assessment, including:
 - Monitoring, recording and interpretation of vital signs
 - Performing an ECG and basic rhythm interpretation
 - Pain assessment and monitoring
 - General interpretation of blood results
- ✓ Recognise & support the management of the deteriorating patient using Danger, Response, Airway, Breathing, Circulation, Disability, Exposure (DR ABCDE) framework
- ✓ Oxygen therapy
- ✓ Demonstrate an understanding of the physiological effects of medications on individuals with cardiac, respiratory and renal conditions
- ✓ Medication administration **except SC, IM and IV medications** under **direct supervision** (Consider agency policy for involvement in narcotics administration)
- ✓ Participation in handover using ISOBAR framework
 - ✓ Actively seeking constructive feedback on their evolving practice and engaging in critical reflection.

What could PEP 3 students be involved in?

- ✓ All Nursing Practice 1 and 2 PEP skills and activities with increased levels of proficiency
- ✓ Demonstrating increased skills in professional and therapeutic communication with patients, nurses and the multidisciplinary team
- ✓ With supervision and support appropriate to the task, assess, plan, deliver and evaluate evidence-informed care to individuals with neurological, oncology, endocrine and gastrointestinal conditions using the clinical reasoning cycle
- ✓ Neurological assessment and observations
- ✓ Neurovascular assessment and observations
- ✓ Demonstrating understanding and appropriate clinical skills for managing patients on stroke management pathways
- ✓ Assisting supervising nurses in providing end-of-life care
- ✓ Assessment and management of diabetes
- ✓ Wound assessment and management
- ✓ Interpretation of blood results
- ✓ Stoma care
- ✓ Demonstrates safe and effective administration of medication and other therapeutic substances including S/C, IM and IV - under **Direct Supervision**
- ✓ Management of IV therapy, including: priming lines, administration of IV fluids, assessment, documentation
- ✓ Time management, planning & prioritising care for moderately complex patients
- ✓ Documentation and clinical handover that is accurate, concise and uses appropriate professional language (ISOBAR)
- ✓ Actively seeking constructive feedback on their evolving practice and engaging in critical reflection.

University of Tasmania - Bachelor of Nursing Student Developmental Chart for Professional Experience Placement (PEP)

Nursing Practice 4 PEP

Nursing Practice 4 & 5 PEP are considered ‘Synthesis Units’, with students required to competently incorporate into practice, the knowledge, skills, professional behaviours and attitudes learnt throughout the Bachelor of Nursing Program.

Concurrent academic nursing units have focused on the following:
Professional self-reflection, increased emphasis and practice of clinical reasoning with a major focus on managing allocated patient load with increasing complexity in care requirements. Additionally, students have learnt to apply prior knowledge and accept responsibility for the development of new knowledge and skill in more complex situations.

Ability and Confidence: demonstrating beginning level practitioner abilities.

Patient Care: Able to demonstrate increasing ability to plan and prioritise care for own patient load (where appropriate) as reasonably expected of a beginning level practitioner.

Supervision: Decreasing levels of direct supervision in most aspects of practice (*other than those that require direct supervision to maintain scope of practice such as medication administration*) in conjunction with decision making frameworks as per NMBA requirements.

Nursing Practice 5 PEP

Nursing Practice 4 & 5 PEP are considered ‘Synthesis Units’, with students required to competently incorporate into practice, the knowledge, skills, professional behaviours and attitudes learnt throughout the Bachelor of Nursing Program.

Concurrent academic nursing units have focused on the following:
Professional self-reflection, increased emphasis and practice of clinical reasoning with a major focus on managing allocated patient load with increasing complexity in care requirements. Additionally, students have learnt to apply prior knowledge and accept responsibility for the development of new knowledge and skill in more complex situations.

Ability and Confidence: Confident, beginner level practitioner capable of entering their graduate year in nursing.

Patient Care: Able to demonstrate ability to plan and prioritise care (where appropriate) for own patient load as reasonably expected of a beginning level practitioner (consider graduate nurse expectations).

Supervision: Minimal direct supervision (*other than those that require direct supervision to maintain scope of practice such as medication administration*) with the student moving towards independence in in practice in conjunction with decision making frameworks as per NMBA requirements.

What could PEP 4 & 5 students be involved in?

- ✓ All Nursing Practice 1,2 & 3 PEP skills and activities at a well-developed level, with the ability to clearly articulate a rationale for the care provided to all allocated patients
- ✓ Demonstrating necessary capabilities and safety in performing a wide range of fundamental nursing interventions
- ✓ Professional & therapeutic communication that is person-centred
- ✓ Consistent provision of effective and comprehensive total patient care for patients with increasing complex care needs
- ✓ Demonstrating increased levels of proficiency in time management, prioritisation and reprioritisation of care
- ✓ Demonstrating higher order thinking through application of the clinical reasoning cycle
- ✓ Identifying and responding to the deteriorating patient with increased levels of proficiency
- ✓ Incorporating patient education within practice
- ✓ Demonstrating increased levels of proficiency in medication management including oral, SC, IM and IV medications under **direct supervision** (Consider health agency policy regarding involvement in S4/S8 administration)
- ✓ Demonstrating increased levels of initiative and independence in practice
- ✓ Demonstrating increased levels of accountability and responsibility for own actions within nursing practice
- ✓ Consistently applying comprehensive theoretical knowledge to practice
- ✓ Actively seeking and considering constructive feedback on practice
- ✓ Engaging in critical reflection on practice and incorporating strategies for ongoing development.