



# Supervised Nursing Practice: RN and RN(NP)

## Purpose

Registered Nurses (RN) and Registered Nurse (Nurse Practitioner)s RN(NP) practice includes the roles of collaborator, leader, and educator in their respective entry-level competencies (ELC)s. With these competencies, RN/RN(NP)s have a responsibility to promote a practice environment that supports responsibility, accountability, professional development, and respect for others when providing supervised nursing practice. Supervision is necessary when an individual (learner) requires additional support to enhance their nursing knowledge, skill, and judgment to meet the respective ELCs, practice expectations, and to ensure client safety.

The purpose of the Supervised Nursing Practice document is to provide RN/RN(NP)s with the expectations and principles of supervision to assist them in determining the level of supervision required when in a role such as buddy/preceptor for:

1. An applicant re-entering practice who is required to complete a registration undertaking of supervised practice or,
2. An RN/RN(NP) who is on the CRNM active practicing register, unable to practice independently, and requiring remedial and additional learning in the clinical setting. This includes a registrant who is a candidate for the [Remedial, Enhanced, and Additional Learning \(REAL\) Partnership](#) or,
3. A student nurse enrolled in an approved nursing education program.

## Supervision Defined

Supervision is the act of overseeing the performance of specific activities of another individual. It involves providing initial direction, monitoring, periodic inspection, and corrective action when necessary to ensure the safe provision of care. It is the active process of directing, assigning, delegating, and monitoring an individual's performance to influence its outcome. Supervision can apply to situations where one RN/RN(NP) is supervising another RN/RN(NP)/GN/GNP who is:

- unfamiliar with a new procedure,
- a participant in the REAL Partnership,
- re-entering practice and completing the required hours of supervised practice, or
- a nursing student in the clinical practice setting.

Supervision can be direct or indirect, depending on the circumstances, the complexity of the activity or skill being performed, and the level of skill or competency of the individual under supervision. The supervisor must have the scope of practice, knowledge, skill and competencies to supervise the individual at the level of practice they are required to meet.

For example, an RN is required to supervise RN nursing practice and a RN(NP) is required to supervise RN(NP) practice. At times, physicians may supervise RN(NP)s in circumstances where the scope of practice is like that of the RN(NP).

## Direct Supervision

- The supervisor is physically present or immediately available to answer questions and/or assist the learner during the provision of care. The supervisor may be in the room overseeing the care, or in proximity to the learner for ease of consultation, and available to attend in person if needed. Direct supervision is appropriate in circumstances when the learner requires the supervision and guidance of an experienced registrant to ensure the delivery of safe nursing care. This allows for a controlled and supportive environment for the learner to enhance their knowledge, skills, and judgment, and the opportunity to demonstrate currency of practice.

## Indirect Supervision

- The supervisor is not physically present but provides direction to the learner and monitors activities by having the learner report regularly in-person or via telephone, and/or periodically observing the learner's activities. There are limited circumstances where indirect supervision is suitable.

## Qualities of an Effective Supervisor

The registrant in the role of supervisor overseeing nursing practice has the responsibility to promote a practice environment that supports responsibility, accountability, professional development, and respect for others. To be an effective supervisor, the registrant in the role of supervisor must have:

- strong communication skills,
- clinical competence and confidence,
- interpersonal competence,
- personal and professional integrity,
- effective conflict resolution skills,
- patience, and
- strong self-awareness of professional roles, obligations, and professional boundaries.

## Principles of Supervision

1. The focal point of supervision is the provision of safe, competent, and ethical care to clients.
2. The priority considerations for determining the level of supervision required is based on assessment of client care requirements and safety risk, complexity of the practice environment, supports available, and capabilities, competencies and limitations of the learner's knowledge and skills.

3. The supervisor (buddy/preceptor) and the learner engaged in supervised practice are each accountable for their own nursing actions and required to practice in accordance with their respective ELCs and practice expectations.
4. Effective communication between the supervisor and the learner assists in identifying what type and intensity of supervision is required.
5. Effective communication between all members of the multidisciplinary health-care team is critical for appropriate supervision, provision of safe nursing care, and prompt reporting of problems or concerns.
6. Direction and guidance are provided to the learner as necessary through consultation, oversight, answering questions, and constructive feedback.
7. Feedback is most effective when provided soon after a learning event or incident has occurred.
8. Appropriate supervision supports consolidation of knowledge and skill in clinical practice.
9. Supervision is supported by:
  - a. clear roles and responsibilities of both supervisor and learner
  - b. identification of learning objectives and performance expectations for the learner
  - c. orientation to the clinical setting including employer policies and procedures
  - d. assessment of the learner's knowledge, skills, and competencies
  - e. the learner having ready access to educational resources.

## Supervision of Reserved Acts

An RN/RN(NP) can only supervise a learner performing a reserved act that they are authorized and competent to perform themselves. They must be able to provide the necessary supervision to ensure the provision of safe care. For reserved acts requiring additional education, the learner is required to have the education prior to performing the act under supervision. The supervisor must address and manage any competence issues of the learner during the performance of the reserved act, including intervening and performing the reserved act or a portion of it themselves.

## Employer Responsibilities

Health care institutions have an obligation to maintain safe systems for the delivery of safe health care. The focus of the supervised nursing practice is for the learner to gain nursing practice experience and apply nursing knowledge, skill, and judgment while maintaining client safety. To ensure adequate supervision, the employer is responsible for:

- providing a consistent, quality practice environment that supports safety, learning, and a just culture,
- identifying an appropriate supervisor with the required knowledge, skill and judgment,
- ensuring the supervisor is available to the learner in a way that supports continuity and psychological safety,
- providing the learner with an orientation to the clinical practice environment, including relevant policies and procedures and,
- regular follow-up with the supervisor and learner, and promptly managing any concerns or deficiencies. This includes acting on situations where the supervised nursing practice is resulting in unacceptable risk to client safety, and there is minimal to no progress with improvement of knowledge, skill and judgment in the provision of nursing care. This may include the removal of the learner from the practice environment, ending the supervised practice, and reporting:
  - i. the registrant to the College of Registered Nurses of Manitoba, or
  - ii. the nursing student to the educational institution instructor.

## References

- Canadian Nurse Association. (2017). *Code of Ethics for Registered Nurses*. Ottawa, ON: Author.
- Canadian Nurses Protective Society. (2012). *InfoLAW: Supervision*. Ottawa, ON: Author.
- College of Registered Nurses of Alberta (2023). *Supervision Standards*.
- College of Registered Nurses of Manitoba (2018). *General Regulations*.
- College of Registered Nurses of Manitoba (2019). *Interprofessional Collaborative Care*.
- College of Registered Nurses of Manitoba (2023). *Mentoring Role: RN, RN(AP), and RN(NP)*.
- College of Registered Nurses of Manitoba (2022). *Practice Direction: Supervision of Undergraduate Nurse Employees*.
- College of Registered Nurses of Newfoundland & Labrador (2022). *Supervised Practice Experience Partnership Program (SPEPP)*.
- Phillips, Ethyllynn (2002). Managing Legal Risks in Preceptorships. *Canadian Nurse*, 98(9); 25 – 26.

Published: 05/2024

For more information please contact  
one of our Quality Practice Team Members at

204-774-3477 ext 301

800-665-2027 (Manitoba toll-free)

Our publications are available on our website at [www.crnmb.ca](http://www.crnmb.ca)