

Applicant Name:	Practice Area: (Please write out in full)
Organisation:	
Contact Email:	
Mobile number:	
Annual Practising Certificate Number:	Employee Number:
Expiry date:	
Ethnicity <i>select which applies to you</i>	
<input type="checkbox"/> Chinese <input type="checkbox"/> Māori <input type="checkbox"/> Samoan <input type="checkbox"/> Cook Islands Māori <input type="checkbox"/> New Zealand European <input type="checkbox"/> Tongan <input type="checkbox"/> Indian <input type="checkbox"/> Niuean <input type="checkbox"/> Other (<i>please state</i>) _____	
Please tick which applies	
<input type="checkbox"/> New applicant <input type="checkbox"/> Resubmission	
Declaration and Consent	
<ul style="list-style-type: none"> • I declare the attached portfolio contains my own work. • I declare at the time of submission of this portfolio, I am not the subject of any performance management process or NCNZ competence review. • Confidentiality will be maintained throughout the Portfolio to ensure patients, family/whanau, community, and colleagues are not identifiable. • I give consent for the assessor(s) to take my portfolio off site for the purposes of assessment and recognise that my portfolio may be selected for internal/external moderation. • I understand the assessor(s) may need to contact me or my peers/manager for additional evidence if not adequately supplied. • I understand a timeframe is required for assessment dependent on organisation. 	
I declare that the above statements are truthful, and this portfolio is an accurate description of my previous three years practice.	
Signature: _____ Date: _____	
Signed by Line Manager two weeks prior to submission:	
I support _____ to apply for EN Accomplished PDRP.	
Line Manager Name: _____	
Email: _____ Phone: _____	
Signature: _____ Date: _____	

Levels of Practice Definitions: The Accomplished Enrolled Nurse (EN)

- Demonstrates **advancing** knowledge and skills in a specific clinical area within the EN scope.
- **Develops** partnerships with clients that implement Te Tiriti o Waitangi in a manner which the client determines is culturally safe
- **Contributes** to the management of changing workloads.
- Gains support and respect of the health care team through sharing of knowledge and making a **demonstrated positive contribution**.
- Undertakes an **additional responsibility** within a clinical/quality team, e.g. resource nurse, health and safety representative, etc.
- **Actively** promotes understanding of legal and ethical issues
- **Contributes** to quality improvements and change in practice initiative.
- Acts as a role model and **contributes** to leadership activities.

Submission Information:

- Please read carefully and ensure that all sections are completed accurately and appropriately.
- Documentation is to be a maximum of three years old except where annual requirements are specifically stated.
- All documentation should be appropriately named, signed and dated.
- You need to provide one clinical example of practice in your performance appraisal (peer/senior nurse review) against the Nursing Council New Zealand Competencies.
- All evidence submitted should be your own work or if in collaboration, permission and sign off sought from the third party.
- Your portfolio should show examples of 'best practice' at all times.
- Those involved in your portfolio submission may be approached to assist during the assessment process by providing additional evidence or confirmation.

N.B. Should you be practicing in an Expanded Practice Role or in Management, Education, Research or Policy, please access the appropriate supplementary competencies workbook.

Evidential Requirements Checklist – Accomplished EN

	Applicant Name:	Applicant to complete	Assessor to complete Docs sighted
1	Annual Practising Certificate Printout from NCNZ Website, or copy of current APC (front and back)	<input type="checkbox"/>	<input type="checkbox"/>
2	Hours of Practice Evidence of 450 hours of practice to be verified by Charge Nurse/Nurse Manager/HR Dept – validated in Performance appraisal or Record of Practice Hours report/form verified (signed and dated) from your organisation.	<input type="checkbox"/>	<input type="checkbox"/>
3	Current CV Providing work and education history	<input type="checkbox"/>	<input type="checkbox"/>
4	Performance Appraisal and/or peer appraisal/competence assessment Evidence must be against NCNZ Competencies, on organisational documentation, and completed within the last 12 months. All competencies must have an example of how the nurse meets the competency in day to day practice at the level applied. Peer Appraiser is to be a Registered Nurse. Self-Assessment Evidence must be against NCNZ Competencies, on organisational documentation, and completed within the last 12 months and from your current practice area. All competencies must have an example of how the nurse meets the competency in day to day practice at the level applied. Competencies must be verified by a Registered Nurse who is a designated Senior Nurse; or a peer RN with approval from Line Manager of current workplace. The PA (self-assessment) should contain evidence from the last 12 months. If sections 7, 8, or 9 were completed over 12 months ago then a separate piece of evidence or statement is needed.	<input type="checkbox"/>	<input type="checkbox"/>
5	Professional Development <u>Hours of Professional Development</u> Evidence must be within the last 3 years and show at least 60 hours. This may include organisational mandatory/essential requirements (as per employment agreement). Professional development hours record/evidence of attendance to be verified.	<input type="checkbox"/>	<input type="checkbox"/>
	<u>Three reflections on Professional Development</u> This is to be related to your practice area. Include either: A short reflection for each course or activity OR three key professional development activities (describing the difference the learning has made to you nursing practice)	<input type="checkbox"/>	<input type="checkbox"/>
6	Verification that application of Accomplished Level discussed with Manager or an Equivalent Designated Senior Nurse	<input type="checkbox"/>	<input type="checkbox"/>

<p>NB. If the following level of practice evidence (7, 8, and 9) is met within the standard requirements (e.g. PA, self-assessment and senior nurse/peer review), then no additional evidence is required. If it is not then separate evidence should be provided to support proficient level of practice. Evidence must be obtained and signed by your Line Manager of your current workplace</p>			
7	<p>Contribution in practice change or quality initiative May use the templates found on the website. Please state where evidence is found:</p>	<input type="checkbox"/>	<input type="checkbox"/>
8	<p>Engagement and influence in professional activities Evidence may include – contribution to profession committee(s)/contribution to national submission(s) Please state where evidence is found:</p>	<input type="checkbox"/>	<input type="checkbox"/>
9	<p>In-depth understanding of patient care and/or care coordination within scope of practice. Please state where evidence is found:</p>	<input type="checkbox"/>	<input type="checkbox"/>
10	<p>I agree for my portfolio and associated documentation to be removed from PDRP office for assessment All steps will be taken to maintain the safety and privacy of the portfolio by the designated assessor. You may request the return of your portfolio at any time.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	<p>Returning of your Portfolio Your portfolio will be returned via internal mail for Health NZ/Te Whatu Ora Nurses, otherwise via your regional organisations PDRP Coordinator and mail systems</p>		
12	<p>Internal and External Moderation of Portfolios The PDRP requires portfolios to be moderated to maintain consistency and objectivity of the process. The portfolio will be reviewed by one of the PDRP Assessors who will moderate the original assessor(s) of your portfolio. The moderation process does not affect the outcome of your assessment. Your portfolio may be selected for this process. Do you understand and agree to the Moderation Process?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13	<p>Practice Discussion if requested by applicant Applicant may request a practice discussion</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p>Please Note: Incomplete Portfolios may be returned to applicant for amendment as per the Te Kāhui Kōkiri Mātanga regional policy</p>			

Assessment Process

The assessment will be carried out as soon as possible and should take no longer than 10 weeks.

It is not unusual for your assessor(s) to contact you for clarification or for extra evidence before a decision is made. This contact is generally by phone, but you may request a meeting.

When your portfolio assessment has been completed, you will be contacted with the decision, which will be one of the following:

Decisions

- **Endorsement of Progression**

This means criteria for the applied level have been successfully met.

- **Reserved Decision**

This means that the assessor is confident that you are practising at the level you have applied for, but further documented evidence is needed. You are given a timeframe of **6 weeks** to provide this.

- **Non-Progression**

This means that your assessor is confident that the criteria for that level have not yet been met. Guidelines may have not been adhered to or there are clear gaps in evidence that prevent a fair decision. Your assessor will clearly tell you which areas require further development and make some suggestions. If you wish to appeal the decision or the process, this procedure is outlined on the website or in the PDRP Policy.

NCNZ Reporting

Details of your PDRP application are loaded onto our database to assist with our reports to Nursing Council to remove you from their audit process.

Appeals

All applicants will have feedback from their assessment, if you disagree with the decision, you should write a letter of appeal to the PDRP Coordinator. The appeal should be lodged within 7 working days of the decision using an Appeal Notification Form (A6). On receipt of this letter, the PDRP Coordinator will request two new assessors to re-assess the portfolio.

The new assessors will not be told of the original outcome. If the decision by the new assessors is that you have been unsuccessful, you may decide to continue with the appeal. An Appeals Panel will be formed and those present will interview you and the assessors. On completion of this process, a written report outlining recommendations will be sent to you with copies to the PDRP Assessors, PDRP Advisory Committee and the Nurse Coordinator - PDRP.

Reference:

Nurse Executives of New Zealand Inc. (10 April 2017). National Framework and Evidential Requirements. New Zealand Nursing Professional Development & Recognition Programmes for registered and Enrolled Nurses.

Disclaimer:

- The PDRP EN Guideline document is current at the time of printing, and is subject to regular review. It is bound by the constraints of Nursing Council of New Zealand (NCNZ) and NZNO with regard to legislative or employment changes.
- All efforts will be made to publicise significant changes, however any concerns or issues may be raised with the PDRP Advisory Committee.
- Ethnicity Data is only collected for the purposes of Nursing Workforce Development and PDRP. Data will not be shared for any other purpose

Professional Development Record

You are required to demonstrate at least 60 hours professional development in the previous three (3) years. Please complete this form if you **do not** have an organisational education transcript or if the education is not recorded by your organisation.

Date	Title of Education Activity	Hours	Educator/Manager verification
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Total Hours (over last 3 years)			

Verification of attendance by Nurse Educator or Manager

(Verify Original Certificates sighted)

Signed:	Date:
Print Name:	Designation:
Contact Details:	

Competencies and Indicators (tick ONE indicator only)

Domain 1: Professional Responsibility

This domain contains competencies that relate to professional, legal, and ethical responsibilities and cultural safety. These include being able to demonstrate knowledge and judgement and being accountable for own actions and decisions, while promoting an environment that maximises health consumer safety, independence, quality of life and health.

Competency 1.1 - Accepts responsibility for ensuring that his/her nursing practice and conduct meet the standards of the professional, ethical, and relevant legislated requirements.

- Accepts responsibility and actively promotes the standards of the professional, ethical, relevant legislated requirements that underpin EN/NA practice, through the sharing of information with peers
- Role models Nursing Council and organisational standards to guide nursing practice, ensuring consistent standards of care for the health consumer, assisting, and supporting others with this.
- Actively promotes and reflects upon ethical principles/codes to ethical situations/examples within area of practice
- Is confident in raising ethical issues related to practice in discussion with other health team members
- Provides and actively promotes evidence that practice consistently meets professional standards, scope of practice and relevant legislation and speciality best practice standards

Competency 1.2 - Demonstrates the ability to apply the principles of the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice

- Identifies or describes the development of partnerships with patients that implement the Treaty of Waitangi
- Demonstrates and promotes understanding of the Treaty of Waitangi and its relevance to the health of Maori
- Role models the application of Treaty of Waitangi principles in nursing practice, assisting others with this
- Acts as a role model in the application of the principles of the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice
- Assists others to integrate processes appropriate for Māori. E.g., whānau hui, karakia, whakawhanaungatanga

Competency 1.3 - Demonstrates understanding of the enrolled nurse scope of practice and the registered nurse responsibility and accountability for direction and delegation of nursing care.

- Recognises and actively promotes knowledge of enrolled nurse scope and acts in accordance with the scope of practice, organisational policy and own level of competence.
- Demonstrates understanding of the registered nurse's role to direct, delegate, monitor and evaluate nursing care and contributes to the management of changing workloads.
- Consults with the registered nurse to ensure that delegated tasks and responsibilities are commensurate with own level of competence and demonstrates advancing knowledge and skills within clinical area.
- Utilises advancing knowledge to provide care and seeks guidance from a registered nurse when encountering situations beyond knowledge, competence, or scope of practice.

Competency 1.4 - Promotes an environment that enables health consumer safety, independence, quality of life, and health.

- Role models the promotion of a safe physical and social environment to maximise health consumer safety, independence and quality of life
- From an accomplished Enrolled Nurse perspective, and specific to area of practice, identifies risk/hazards and takes appropriate action for infection control, health and safety/environmental safety issues, restraint minimisation and incident reporting
- Demonstrates ability to initiate appropriate emergency response and treatment and to assist with co-ordination of emergency/critical event under the direction of a registered nurse, supporting and assisting others
- Participation in debriefing either formally or informally demonstrating understanding of the impact of critical incidents on self and others and encourages and supports others with this
- Identifies or describes how a positive contribution is made to maintaining an environment that enhances patient safety (e.g., infection control)

Competency 1.5 - Participates in ongoing professional and educational development.

- Proactive in seeking professional development opportunities for self and others
- Undertakes additional responsibility that relates to quality initiatives and EN practice e.g., health and safety representative, infection control representative, EN representative etc
- Reflects on positive changes made to nursing practice and demonstrates a positive contribution to the healthcare team through the sharing of knowledge.
- Demonstrates how own nursing practice is evidence based and promotes this within area of practice
- Demonstrates peer support of other colleagues in professional development
- Identifies professional involvement and contribution within area of practice at a local and/or national level e.g., NZNO, EN Section
- Presentation of enrolled nursing practice at a seminar/workshop/study day/conference.

Competency 1.6 - Practices nursing in a manner that the health consumer determines as being culturally safe.

- Role models culturally safe practice that meets individual needs, beliefs and values as determined by the health consumer
- Assists other EN to reflect on their practice and values that impact on cultural safety and to actively incorporate their insights into their own practice
- Role models culturally safe nursing practice and partnership, ensuring communication skills are culturally safe and respects each health consumer's dignity and right to hold personal beliefs, values and goals
- Identifies or describes how culturally appropriate information/principles and communication are used in the organisation's informed consent process, and assists others with these
- Actively promotes and identifies or describes the development of partnerships in the delivery of culturally safe nursing care
- Acts as a role model in promoting the provision of advocacy that enables health consumers to receive nursing care that supports their dignity, personal beliefs, values and goals

Domain 2: Provision of Nursing Care

This domain contains competencies related to assessment and provision of nursing care for health consumers when working under the direction of a registered nurse.

Competency 2.1 - Provides planned nursing care to achieve identified outcomes.

- Utilises advancing knowledge and skills in development of care plans in collaboration with the registered nurse and health consumers and clarifies responsibilities for planned care with the registered nurse.
- Promotes independence while assisting health consumers to undertake activities of daily living, such as nutrition, hydration, elimination, mobility, social functioning, and personal hygiene; and role models planning and management to peers.
- Uses nursing knowledge and problem-solving skills when carrying out professional responsibilities and contributes to management of changing workloads.
- Demonstrates leadership to peers through problem solving, prioritisation and time management.
- Demonstrates and shares advancing knowledge when carrying out procedures effectively and safely within the clinical setting.
- Contributes to education of peers regarding nursing interventions and medications within legislation, codes, scope of practice, according to prescription, and established organisational policy and procedures.

Competency 2.2 - Contributes to nursing assessments by collecting and reporting information to the registered nurse.

New Competency by Nursing Council - NOT ASSESSED FOR ENs IN RESTRICTED SCOPE

- Effectively demonstrates the use of assessment tools as delegated by the registered nurse and actively promotes and shares knowledge with peers.
- Utilises and shares advancing knowledge and skills when undertaking a range of data gathering techniques including observation, interview, physical examination and measurement and role models this to peers.
- Assists with routine examinations and routine diagnostic investigations using advancing knowledge and skills.
- Demonstrates advancing knowledge, skills and understanding of the different developmental stages of the life span and makes a demonstrated positive contribution by sharing this knowledge with peers.

Competency 2.3 - Recognises and reports changes in health and functional status to the registered nurse or directing health professional. **New Competency by Nursing Council - NOT ASSESSED FOR ENs IN RESTRICTED SCOPE**

- Observes changes in consumers' health and functional status in the course of nursing practice and is flexible and responsive to multiple priorities based on patient needs.
- Communicates observations to the registered nurse and appropriate members of the health team and identifies potential workload problems and collaborates with RN to identify effective interventions.
- Reports changes in health status in a timely manner and provides leadership to peers through contributing to implementation of procedures when responding to concerns which are escalating in the health care setting.

Competency 2.4 - Contributes to the evaluation of health consumer care.

- Contributes to the evaluation of health consumer care by taking an active role in quality improvement initiatives and the implementation of change, in collaboration with the RN
- Identifies or describes how quality care/safe outcomes for the health consumer is the focus of nursing practice, and assists others with this
- Demonstrates contribution to service improvement quality activities within area of practice
- Has designated responsibility for a component of the ward/areas quality monitoring system e.g., audits
- Provides example of contribution to policy within area of practice
- Demonstrates and assists others in the application of clinical knowledge in continuous evaluation/assessment of health consumer health care and response to care being given, under the direction of a registered nurse
- Identifies or describes communicating and planning effectively (e.g., transfer of care, handover, communicating patient/community outcomes/response/changes)

Competency 2.5 - Ensures documentation is accurate and maintains confidentiality of information.

- Demonstrates and role models accurate, legible and objective documentation that maintains confidentiality according to organisational policies
- Identifies or describes how documentation and recording of health consumer health status according to organisational and professional documentation standards, assisting others with this
- Role models and assists others with effective communication on the health consumer health status with registered nurse and other health team members
- Contributes to quality improvements and change practice initiatives related to health consumer care and actively participates in service, professional or organisational activities

Competency 2.6 - Contributes to the health education of health consumers to maintain and promote health
New Competency by Nursing Council - NOT ASSESSED FOR ENs IN RESTRICTED SCOPE

- Demonstrates advancing knowledge and skills through the provision of accurate and culturally appropriate education to health consumers or groups to maintain or promote health in consultation with the registered nurse.
- Applies skilled communication techniques when determining consumer understanding by seeking feedback on information given, and acts as a resource for peers.
- Demonstrates an advancing evidence based knowledge and understanding of how health and disease are affected by multiple and interconnected factors and shares knowledge with peers.

Domain 3: Interpersonal Relationships

This domain contains competencies related to interpersonal and therapeutic communication with health consumers, their families/whanau and other nursing and healthcare staff.

Competency 3.1 - Establishes, maintains and concludes therapeutic interpersonal relationships with health consumer.

- Acts as a role model when establishing, maintaining and concluding interpersonal relationships with health consumers, nursing and inter- professional team
- Actively reflects on the use of therapeutic relationships and professional boundaries in nursing practice, and assists and supports colleagues in this
- Role models a culturally safe, negotiated and therapeutic relationship with health consumers
- Discusses difficult issues with health consumers confidently and competently, demonstrating use of conflict resolution and problem solving skills, assisting others with these

Competency 3.2 - Communicates effectively as part of the health care team

New Competency by Nursing Council - NOT ASSESSED FOR ENs IN RESTRICTED SCOPE

- Consistently communicates relevant patient/health consumer information in a timely manner to other members of the healthcare team, and acts as a resource for peers.
- Demonstrates and educates peers in the effective use of a variety of communication styles and approaches in different situations.
- Uses advancing knowledge and skills to assist other Enrolled Nurses to reflect on the importance of giving and receiving constructive feedback that enhances service delivery to health consumers.
- Gains support and respect of the health care team through sharing of knowledge and making a demonstrated positive contribution to the work place.

Competency 3.3 - Uses a partnership approach to enhance health outcomes for health consumers.

New Competency by Nursing Council - NOT ASSESSED FOR ENs IN RESTRICTED SCOPE

- Demonstrates advancing knowledge and leadership to peers in the use of the principles of a recovery centred approach to nursing care within different health care settings.
- Role models and contributes to education of peers through the use of nursing interventions which lessen the impact of stigma and discrimination on health outcomes for health consumers and enhances fairness, equality and self-determination.
- Acts as an advocate and role model to peers in the effective use of resources in the health consumer's community to improve health outcomes.

Domain 4: Interprofessional Health Care and Quality Improvement.

This domain contains competencies related to promoting a nursing perspective within the interprofessional health care team and contributing to quality improvement.

Competency 4.1 - Collaborates and participates with colleagues and members of the health care team to deliver care.

- Collaborates with the health consumer, the RN/RM and health team members to contribute to decision making within the inter-professional care team
- Role models, supports and coaches other health team members on effective and professional communication
- Collaborates and contributes to the health care team in the delivery of health consumer care, assisting others with this
- Contributes to leadership activities and undertakes additional responsibilities within area of practice
- Identifies or describes maintenance of positive relationships with other disciplines
- Identifies or describes contribution to multidisciplinary decision-making.
- Identifies or describes support provided to other enrolled nurses and HCA's

Competency 4.2 - Recognises the differences in accountability and responsibilities of registered nurses, enrolled nurses and healthcare assistants.

New Competency by Nursing Council - NOT ASSESSED FOR ENs IN RESTRICTED SCOPE

- Demonstrates advancing knowledge and skills through the sharing of knowledge regarding the enrolled nurse role and responsibilities in the context of health care settings.
- Acts as a resource, and contributes to leadership activities for peers student nurses and health care assistants.
- Effectively manages and role models the prioritisation and delivery of nursing care to health consumers as guided by the registered nurse.
- Co-ordinates provision of care by health care assistants as delegated by the registered nurse and educates peers on effective care coordination.

Competency 4.3 - Demonstrates accountability and responsibility within the health care team when assisting or working under the direction of a registered health professional who is not a nurse.

New Competency by Nursing Council - NOT ASSESSED FOR ENs IN RESTRICTED SCOPE

- Demonstrates leadership to peers on understanding the enrolled nurse role and boundaries in relation to the scopes of practice of other registered health professionals.
- Acts as a resource for peers and actively promotes understanding of legislative requirements, organisation policy and refers issues outside scope to a registered nurse supervisor.
- Works under the direction of an identified health professional and demonstrates effective and appropriate responses to changing clinical situations in a timely manner; and reports any concerns to the health professional.