

Global Health Professional Practice Placement Preparation Checklist

Please note: The purpose of this checklist is *to help you organize* the planning of your professional practice placement and to give the Global Health Education Committee (GHEC) an idea of how far along you are in the process. The more thorough you are in completing this form the better it will give the Committee an idea of your level of commitment to the application process. Please do not contact the potential placement site as part of your research.

Name: [your name here]

1. Please identify your site: McMaster Mohawk Conestoga

2. Please identify your stream: Basic RPN-to-BScN Other:

3. Please identify where you would like to do a placement:

Outside of Canada

Within Canada

(rural/remote)

4. Please identify the term in which you are planning to do your placement:

Summer term.

Fall term.

5. Please identify the course(s) you wish to take:

N4J07 (clinical) only.

Both N4J07 & N4P04

(online PBL/PBL).

6. I have identified a country [name of country] and a nearby city [nearby city or town] where I plan to complete my professional practice placement.

7. Name of host organization: [e.g. Macha Mission, Baffin Regional Health Services, etc.]

8. How did you identify this organization? (Please check)

A) Global Health education Committee (GHEC) website.

B) Recommendation from faculty or student who had previously completed their placement.

C) Other (please explain)

17. My host organization is aware of the preceptor's responsibilities. I have shared with them:

- the N4J07 course manual,
- the preceptor handbook and
- the 4J07 evaluation criteria.

18. If I plan on taking PBL, I have verified with my organization/preceptor that I am able to access a reliable internet connection to be able to participate in weekly online PBL sessions.

Please identify the type of internet connection available to you: dial-up
 DSL modem
 High speed internet.

19. I have a laptop (or other IT device) that I will be able to bring with me on my global health placement. Yes No

20. If I plan on taking ONLY clinical, I have verified that I am able to have access to a nearby internet café or have secured other mediums to be able regularly communicate with clinical tutor at McMaster. Yes No

21. I have inquired if my organization requires me to provide any additional documentation (i.e. a letter from the McMaster School of Nursing, specific forms, etc.), or additional fees (i.e. application for temporary nursing license). Please explain:

22. I have researched the travel expenses and insurance (medical & travel). The approximate costs are: [XXX.XX] (in Canadian dollars).

23. I have communicated with my organization about on the ground transportation. How will you get to and from your clinical placement? (Please explain)

24. I have secured tentative room and board for 12 weeks. From my research, my total approximate costs for these expenses will be [XXX.XX] (in Canadian dollars).

25. I have identified where I will be living (Please explain).

27. I have researched the approximate cost of courses (clinical & PBL or ONLY clinical). I will have to pay these fees by: [date].

Yes No

Provide details:

29. I have investigated potential scholarships / bursaries which will help finance my trip. List the name(s), and approximate value of the scholarships

<u>Name</u>	<u>Amount</u>
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30. I have visited the Department of Foreign Affairs & International Trade (DFAIT) Canada "[Travel Advisories](#)" website. Indicate what kinds of precautions are stated for your setting? (i.e. is this setting a high risk travel area?)

31. I have inquired about visa requirements for the country I will be going to:

Yes No

32. What is the cost of a VISA application for your destination [XXX.XX] (for international placements only) and by what date will you have to apply for your VISA: [date]?

33. I have contacted a travel clinic to determine the immunizations I will need before I leave Canada. Yes No

34. Please list the applicable immunizations you will need before traveling to your destination.

i) N/A

ii)

iii)

iv)

v)

33. Is there any potential of you working with patients with HIV/AIDS? Yes No

If YES, what precautions have you taken/researched to ensure your safety?

33. Additional comments/concerns you feel the Global Health Education Committee would be interested to know about your application process:

Please note that:

- 1. You MUST confirm with the school that your preceptor is a Registered Nurse.***
- 2. You Must attend the Pre-Departure Workshop sessions during the month of April, begin your clinical placement in the month of May/September, attend a debriefing session upon your return and share your experience in the reentry session (September for summer students and January for fall students).***

GHEC Form last updated: July, 2014.