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| **Proficient Registered Nurse: Full Self Assessment and Senior Nurse/Manager Attestation** | |
| **Details of nurse completing self-assessment:** | **Details of nurse completing attestation** |
| Name: | Name: |
| APC number and expiry date: | APC Number & expiry date: |
| Department and Directorate or workplace: | Department/Directorate/Workplace: |
| Employee number: | Level on PDRP: |
| Role Title this assessment relates to: | Email address: |
| Practice hours: minimum 450 hours /60 days in last three years **MET / NOT MET** | |
| Learning hours: minimum 60 hours in the last 3 years **MET / NOT MET** | |
| **Date and or review period:** | |
| Completion of this document meets the 3 yearly requirements to complete two forms of assessment against the Nursing Council of New Zealand (NCNZ) competencies for an RN. **Note: A ‘Performance Review’ is a component of the portfolio requirements; it is not equivalent to a full portfolio submission.**  **Process:**   1. All Domains must be completed and include a comment of endorsement in section 3 by the CN / Nurse Manger for the level of practice. 2. Completed portfolios are handed into the Nurse Educator - PDRP on the first working day of the month February through to November. 3. For nurses employed in the primary/NGO/ARC sector, if possible the complete portfolio is assessed by an assessor in the clinical area then a copy of the complete portfolio is sent to the appropriate PDRP Coordinator. | |
| **Information on completing the self-assessment\***   * The key performance indicators of competencies are written in bold underneath the Nursing Council of New Zealand RN competency. Each must be answered. * Answers must clearly and completely answer the indicator with an example or explanation of how practice meets or achieves the indicator, NCNZ requires answers to include an example of how your day to day practice meets the indicator. * All answers and examples must be from the current area of practice and be less than 12 months old.   **Information on completing the peer assessment\***   * **Peer assessments are no longer required from 01 April 2025 while the PDRP programme is transitioning to the NZNC new standards of competence for Registered Nurses and Enrolled Nurses.** * **NCNZ requires an attestation statement from a senior nurse / manager that the competency self-assessments and examples of practice are a true reflection of the nurse’s practice.** | |

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| The NCNZ competency is written in normal font.  Please do NOT answer this.  **The Competency Indicator (CI) is written in bold – Please answer this** **including an example or explanation of how your practice meets or achieves the indicator.**  *The part in italics is a guide to help you answer the CI.*  Please note the term ‘health consumer’ has been used. This includes any recipient of health care and/or services e.g. patients, clients, consumers, residents, turoro. | **(1) Self Assessment** |
| **Domain One: Professional Responsibility** | |
| * 1. Accepts responsibility for ensuring that his/her nursing practice and conduct meet the standards of the professional, ethical and relevant legislated requirements.   **Identify one professional, one ethical and one legislated requirement most relevant to your area of practice and describe how you ensure that your nursing practice and conduct meets each of them.**  **Identify how you assisted a colleague to comply with one of these requirements.**  *Identify (ie. name) one professional, one ethical and one legislated requirement – then describe an example to demonstrate how these documents guide and impact on your day to day practice when caring for patients. What specific advice or education have you given to a colleague? Include References.* |  |
| * 1. Demonstrates the ability to apply the principles of the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice.   **Identify the five enhanced principles of the Treaty of Waitangi /Te Tiriti o Waitangi and describe how you apply each of them to your practice including references from Tikanga or NCNZ guidelines to demonstrate appropriateness.**    *The five (enhanced) principles of Te Tiriti o Waitangi are: Self-Determination / Tino Rangatiratanga; Partnership / Pātuitanga: Equity / Mana Taurite; Active Protection / Whakamarumarutia; Options / Kōwhiringa*  *Nursing Council of New Zealand. (2023).Te Tiriti o Waitangi policy. https://nursingcouncil.org.nz/Public/ NCNZ/About-section/Te\_Tiriti\_o\_Waitangi.aspx*  *This competency is about the Treaty and its relevance to the health of Māori, which is more specific than cultural safety. Reference documents that help you know what appropriate practice is eg Tikanga Māori Guidelines or NCNZ Cultural Safety, Treaty of Waitangi and Māori Health Guidelines, Standards of Practice for Mental Health Nursing in Aotearoa, Whāia Te Ao Mārama 2018 to 2022: The Māori Disability Action Plan. Ensure your practice examples include your direct application of the principles, rather than simply referring to other services.* |  |

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| * 1. Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by enrolled nurses (ENs) and others.   **Describe the differences in accountability and responsibility for the RN, EN and unregulated health care worker and how this impacts on the process of direction or delegation including references to NCNZ guidelines.**  *Consider the difference in RN and EN scope of practice and what this means in your work context. (Unregulated workers do not have a scope of practice their practice is determined by their role description and NCNZ guidelines.) Reference NCNZ guidelines for direction and delegation and/or organisational policy to answer this performance indicator. Even if you do not actually work with ENs or unregulated workers e.g. Health Care Assistants, Mental Health Support Workers, or Cultural Practitioners, all RNs must demonstrate understanding of these requirements. For HHS nurses (including nurses working in MHAIDS), evidence of completing the* ***e-learning*** *package Principles of Delegation should be included in the portfolio/PDR.* |  |
| * 1. Promotes an environment that enables health consumer safety, independence, quality of life, and health.   **Describe an environmental issue or problem that was affecting health consumer safety, independence or quality of life and what you did to minimise the risk or problem.**  *Environment in this indicator refers to the health consumer’s physical location, the structures and objects that impact on this and the risk associated with these. Consider what actions reduce risk, promote safety and wellbeing e.g. the prevention of cross infection; falls prevention, self-harm, suicide, impacts of behaviour, co-morbid conditions; maintenance of skin integrity, nutrition and hydration.* |  |
| * 1. Practices nursing in a manner that the health consumer determines as being culturally safe.   **Describe how you practice in a manner that the health consumer determines as being culturally safe, how you advocated for a health consumer to ensure their needs were met and what you learnt from this experience.**  *Reflect on an occasion when you adapted your usual practice to meet a health consumer’s cultural needs more appropriately as determined by them. Culture includes, but is not restricted to: age, gender, sexual orientation, occupation and socioeconomic status, ethnic origin or migrant experience, religious or spiritual belief and disability. Note: allowing family to be present is not sufficient evidence.* |  |

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|  | **Domain Two: Management of Nursing Care** |  |
| 2.1 Provides planned nursing care to achieve identified outcomes.  **Identify an expected outcome then describe how you plan your care to achieve this using evidence based knowledge and including the health consumer acuity and/or other factors that influence your plan. Please provide a reference for the evidence used.**  *An ‘outcome’ is something that is expected to happen as a result of your planned care e.g., pain is reduced, wound heals, or health consumer self-manages their condition. Think about the steps taken to achieve the expected outcome (discharge may not be an expected outcome without reference to cause of admission) and the influencing factors that can impact on the plan e.g., health consumer acuity, skill mix, health consumer’s functional level and health literacy, MDT processes and comprehensive assessments.* |  | |
| 2.2 Undertakes a comprehensive and accurate nursing assessment of health consumers in a variety of settings.  **Describe a comprehensive and accurate assessment (one) you completed that required a combination of direct health consumer assessment and physiological or other clinical parameters that demonstrates advanced clinical judgement.**  *Describe assessment components needed to give an accurate clinical picture. These components may include vital signs, weight, fluid balance, EWS score, blood glucose level, frequency/duration/ intensity of signs/symptoms, mental health assessment. Think about why this is proficient rather than competent level practice.* |  | |
| 2.3 Ensures documentation is accurate and maintains confidentially of information.    **Describe how and why you ensure your documentation is accurate and how you assisted a colleague to comply with maintaining confidentiality of information.**  *Identify the relevant codes, documentation standard and organisation requirements that address accuracy and confidentiality of information. Describe what specific advice or education you gave to a colleague to minimise risks?* |  | |
| 2.4 Ensures the health consumer has adequate explanation of the effects, consequences and alternatives of proposed treatment options.  **Describe how you proactively resolved a problem to enable a health consumer to have adequate explanation of the effects, consequences and alternatives of a proposed treatment option.**  *Informed consent is a process rather than a one-off event. The essential elements of this process are effective communication, full information, and freely given, competent consent. What was the issue with this and how did you resolve it?* |  | |
| 2.5Acts appropriately to protect oneself and others when faced with unexpected health consumer responses, confrontation, personal threat or other crisis situations.  **Describe your actions during an unexpected situation, how you managed the situation and what you learnt from the experience.**  *What happened, what was the risk, to whom, what did you do and why did you do it? What guided your actions, what did you learn?* |  | |
| 2.6 Evaluates health consumer’s progress toward expected outcomes in partnership with health consumers.  **Describe what evaluation of care is, how you achieve this in partnership with health consumers and give an example of how your practice or health consumer care changed as a result of an evaluation.**  *Think about the importance of evaluation and partnership. How do you do this, how and why was care altered as a result?* |  | |
| 2.7 Provides health education appropriate to the needs of the health consumer within a nursing framework.  **Using a nursing framework describe an example of education you gave to a health consumer, how you evaluated its appropriateness and what you learnt from this experience.**  *What did you teach them? How did you do this in a way that was appropriate? What did you do to ensure that they understood and what was your learning?* |  | |
| 2.8 Reflects upon, and evaluates with peers and experienced nurses, the effectiveness of nursing care.  **Describe how you reflect upon and evaluate your practice with peers and experienced nurses and what you have learnt about effective nursing care as a result of this process.**  *Reflection is about reviewing and evaluating practice experience. How do you do this to inform and change your practice and what was your learning?* |  | |
| 2.9 Maintains professional development.  **NCNZ Continuing Competency requirements are met. Complete the professional development record template. Include evidence of meeting area-specific Core Competencies.**  **Education of others is evidenced.**  *Evidence for this competency/indicator is on the PDR. It is sufficient to say ‘Evidence of meeting this is in my PDR’. The lesson plan and evaluations must be included in your portfolio.* |  | |
|  | **Domain Three : Interpersonal Relationships** |  |
| 3.1 Establishes, maintains and concludes therapeutic interpersonal relationships with health consumers.  **Describe how you establish, maintain and conclude therapeutic interpersonal relationships and the challenges associated with maintenance of professional boundaries in your area of practice.**  *This competency is about therapeutic relationships and maintaining by applying tools for effective communication. What has to happen to create and maintain a therapeutic relationship and how do you achieve a formal ending to the relationship? What are the specific issues that can make this challenging?* |  | |
| 3.2 Practises nursing in a negotiated partnership with the health consumer where and when possible.  **Describe how you negotiated a partnership with a health consumer to increase their independence that challenged your resourcefulness.**  *Nurses work in partnership with health consumers to ensure their needs and goals are met where possible.*  *Think about the factors that can make establishing and maintaining a partnership in your area of practice more challenging e.g. Health consumer’s functional level, disease process, health literacy and the actions required to overcome this.* |  | |
| 3.3 Communicates effectively with health consumers and members of the health care team (HCT).  **Describe how you use different communication techniques to communicate effectively with health consumers and members of the HCT when this is challenging.**  *Effective communication occurs when your message is understood and there are no misunderstandings. Consider the challenges that can occur. How do you use tools or approaches to optimise your communication with both health consumers and the HCT to overcome these (e.g. style of language)?* |  | |

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| **Domain Four: Interprofessional Healthcare & Quality Improvement** | | |
| 4.1 Collaborates and participates with colleagues and members of the health care team (HCT) to facilitate and coordinate care.  **Describe how you support students, beginning practitioners or new staff members to facilitate care.**  *Describe an example of educating a colleague and the skills needed to positively influence care outcomes?* |  | |
| 4.2 Recognises and values the roles and skills of all members of the health care team in the delivery of care.  **Give an example of valuing the role and skill of a non-nursing member of the HCT and how this contributes to the coordination of care to maximise health outcomes for the health consumer.**  *Consider the HCT members’ skills, knowledge and roles. Think about the value and contribution of team members and the colleagues you work most closely with.* |  | |
| 4.3 Participates in quality improvement activities to monitor and improve standards of nursing.  **Give an example of a quality initiative that you have participated in and describe the positive impact it had on nursing practice or service delivery.**  *Key words: health consumer safety, reducing errors, efficiency, effectiveness, systems, processes, outcomes, audit. Think about your role in the initiative and the effect on health consumer outcomes through improved care, processes or delivery of service.* |  | |
| **3) Senior Nurse/Manager Attestation that confirms the competency self-assessments and examples of practice are a true reflection of the nurse’s practice.** | | |
| Name: | Signature: | Date: |
| **4a) HHS nurses -** Line Manager with responsibility for budget to endorse progression to, or maintenance of RN competent level: (please circle below)  **(4b) Primary, NGO and ARC Sector:** Line Manager with responsibility for budget (if applicable and/or PDRP related allowances apply) to endorse progression to, or maintenance of, RN competent level: (please circle below) | | |
| Yes No (Reason/s must be given:) | | |
| Name: | Signature: | Date: |