Supervised Practice Experience Program (SPEP)



Form for Employers/Organizations

College of Licensed Practical Nurses of Newfoundland and Labrador 209 Blackmarsh Road., St. John's, NL, A1E 1T1

https://clpnnl.ca

Telephone: 709 579-3843

Toll-free (Canada): 1 888-579-2576

Fax: 709 579-8268 Email: registration@clpnnl.ca

Instructions

- 1. This form must be completed by the organization applying to participate in the Supervised Practice Experience Program for LPN applicants.
- 2. Once completed, save, and send the form to the College of Licensed Practical Nurses of Newfoundland and Labrador (CLPNNL) using the email address at the top of this form. Please add subject heading SPEP FORM FOR ORGANIZATIONS.
- 3. The College will review the form and notify when approval is confirmed

ame of SPEP Candidate	Tentative start date for SPEP Candidate		
EMPLOYER/ORGANIZATION INFORMATION			
Name of organization	First name of primary contact		
Street address	Last name of primary contact		
City	Email address		
Postal code	Phone number (include area code)		
Name of Facility (e.g., Health Science Centre, etc.) Name of Unit (e.g., 4SA, etc.) Description of Unit (e.g., acute care, long-term care facility,			

AGREEMENT

The employer/organization agrees to uphold the following Supervised Practice Experience Program:

- Orient the applicant to the practice setting including relevant policies, procedures, resource materials, general practice environment, and any required training (e.g., Meditech, etc.).
- Provide an LPN or RN preceptor to provide direct supervision and guide the SPEP candidate and provide feedback and learning opportunities for a minimum of 135 practice experience hours (as per employer identified schedule).
- Arrange for an additional 315 hours of practice experience under direct or indirect supervision as required.
- Contact the College with any concerns or clarifications as required.
- Evaluate the candidates progress using the College's approved SPEP Evaluation Form.
- Confirm the candidate has met program requirements and outcomes at the end of the experience using the College's approved SPEP Completion Form.

ADDITIONAL INFORMATION

Signature of primary contact

- The SPEP recognizes that the candidate has met the educational requirements for licensure and the primary purpose of the SPEP is to assist candidates in obtaining currency of practice experience.
- The SPEP is designed to either support the integration of IEN candidates into the Canadian context or assist former practical nurses to reintegrate. All SPEP candidates have the opportunity to learn nursing practices related to the employer's policies and procedures, documentation, medication management, role of nursing practice, and more, while obtaining currency of practice hours. At the end of the program it is expected that:
 - The candidate will be able to apply nursing knowledge, skill, and judgement and demonstrate an understanding of nursing accountabilities applicable to the College's standards and regulatory documents.
- Organizations have the right to end the SPEP agreement at any time (e.g., because of lack of progress or for other reasons). In these situations, organizations are required to notify the College and complete the Supervised Practice Experience Program Completion form documenting the reason for failure to complete.

The Temporary License granted to the candidate is restricted to LPN practice within the SPEP.

Date DD/MM/YYYYY