



Name of Applicant:		PDRP Level:		
APC/Registration nu	umber:			
Domain 1: Professional Responsibility				
	Self- Assessment Met	Further Evidence Required (please state if applicable)		
Competency 1.1				
Competency 1.2				
Competency 1.3				
Competency 1.4				
Competency 1.5				
Competency 1.6				
<b>Domain Met</b>	Yes			
Domain 2: Management of Nursing Care				
Competency 2.1				
Competency 2.2				
Competency 2.3				
Competency 2.4				
Competency 2.5				
Competency 2.6				
Domain Met	Yes			
Domain 3: Interpersonal Relationships				
Competency 3.1				
Competency 3.2				
Competency 3.3				
Domain Met	Yes			
Domain 4: Interprofessional Health Care & Quality Improvement				
Competency 4.1				
Competency 4.2				
Competency 4.3				
Domain Met	Yes			
Levels of Practice Specific Requirements (Proficient only)				
Practice Change or C	Quality Initiative			
Teaching / Precepto	rship			
In-depth Understanding - Care & Coordination				
Levels of Practice Specific Requirements (Accomplished only)				
Quality Improvement and Change Process Contribution				
Engagement and Influence – Professional Activities				
In-depth Understan	In-depth Understanding – Care and Coordination			



## Registered Nurse (RN) Assessor Outcome

Assessor Summary and Recommendations				
PDRP Level Achieved? Yes No	Date			
Assessor Name	Designation			
Signature	Assessment Time			
Signature	ASSESSITIETT TITLE			