

Who are Re-Entry Nurses?

Re-entry nurses include RNs and NPs who have let their licence lapse and no longer meet the currency of practice requirements (hours) to renew their practicing licence with the College and re-enter the nursing workforce. As previously registered with the College, these nurses are considered “re-entry” to practice.

What is the SPEPP?

The SPEPP is a regulatory program that is employment focused and available to eligible re-entry RNs and NPs in Newfoundland and Labrador (NL). As part of the program, eligible re-entry nurses will be granted an Interim License with Conditions (IL-C) to allow them to gain currency of practice hours (450 hours for RNs or 900 hours for NPs) to be eligible for licensure with the College.

What is an Interim Licence - Conditions (IL-C)?

An IL-C is a time limited licence with conditions to practise nursing in NL while finalizing the requirements for registration. The IL-C is issued for six months for re-entry RNs and can be issued for up to 12 months for a re-entry NP. An IL-C may be renewed.

Who is eligible for an IL-C?

Eligible re-entry nurses are RNs or NPs who no longer meet the currency of practice requirements (hours) to renew their practicing licence with the College and re-enter the nursing workforce. As previously registered with the College, these RNs and NPs are considered “re-entry” to practice. Re-entry RNs with some practice hours within the last 10 years and re-entry NPs with some practice hours within the last six years may be granted an IL-C in order to complete the SPEPP.

Does the College place conditions or restrictions on an IL-C?

Yes. Conditions on an IL-C include that the licence holder must:

- complete a minimum of 450 hours for RNs or 900 hours for NPs of supervised practice with an NL employer with a minimum of 135 hours for RNs or 300 hrs for NPs under direct supervision and the additional 315 hours for RNs or 600 hours for NPs can be under indirect supervision. The participating employer/organization may determine that additional time under direct supervision is required
- submit all required program forms

Additionally, the SPEPP requires that the IL-C holder:

- not practise without the supervision of a preceptor
- not change practice settings during the portion of practice experience when they are under direct supervision
- abide by any restrictions deemed necessary by their employer



Finally, the SPEPP program requires that the employer must:

- agree to provide supervision for the IL-C holder
- agree to immediately notify the College if the IL-C holder is not functioning safely and competently in the provision of client care
- confirm a minimum of 450 hours for RNs or 900 hours for NPs of attendance and complete the SPEPP Completion Form for Employers/Organizations

Are re-entry nurses with some practice hours more than 10 years ago for RNs or six years for NPs eligible for the SPEPP?

Re-entry RNs with no practice hours within 10 years but some practice hours between 10 to 12 years can complete a competency assessment through Inspire Global Assessments (previously NCAS) to determine if there are any competency gaps in their nursing education. If no competency gaps are identified, these re-entry RNs will also be considered for the SPEPP. This option is not available for re-entry NPs at this time.

RNs who have no practice hours in the last 12 years must complete an RN re-entry program. NPs who have no practice hours in the last six years must complete the Nurse Practitioner Competency Validation Process (NPCVP).

What nursing title is the IL-C holder permitted to use and how is documentation signed?

Re-entry nurses who hold a valid IL-C should introduce themselves as a 'Graduate Nurse' for RNs or 'Interim Nurse Practitioner Licence Holder' for NPs and should sign their name with the initials 'GN' for RNs or 'Interim NP Licence Holder' for NPs. IL-C holders are not permitted to use the title Registered Nurse or Nurse Practitioner until they have met all requirements for registration and have obtained a practicing licence.

What is the eligibility criteria for the condensed SPEPP?

Re-entry RNs or NPs may be eligible for a condensed SPEPP if they hold a practicing licence in the current licensure year and have practised during that year but do not have enough hours to renew. These individuals can complete the remaining practice hours required for licensure through the SPEPP. Re-entry nurses who are deemed eligible for a condensed SPEPP will be notified of the number of practice hours required under direct or indirect supervision.

What is direct and indirect supervision?

Direct supervision refers to having the preceptor physically present or immediately available while a nursing activity is being performed. It involves direction, inspection and corrective action when needed. It is the active process of directing, assigning, delegating, guiding, and monitoring the re-entry nurse's performance.

Indirect supervision refers to the preceptor being readily available for consultation and direction (e.g., telephone, etc.) but may not be physically present with the re-entry nurse at all times.



What domains of nursing practice are included in the SPEPP?

SPEPP can be used for RNs and NPs in all domains of nursing practice, not only direct clinical practice. However, re-entry NPs must complete the initial 300 hours in a clinical setting under the direct supervision of a preceptor. The direct supervision of a re-entry NP allows the preceptor to have oversight of the NP's orders as a means to verify their appropriateness.

Who can be a preceptor?

An experienced RN or NP preceptor is required for RNs and an experienced, clinically competent preceptor is required for NPs (e.g. an experienced NP).

What is the role of the preceptor?

The preceptor provides supervision and acts as a resource, role model, and mentor/coach. Supervision must be direct for the first 135 hours for RNs or 300 hours for NPs and can be indirect for the additional 315 hours for RNs or 600 hours for NPs.

The direct supervision of the preceptor is designed to support the integration of the re-entry nurse into the employment setting and provide them the opportunity to update their nursing competencies. The direct supervision of the preceptor provides the re-entry nurse with a controlled and supportive environment to enhance their knowledge and skills.

How many hours must the re-entry nurse complete under the direct supervision of a preceptor?

The re-entry nurse must complete a minimum of 135 hours for RNs and 300 hours for NPs of practice under the direct supervision of a designated preceptor(s). Re-entry NPs must complete the initial 300 hours in a clinical setting under the direct supervision of a preceptor. The participating employer may determine if additional time under direct supervision is required.

How many shifts is 135 hours and 300 hours?

The SPEPP includes 135 hours for RNs (12 shifts using a 11.25-hour rotating schedule or 18 shifts using a 7.5-hour day schedule) or 300 hours for NPs (27 shifts using a 11.25-hour rotating schedule or 40 shifts using a 7.5 hour day schedule).

How many hours must the re-entry nurse complete under indirect supervision of a preceptor?

Following the successful completion of a minimum of 135 hours for RNs or 300 hours for NPs, the re-entry nurse can transition into a more independent role to complete an additional 315 hours for RNs or 600 hours for NPs in the practice area(s). During this experience, the re-entry nurse can be under the indirect supervision of the preceptor(s), who is available for support and questions.

Does the preceptor have to complete an evaluation of the re-entry nurse?

Using the SPEPP guide, the preceptor will support the re-entry nurse and assist the College and the employer to determine the length of time and degree of supervision required to help the re-entry nurse demonstrate currency of practice. The assigned preceptor completes the SPEPP Initial Assessment Form



after the re-entry nurse has completed 135 hours for RNs and 300 hours for NPs and the SPEPP Final Assessment Form for Preceptors upon program completion. These forms should be reviewed with the re-entry nurse.

What nursing care are re-entry RNs and NPs able to complete?

It is up to the re-entry nurse to clearly articulate what nursing competencies they are competent to complete. They must practise within their individual scope of practice (educated, authorized, and competent). The re-entry nurse must collaborate with their preceptor to arrange experiences to obtain competence in areas where they may not have had experience, or different from the experiences they have had.

As part of the program, re-entry nurses agree to only provide care within their individual competence (have the knowledge, skill, judgement, ability to manage the outcomes) to gain currency of practice.

Does the preceptor have to co-sign the work of the re-entry nurse?

The preceptor is accountable for completing their own assessment and documentation. The re-entry nurse will also complete their assessment and documentation.

What happens if the preceptor is sick?

If the preceptor knows that they will not be present for a shift due to illness, they can arrange for another qualified preceptor to complete the shift with the re-entry nurse. The re-entry nurse must be informed of the change. Feedback should be provided from all the preceptors throughout the length of the program.

If the preceptor is floated, can the re-entry nurse go with the preceptor to another practice area?

Yes. The preceptor will need to be prepared to help the re-entry nurse orient to the new unit and more robust direct supervision may be needed.

Can the re-entry nurse change practice settings during the additional 315 hours for RNs or 600 hours for NPs?

The re-entry nurse may change practice settings as required/available for the additional 315 hours for RNs or 600 hours for NPs. However, the re-entry must retain the services of a preceptor and may have more than one preceptor for the additional hours depending on availability and practice setting.

During the additional 315 hours of experience for RNs or 600 hours of experience for NPs, can the re-entry nurse be in charge or supervise others?

This would require reflection by the re-entry nurse, the preceptor, and the employer/organization, and dependent upon the knowledge, skills, and judgement of the individual re-entry nurse. It is not a restriction imposed by the SPEPP.

Are the training days for orientation included in the 450 hours for RNs or 900 hours for NPs?

The participating employer/organization may choose to include the 315 hours for RNs or 600 hours for



NPs hours for NPs as part of the orientation for new RN or NP employees in the health care setting.

What is the role of the employer/organization?

The SPEPP is employer/organization focused and requires support from an employer willing to participate in the program. The employer must agree to:

- orient the re-entry nurse to the practice setting including relevant policies, procedures, resource materials, general practice environment, and any required training (e.g., computer-based training, etc.)
- assign a qualified preceptor to provide direct supervision and guide the re-entry nurse 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 for RNs or 600 hours for NPs under indirect supervision
- contact the College with any concerns or clarifications as required
- submit the SPEPP Completion Form for Employers/Organizations and confirm the re-entry nurse has met program hours requirements and competency requirements at the end of the experience
- submit the SPEPP Initial and Final Assessment Forms for Preceptors if the re-entry nurse is unsuccessful

Can the re-entry nurse be unsuccessful in the SPEPP?

Unsuccessful re-entry nurses are individuals that have:

- completed a minimum of 450 hours for RNs or 900 hours for NPs but are unable to progress to indirect supervision
- completed the program but have not met all the competency requirements on the SPEPP Final Assessment Form for Preceptors
- had their IL-C revoked

Can employers/organizations end the SPEPP agreement before the re-entry nurse completes 450 hours for RNs or 900 hour for NPs?

Yes. Employers/organizations can choose to end the program agreement at any time. In these situations, employers/organizations are required to notify the College and submit the Supervised Practice Experience Partnership Program Assessment Form(s) for Preceptors and the Supervised Practice Experience Partnership Program Completion Form indicating the reason for failure to complete or unsuccessful completion of the program.

Will the re-entry nurse who fails the program lose their job as another designated health care professional (e.g., personal care attendant, etc.) with the employer/organization?

The SPEPP is a regulatory program and does not have any impact on previous employment or employment status.

What happens at the end of the SPEPP?

Upon completion of the SPEPP, individuals will be eligible for the RN Registration exam (NCLEX-RN) or



NP Licensure exam. Successful completion of the exam is the final step before licensure as an RN or NP. For those individuals who have already passed the NCLEX-RN or NP Licensure exam through another jurisdiction, or those individuals previously registered with the College and thus already passed the identified licensure exam for registration at that time, will be eligible for licensure following successful completion of the SPEPP.

Re-entry NPs seeking licensure but did not previously complete an NP licensure exam will be required to complete the NP Licensure exam approved by the College Council following the successful completion of the SPEPP.

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