Competence Assessment Tool for Nurses Educated & Trained Overseas in non-EU Countries

and guidance on the provision of adaptation and assessment to nurses from overseas

An Bord Altranais
IRISH NURSING BOARD
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## Introduction

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Introduction

An Bord Altranais, mindful of its regulatory authority to promote high standards of professional education and training and professional conduct among nurses and midwives and its mission to protect the public through these functions, has developed a new robust framework for determining eligibility of nurses educated and trained overseas in non-European Union (EU) countries to register with An Bord Altranais.

The purpose of this document is to provide nurses in Irish health care institutions involved in the provision of an adaptation programme to nurses from overseas with an assessment framework and accompanying guidance and information. It is also intended to provide a framework of assessment, guidance and information to those nurses from overseas undergoing a period of adaptation. Nurses will find that the guidance provided in this document will assist in the development of a unique programme suited to the individual needs of each Candidate Nurse.

The assessment tool in this document is broadly based on the guidance provided in the Requirements and Standards for Nurse Registration Education Programmes (An Bord Altranais, 2000) which sets out the competencies that nursing students must reach on completion of the education programme for entry to the register. Prior to adopting a competence-based approach to assessment of nurses from overseas An Bord Altranais supported a research study that examined the use of a competence based framework in the assessment of nurses from overseas. In order to develop a user friendly and suitable adaptation and assessment framework An Bord Altranais also consulted widely with interested parties during the development stage of the framework. Furthermore An Bord Altranais acknowledges consultation with the University of Sheffield and the NHS Sheffield Teachings Hospitals NHS Trust in the development of this document.

Section one of this document provides guidance on the provision of a period of adaptation and assessment. A glossary of terms is included to enable nurses to become familiar with new terminology. Section two of the document is the Competence Assessment Tool and accompanying Meeting Record Sheets. The Competence Assessment Tool is the new assessment instrument for use during the period of adaptation.

The use of this new evidence-based best practice framework will allow for consistency across all health care institutions involved in the provision of an adaptation and assessment programme to nurses from overseas. It will ensure transparency and accountability in the adaptation and assessment process. The use of this new framework will facilitate staff in determining the ability of the Candidate Nurse to practice nursing safely and effectively within the Irish health services.

The Board commends this publication to you and recommends that you use this new assessment framework, thereby ensuring that nurses from overseas are supported and guided in a comprehensive manner while achieving competence to practice nursing safely and effectively in Ireland.

An Bord Altranais, June 2003
Overview

An applicant from overseas may be required by An Bord Altranais to undertake a period of adaptation prior to obtaining registration. A period of adaptation is a period of supervised practice possibly being accompanied by further education and training. The period of adaptation is under the responsibility of a qualified nurse and this period of supervised practice shall be the subject of assessment. An applicant undergoing a period of adaptation will have his/her name entered on a Candidate Register maintained by An Bord Altranais and is referred to as a Candidate Nurse.

The purpose of the period of adaptation is to ensure that each Candidate Nurse becomes eligible for registration with An Bord Altranais. In order to become eligible for registration the Candidate Nurse must achieve competence. Competence is demonstrated by an ability of the Candidate Nurse to practice safely and effectively fulfilling his/her professional responsibility within his/her scope of practice. The Candidate Nurse works under the responsibility of a qualified nurse to develop the expected competencies for the duration of the period of adaptation. The Candidate Nurse actively engages in the process of adaptation and has a responsibility to negotiate opportunities for learning and to provide the necessary evidence that learning has occurred. The period of adaptation is the subject of an assessment to determine the achievement of competence. The Director of Nursing will attest to the suitability of the Candidate Nurse to have his/her name entered on the Register as maintained by An Bord Altranais following this period of adaptation and assessment.

Criteria for the provision of a period of adaptation

Prior to providing a period of adaptation to a Candidate Nurse the following criteria should be considered.

- The Candidate Nurse is placed in a learning environment that is already audited by a process approved by An Bord Altranais and has well established mechanisms for supporting learners. Placement in such an area facilitates assessment of suitability for access to the register as maintained by An Bord Altranais.

- The Candidate Nurse works with a qualified nurse (the preceptor/assessor) and/or other nursing staff on a daily basis for the duration of the period of adaptation. This enables the Candidate Nurse to develop the requisite knowledge, skills, attitudes and behaviours necessary to demonstrate the achievement of competence.

- The Preceptor/Assessor ideally has one year of post-graduate experience in the clinical area and is aware of the fundamental principles of assessment. It is desirable that each Preceptor/Assessor have completed a teaching and assessing or preceptorship course.

Adaptation strategy

The principle aim of the period of adaptation is to harness the knowledge and expertise that the Candidate Nurse brings to the programme in ways that empower the nurse to accept and exercise responsibility and accountability for independent learning, personal growth and self-awareness, and to demonstrate the competence required to have his/her name entered on the register.

Learner-centred approaches that embrace the processes and competencies of adult learning are encouraged to enable the Candidate Nurse to take control of professional development. Given the cultural background, and the wide ranging knowledge and experience the Candidate Nurse may process, no single teaching and learning strategy will address all needs. A variety of teaching and learning strategies are used in order to build upon existing knowledge and expertise:

- **Supervised clinical nursing practice** provides experiential learning and enables the Candidate Nurse to achieve and to demonstrate competence.

- **Reflective discussions** during supervised practice facilitate critical awareness and reflective practice.

- **Problem solving** enables the Candidate Nurse to assess and manage work in conjunction with peers. This fosters a notion of individual and collective thought and it encourages and enhances a team approach. It allows the Candidate Nurse to demonstrate initiative.

- **The use of a learning log** provides an opportunity to reflect upon and record personal encounters and to further develop English language-writing skills.
Assessment strategy

The assessment strategy recognises the knowledge, expertise and previous experience of the Candidate Nurse. It acknowledges that the nurse is registered on a professional register of nurses maintained by a nursing regulatory body in another country. In addition it also takes into account the individualised instructions set out in each nurse’s An Bord Altranais decision letter which states the length of the required period of adaptation. The Competence Assessment Tool is designed to allow for a transparent assessment process that is user-friendly. The focus is on facilitating learning opportunities that allow the Candidate Nurse to further develop independent learning skills and the performance criteria of competence associated with lifelong learning and continuing professional development. Evidence of competence may be gathered by a number of methods including:

- **By direct observation** of the Candidate Nurse’s performance throughout the period of adaptation
- **By question and answer** sessions to assess underpinning knowledge
- **By reflective discussions** between the Candidate Nurse and the Preceptor/Assessor regarding professional progress
- **By testimony** from other key qualified nursing staff
- **By product evidence**, e.g. documented nursing care
- **By learning log** evidence

Learning log

The use of a learning log during the period of adaptation is recommended. The Candidate Nurse may use the learning log to record personal accounts of learning and in so doing engage in reflective practice. To determine competence the Preceptor/Assessor satisfies him/herself that the Candidate Nurse has achieved the learning outcomes and the learning log may assist the Preceptor/Assessor in this endeavour. The log provides documented evidence of learning and the reflective notes may provide evidence that competence has been achieved in the relevant domains.

Tools to assist the assessment process

*Competence Assessment. Supporting a standard through interactive learning (An Bord Altranais 2002)* CD ROM will assist both Candidate Nurse and Preceptor/Assessor with the assessment process. Alternatively the e-learning package may be accessed on [http://www.aba.ie](http://www.aba.ie).

Attendance

Full attendance of 100% is expected of the Candidate Nurse during the period of adaptation. However 80% is the minimal attendance recommended before final assessment can be undertaken. A full shift is attended to enable achievement of the learning outcomes. Any deviation from this is negotiated locally with the Clinical Nurse Manager or Preceptor/Assessor.

Assessment meetings

To facilitate the assessment process it is recommended that formal meetings take place between the Preceptor/Assessor and the Candidate Nurse. An initial, an intermediate and a final meeting are essential. Meetings are held in private, free from disturbance. All meetings are recorded in the Meeting Record Sheets and entries must be dated and signed.

**Initial meeting**

- The initial meeting between the Candidate Nurse and the Preceptor/Assessor takes place early in the first week of the period of adaptation.
- The Competence Assessment Tool provides the framework for the discussion.
- The learning outcomes and the Domains of Competence are discussed in detail and opportunities for practice-based learning are identified.
- The Candidate Nurse and the Preceptor/Assessor formulate a learning contract, as learning needs, objectives, resources and strategies are identified.
- A record of the meeting is made in the Initial Meeting Record Sheet.
**Intermediate meeting**

- The intermediate meeting between the Candidate Nurse and the Preceptor/Assessor takes place at the mid-way point of the period of adaptation (e.g. 3-6 weeks). The decision as to when the intermediate meeting should be held is determined locally by the Preceptor/Assessor and is dependent on the individual adaptation process that each Candidate Nurse will experience.

- The progress of the Candidate Nurse is evaluated and the results are entered on the Competence Assessment Tool under the column ‘Intermediate Meeting’. The Preceptor/Assessor initialises each competency indicator under the column ‘Progressing’ or ‘Not progressing’.

- Not applicable may be recorded if this is deemed to be the case. A comment on the reason for this should be included on the Intermediate Meeting Record Sheet.

- **In the event that the Candidate Nurse is not progressing in an identified area/s a Verifier attends the meeting and the Director of Nursing is notified.**
  
  - The learning contract is examined in light of an identified lack of progress. In order to determine the reasons for the lack of progress by the Candidate Nurse the learning needs, objectives, resources and strategies are re-examined.
  
  - An examination of the clinical learning environment to ensure that the environment is conducive to learning may be helpful in light of an identified lack of progress.
  
  - An action plan is drawn up and agreed between the Candidate Nurse, the Preceptor/Assessor and the Verifier that will offer specific guidance and support to facilitate progression.
  
  - The action plan must be documented and should detail the following:
    1. Agreement on the part of the Candidate Nurse and the Preceptor/Assessor as to the exact area/s where a problem/s are identified
    2. Specific details of how the problem area/s will be addressed in the clinical area
    3. An agreed period of time for further supervised practice
    4. An agreed minimum contact time per week that the Preceptor/Assessor and Candidate Nurse will practice together

- A record of the meeting is made in the Intermediate Meeting Record Sheet.

**Final meeting**

- The final meeting takes place during the final week of clinical placement.

- An 80% attendance record is required.

- If identified during the intermediate meeting that the Candidate Nurse was not progressing in certain competencies, then sufficient attendance (i.e. 12 weeks) to determine that progress should be assessed is required before this final meeting takes place.

- The Candidate Nurse and the Preceptor/Assessor attend the meeting.

- The Verifier attends if:
  
  (a) either the Candidate Nurse or the Preceptor/Assessor or both requests his/her presence at the meeting
  
  (b) problems are identified during the intermediate meeting
  
  (c) the Candidate Nurse is deemed not competent

- Progress is evaluated and the results are entered on the Competence Assessment Tool under the column ‘Final Meeting’. The Preceptor/Assessor initialises each competency indicator under the column ‘Competent’ or ‘Not Competent’.

- If a Candidate Nurse is deemed not competent and a decision to extend the period of adaptation and assessment beyond 12 weeks is under consideration, this must be notified to and agreed by An Bord Altranais.

- A full review and further development of the learning contract and action plan will also be required at this point.

- A record of the meeting is made in the Final Meeting Record Sheet.
Management of assessment documentation

The Candidate Nurse is responsible for managing his/her assessment documentation for the duration of the period of adaptation and assessment. Records of meetings held are documented in the Meeting Record Sheets and on the Competence Assessment Tool. The Candidate Nurse holds the documentation throughout the period of adaptation and assessment and returns all documentation to the Preceptor/Assessor on completion of the period of adaptation. The completed documentation is then held by the hospital for a period of not less than 3 months and as agreed by local policy.

Report of the Director of Nursing

The Preceptor/Assessor advises the Director of Nursing on the outcome of the period of adaptation and assessment. Following this consultation with the Preceptor/Assessor, the Director of Nursing furnishes to An Bord Altranais a report on the Candidate Nurse. The report states whether, in the opinion of the Director of Nursing, the Candidate Nurse has or has not demonstrated competence and recommends or does not recommend registration accordingly.
Summary of Adaptation and Assessment

First week of the period of adaptation/assessment

• Initial Meeting is held
• Candidate Nurse and Preceptor/Assessor discuss and plan how the competencies are to be achieved.
• A learning contract is agreed

During the period of adaptation/assessment

• Candidate Nurse works with Preceptor/Assessor and/or other nursing staff in the achievement of competencies.
• Candidate Nurse engages in reflective practice and records learning in learning log.
• Candidate Nurse arranges the dates of intermediate and final meetings with the Preceptor/Assessor.

Mid-way during the period of adaptation/assessment

• Intermediate meeting is held and Candidate Nurse is formally assessed
• Candidate Nurse, Preceptor/Assessor and Verifier (if applicable) discuss progress to date and develop an action plan to promote achievement of competencies if applicable.

Final week of the period of adaptation/assessment

• Candidate Nurse, Preceptor/Assessor and Verifier (if applicable) hold a final meeting.
• Final assessment is carried out and documentation is completed, signed and submitted to the Director of Nursing.
• Director of Nursing submits a report to An Bord Altranais that recommends or does not recommend registration.
Glossary of Terms

Applicant
Applicant refers to a nurse who applies to An Bord Altranais to have his/her name entered on the register of nurses as maintained by the Board.

Action Plan
An action plan is a plan drawn up by the Assessor, the Candidate Nurse and the Verifier to facilitate and monitor the achievement of competence. It is initiated if necessary at the intermediate meeting if problem areas are identified.

Assessment
Determining the extent to which an individual reaches the desired level of competence in skill, knowledge, understanding or attitudes in relation to a specified goal (Neary 2000). Assessment measures the integration and application of theory to patient care learned throughout the programme, and requires the Candidate Nurse to demonstrate proficiency within practice through the achievement of learning outcomes.

Candidate Nurse
A Candidate Nurse is a nurse undergoing a period of adaptation for the purpose of registration with An Bord Altranais, whose name has been placed on the Candidate Register as maintained by An Bord Altranais.

Competence
Competence is a complex multidimensional phenomenon and is defined as the ability of the Registered Nurse to practice safely and effectively, fulfilling his/her professional responsibility within his/her scope of practice (An Bord Altranais 2000).

Critical Elements
They are defined as the set of single, discrete, observable behaviours that are mandatory for the designated skill at the targeted level of practice. They represent principles that are essential to ascribe competent performance (Lenburg 1999). They enable the learning outcomes both from a clinical and curriculum perspective to be achieved.

Domains of Competence
These represent a broad enabling framework to facilitate the assessment of the Candidate Nurses’ clinical practice. They are broad categories that represent the functions of the Registered Nurse in contemporary practice. All competencies are assessed on an ongoing basis during the period of adaptation.

Indicators
Indicators provide evidence of competence. The indicators are sub-divided into critical elements.

Learning Contract
A learning contract is a means of reconciling the learning needs of the Candidate Nurse with the requirements for successful completion of the period of adaptation and assessment. This is achieved through negotiation of learning needs and objectives. The focus is on the development of competence through achievement of the learning outcomes.

Learning Outcome
A learning outcome is a statement of what a nurse is expected to know, understand or be able to do at the end of a period of learning. It includes an indication of the evidence required to show that the learning has been achieved (Neary 2000).

Learning Log
The learning log represents documented evidence of learning recorded by the Candidate Nurse in the form of a diary/journal. It facilitates assessment in the five Domains of Competence as outlined by An Bord Altranais.

Period of Adaptation
A period of adaptation is a period of supervised practice possibly being accompanied by further education and training. The supervised practice is under the responsibility of a qualified nurse. This period of supervised practice shall be the subject of assessment. The assessment of the adaptation period shall represent achievement of An Bord Altranais ‘Competencies for Entry to the Register’.

Performance Criteria
The elements of the Domains of Competence are performance criteria, which are the criteria against which the Candidate Nurse is assessed. Performance criteria indicate that the outcome is the right quality (Storey 2001).
Preceptor/Assessor

A Preceptor/Assessor is a registered nurse. He/she is responsible for orientating, supervising and assessing the Candidate Nurse and is prepared to guide and direct the Candidate Nurse during the period of adaptation. The role involves facilitating learning opportunities and assessing the competence of the Candidate Nurse on a continuing basis throughout the period of supervised practice. The Preceptor/Assessor is an experienced nurse who acts as a role model and resource person for the Candidate Nurse assigned to him/her.

Reflection

To enable practitioners to develop the skills required in practice Schon (1991) advocates a model of professional learning, where professionals learn by reflecting within a practice environment. Essentially reflection involves three key stages, awareness of an issue, analysis of knowledge and feelings, and identification and integration of new learning (Atkins and Murphy 1993). Reflection may be recorded in the diary/journal/learning log.

Reflective Time

The time spent on reflection during the period of adaptation. The amount of time spent engaging in reflective practice is determined by the need of the Candidate Nurse and is agreed with the Preceptor/Assessor. It takes place in the clinical area.

Verifier

The Verifier is an independent person who ensures that the assessment is conducted fairly. If difficulties arise during the period of adaptation the Verifier is responsible for verifying the assessment process. The Verifier attends the intermediate and final meeting if requested to do so by the Candidate Nurse, the Preceptor/Assessor or both. The Clinical Nurse Manager is ideally experienced to verify the assessment process.
# Learning Outcomes

Learning outcomes are specific statements about what the nurse should have achieved by the end of a module (Quinn 2000). The purpose of the registration education programme is to ensure that the nurse is equipped with the knowledge and skills necessary to practice as a competent and professional nurse.

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<tr>
<th>The period of adaptation enables the Candidate Nurse to achieve these six learning outcomes:</th>
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<tr>
<td>Assist individuals, families and groups achieve optimum health, independence, recovery or a peaceful death in a professional caring manner.</td>
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<tr>
<td>Provide and manage direct practical nursing whether health promotional, preventive, curative, rehabilitative or supportive, to individuals, families or groups.</td>
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<td>Demonstrate a knowledge base and a level of competence in clinical practice skills essential for safe practice, which are grounded in recent evidence-based nursing research, where available.</td>
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<td>Identify and meet the nursing care needs of the individual, family, community in all health care settings.</td>
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<td>Demonstrate development of skills of analysis, critical thinking, problem-solving and reflective practice.</td>
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<tr>
<td>Act as an effective member of a health care team and participate in the multi-disciplinary team approach to the care of patients/clients.</td>
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Domains of Competence

Competence is a complex multidimensional phenomenon and is defined as the ability of the Registered Nurse to practice safely and effectively, fulfilling his/her professional responsibility within his/her scope of practice (An Bord Altranais 2000).

All five Domains of Competence represent the level the Candidate Nurse must reach on completion of the adaptation period for entry to the register held by An Bord Altranais. The aim is to ensure that the Candidate Nurse acquires the skills of critical analysis, problem-solving, decision-making, reflective skills and abilities essential to the art and science of nursing. Safe and effective practice requires a sound underpinning of theoretical knowledge that informs practice and is in turn informed by that practice. Within a complex and changing healthcare environment it is essential that the best available evidence inform practice. This is reflected in the competencies.

The competencies encompass five domains:

1. Professional/ethical practice.
2. Holistic approaches to care and the integration of knowledge.
3. Interpersonal relationships.
5. Personal and professional development.

The Domains of Competence represent a broad enabling framework to facilitate the assessment of the Candidate Nurses' clinical practice. Each domain consists of performance criteria and their relevant indicators.

A team and partnership approach will be applied when assessing the Candidate Nurse as the Preceptor/Assessor will consult with colleagues in determining the Candidate Nurses' competence.

Candidate Nurses are deemed to be either competent or not and where competence has not been achieved the nurse will be given opportunities to develop competence through an action plan. There are no ratings in the verification of competence (An Bord Altranais 2000).
## Domain 1. Professional / Ethical Practice:

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<th>Intermediate Meeting</th>
<th>Final Meeting</th>
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<tr>
<td></td>
<td>Progressing</td>
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<td>ASSESSORS INITIALS</td>
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### 1.1 Practices in accordance with legislation affecting nursing practice.

#### 1.1.1 Integrates accurate and comprehensive knowledge of ethical principles, the Code of Professional Conduct and within the scope of professional nursing practice, in the delivery of nursing practice.
- Utilises and critically evaluates the knowledge of:
  - Ethical principles and their implications for nursing practice,
  - Code of professional conduct,
  - Scope of practice.

#### 1.1.2 Fulfils the duty of care in the course of nursing practice.
- Applies and evaluates principles of the above (1.1.1) to nursing practice.

#### 1.1.3 Implements the philosophies, policies, protocols and clinical guidelines of the health care institution.
- Utilises and critically evaluates a knowledge of:
  - Service philosophies including mission statement
  - Policies and procedures
  - Standards.
- Integrates the above into nursing practice.

#### 1.1.4 Responds appropriately to instances of unsafe or unprofessional practice.
- Demonstrates knowledge and adapts a proactive approach in the identification and prevention of instances of unsafe or unprofessional practice.

#### 1.1.5 Integrates knowledge of the rights of clients and groups in the health care setting.
- Demonstrates in practice knowledge of:
  - Client/Patient rights
  - Freedom of Information Act
  - Legal Rights
- Disseminates knowledge of the above to individuals/groups/communities and colleagues.

### Key
- 1.1 = Performance Criteria
- 1.1.1 = Indicator
- • = Critical Element
## Domain 1. Professional / Ethical Practice:

### 1.1.6 Serves as an advocate for the rights of clients or groups.
- Acts as an advocate for the rights of individuals / groups / communities.

### 1.1.7 Ensures confidentiality in respect to records and interactions.
- Demonstrates confidentiality in nursing practice.
- Maintains patient confidentiality.

### 1.1.8 Practices in a way that acknowledges the differences in beliefs and cultural practices of individuals/groups/communities.
- Demonstrates awareness of the differences in beliefs and cultural practices of individuals / groups / communities.
- Shows respect for the differences in beliefs and cultural practices of individuals / groups / communities.
- Respects the impact of gender, ethnicity, aging and the family on health and illness.
- Disseminates knowledge of the above to individuals/groups/communities and colleagues.

### Key
- 1.1 = Performance Criteria
- 1.1.1 = Indicator
- • = Critical Element
### Domain 1. Professional / Ethical Practice:

#### 1.2 Practices within the limits of own competence and takes measures to develop own competence.

| 1.2.1 | Determines own scope of practice utilising the principles for determining scope of practice in the Scope of Nursing and Midwifery Practice Framework document.  
- Identifies own abilities and learning required with reflective logs in nursing practice.  
- Demonstrates dissemination of knowledge and development of skills, attitudes and behaviour to fulfil nurse’s role. |
| 1.2.2 | Recognises own abilities and level of professional competence.  
- Develops and demonstrates practical clinical nursing skills based on observation, participation and integration of knowledge.  
- Critically evaluates own ability and level of professional competence within Code of Conduct and Scope of Practice. |
| 1.2.3 | Accepts responsibility and accountability for consequences of own actions or omissions. |
| 1.2.4 | Consults with supervisors if allocated nursing assignments are beyond competence. |
| 1.2.5 | Clarifies unclear or inappropriate instructions. |
| 1.2.6 | Formulates decisions about care within the scope of professional nursing practice utilising the Decision-Making Framework in the Scope of Nursing and Midwifery Practice Framework document. |

#### Key
- **1.1** = Performance Criteria
- **1.1.1** = Indicator
- **•** = Critical Element

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**Evidence**
## Domain 2. Holistic Approaches to Care and the Integration of Knowledge:

<table>
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<tr>
<th>2.1 Conducts a systematic holistic assessment of client needs based on nursing theory and evidence-based practice.</th>
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<tr>
<td><strong>2.1.1</strong> Uses an appropriate assessment framework safely and accurately.</td>
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<tr>
<td>• Implements and utilises an appropriate assessment framework safely and accurately.</td>
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<tr>
<td>• Integrates relevant research findings to underpin nursing assessment.</td>
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| 2.1.2 Analyses data accurately and comprehensively leading to appropriate identification of findings. |
| • Identifies client needs and gives rationale for findings. |

| 2.1.3 Incorporates relevant research findings into nursing practice. |
| • Critically evaluates research findings that underpin nursing practice. |

| 2.1.4 Promotes research designed to improve nursing practice. |
| • Disseminates findings to colleagues. |

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<tr>
<th>2.2 Plans care in consultation with the client taking into consideration the therapeutic regimes of all members of the health care team.</th>
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<tr>
<td><strong>2.2.1</strong> Establishes priorities for resolution of identified health needs.</td>
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<tr>
<td>• Supports and defends priorities in resolution of identified health needs in consultation with the individual/group/community and other members of the health care team.</td>
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| 2.2.2 Identifies expected outcomes including a time frame for achievement. |

| 2.2.3 Identifies criteria for the evaluation of the expected outcomes. |

| 2.2.4 Plans for discharge and follow up care. |
| • Develops a discharge plan and follow-up care in consultation with the individual/group/community and other members of the health care team. |

### Key
- **1.1** = Performance Criteria
- **1.1.1** = Indicator
- • = Critical Element
**Domain 2. Holistic Approaches to Care and the Integration of Knowledge:**

<table>
<thead>
<tr>
<th>2.3 Implements planned nursing care/interventions to achieve the identified outcomes.</th>
<th>Intermediate Meeting</th>
<th>Final Meeting</th>
<th>Documented Evidence</th>
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| **2.3.1** Delivers nursing care in accordance with the plan that is accurate, safe, comprehensive and effective.  
• Delivers accurate, safe, comprehensive and effective nursing in accordance with the plan. |  |  |  |
| **2.3.2** Creates and maintains a physical, psychosocial, and spiritual environment that promotes safety, security and optimal health.  
• Identifies, creates and maintains a physical, psychosocial and spiritual environment for the individual/group/community to ensure safety, security and optimal health. |  |  |  |
| **2.3.3** Provides for the comfort needs of individuals. |  |  |  |
| **2.3.4** Acts to enhance the dignity and integrity of individuals/clients/groups/communities.  
• Identifies and maintains sensitivity to the dignity and integrity of individuals/clients/groups/communities. |  |  |  |
| **2.4 Evaluates client progress toward expected outcomes and reviews plans in accordance with evaluation data and consultation with the client.** |  |  |  |
| **2.4.1** Assesses the effectiveness of nursing care in achieving the planned outcomes.  
• Critically evaluates the effectiveness of nursing care in achieving the planned outcomes in consultation with the individual/group/community and other members of the health care team. |  |  |  |
| **2.4.2** Determines further outcomes and nursing interventions in accordance with evaluation data in consultation with the individual/group/community and other members of the health care team. |  |  |  |

**Key**  
1.1 = Performance Criteria  
1.1.1 = Indicator  
• = Critical Element
### Domain 3. Interpersonal Relationships:

<table>
<thead>
<tr>
<th>3.1 Establishes and maintains caring therapeutic interpersonal relationships with individuals/ clients/ groups/ communities.</th>
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</table>
| 3.1.1 Reflects on the usefulness of personal communication techniques.  
  - Critically evaluates the usefulness of personal communication techniques. |
| 3.1.2 Conducts nursing care ensuring clients receive and understand relevant and current information concerning health care.  
  - Demonstration of the provision of nursing care that ensures clients:  
    - Receive relevant and current information concerning health care.  
    - Understand relevant and current information concerning health care. |
| 3.1.3 Assists client/groups/communities to communicate needs and to make informed decisions.  
  - Identify strategies that enable clients/groups/communities to communicate needs and to make informed decisions.  
  - Implement strategies that enable clients/groups/communities to communicate needs and to make informed decisions.  
  - Critically evaluates strategies that enable clients/groups/communities to communicate needs and to make informed decisions. |

<table>
<thead>
<tr>
<th>3.2 Collaborates with all members of the health care team and documents relevant information.</th>
</tr>
</thead>
</table>
| 3.2.1 Participates with all health care personnel in a collaborative effort directed toward decision making concerning clients.  
  - Demonstrates the ability to contribute as part of the health care team in a collaborative effort directed toward decision-making concerning clients. |
| 3.2.2 Establishes and maintains accurate, clear and current client records within a legal and ethical framework.  
  - Demonstrates the ability to maintain accurate, clear and current client records within a legal and ethical framework. |

**Key**

1.1 = Performance Criteria  
1.1.1 = Indicator  
* = Critical Element
## Domain 4. Organisation and Management of Care:

### 4.1 Effectively manages the nursing care of clients/groups/communities.

| 4.1.1 | Contributes to the overall goal/mission of the health care institution.  
|       | • Applies and contributes to the overall goal/mission of the health care institution. |
|       | 4.1.2 Demonstrates the ability to work as a team member. |
|       | 4.1.3 Determines priorities for care based on need, acuity and optimal time for intervention. |
|       | 4.1.4 Selects and utilises resources effectively and efficiently. |
|       | 4.1.5 Utilise methods to demonstrate quality assurance and quality management. |

### 4.2 Delegates to other nurses’ activities commensurate with their competence and within their scope of professional practice.

| 4.2.1 | When delegating a particular role/function account is taken of the principles outlined in the Scope of Nursing and Midwifery Practice Framework. |

### 4.3 Facilitates the co-ordination of care.

| 4.3.1 | Works with all team members to ensure that client care is appropriate, effective and consistent.  
|       | • Demonstrates the ability to co-ordinate care and work with all team members to ensure that the client care is appropriate, effective and consistent. |

### Key

| 1.1 = Performance Criteria | 1.1.1 = Indicator | • = Critical Element |
## Domain 5. Personal and Professional Development:

<table>
<thead>
<tr>
<th>5.1 Acts to enhance the personal and professional development of self and others.</th>
<th>Intermediate Meeting</th>
<th>Final Meeting</th>
<th>Documented Evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1.1 Contributes to the learning experiences of colleagues through support, supervision and teaching.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Participates in the support, supervision and teaching of colleagues to enhance their personal and professional development.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.1.2 Educates clients/groups/communities to maintain and promote health.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Participates in the education of clients/groups/communities.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Key**

1.1 = Performance Criteria  
1.1.1 = Indicator  
* = Critical Element
To be completed by the **Candidate Nurse** in partnership with the Preceptor/Assessor

This is a record of a plan to achieve competence and to achieve the learning outcomes.

The Candidate Nurse and the Preceptor/Assessor formulate a learning contract, as learning needs, objectives, resources and strategies are identified. The Competence Assessment Tool provides the framework for this.

<table>
<thead>
<tr>
<th>Signature of Candidate Nurse:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Preceptor/Assessor:</td>
<td>Date:</td>
</tr>
</tbody>
</table>
Intermediate Meeting Record Sheet

To be completed by the Preceptor/Assessor in partnership with the Candidate Nurse.

The initial meeting record and the plan to achieve the five domains of competence are reviewed and an action plan developed where progress is not being made.

Verifier attends if problem/s are identified or if either Preceptor/Assessor or Candidate Nurse requests his/her presence.

<table>
<thead>
<tr>
<th>Signature of Preceptor/Assessor:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Candidate Nurse:</td>
<td>Date:</td>
</tr>
<tr>
<td>Signature of Verifier (if applicable):</td>
<td>Date:</td>
</tr>
</tbody>
</table>
## Final Meeting Record Sheet

To be completed by the **Preceptor/Assessor** in the presence of the Candidate Nurse.

Verifier attends if Candidate Nurse deemed not competent or if either Preceptor/Assessor or Candidate Nurse requests his/her presence.

### COMPETENT

If learning outcomes have been achieved and Candidate Nurse deemed competent Preceptor/Assessor signs below:

Preceptor/Assessor Signature: ________________________________

### OR

### NOT COMPETENT

If Candidate Nurse deemed not competent Preceptor/Assessor signs below and specifies below Domain/s of Competence not achieved:

Preceptor/Assessor Signature: ________________________________

### Comments

CONTINUED OVERLEAF
<table>
<thead>
<tr>
<th>Comments cont.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Preceptor/Assessor:</td>
</tr>
<tr>
<td>Signature of Candidate Nurse:</td>
</tr>
<tr>
<td>Signature of Verifier (if applicable):</td>
</tr>
</tbody>
</table>