| **Name of Applicant: PDRP Level:** |
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| **Domain 1: Professional Responsibility** |
|  | Self- Assessment Met  | Peer Review/ Senior Nurse Assessment Met  | Further Evidence Required (please state if applicable) |
| Competency 1.1  | Yes / No | Yes / No |  |
| Competency 1.2 | Yes / No | Yes / No |  |
| Competency 1.3 | Yes / No | Yes / No |  |
| Competency 1.4 | Yes / No | Yes / No |  |
| Competency 1.5 | Yes / No | Yes / No |  |
| Competency 1.6 | Yes / No | Yes / No |  |
| **Domain Met Yes / No** |
| **Domain 2: Management of Nursing Care** |
| Competency 2.1 | Yes / No | Yes / No |  |
| Competency 2.2 | Yes / No | Yes / No |  |
| Competency 2.3 | Yes / No | Yes / No |  |
| Competency 2.4 | Yes / No | Yes / No |  |
| Competency 2.5 | Yes / No | Yes / No |  |
| Competency 2.6 | Yes / No | Yes / No |  |
| **Domain Met Yes / No** |
| **Domain 3: Interpersonal Relationships** |
| Competency 3.1 | Yes / No | Yes / No |  |
| Competency 3.2 | Yes / No | Yes / No |  |
| Competency 3.3 | Yes / No | Yes / No |  |
| **Domain Met Yes / No** |
| **Domain 4: Interprofessional Health Care & Quality Improvement** |
| Competency 4.1 | Yes / No | Yes / No |  |
| Competency 4.2 | Yes / No | Yes / No |  |
| Competency 4.3 | Yes / No | Yes / No |  |
| **Domain Met Yes / No** |
| **Levels of Practice Specific Requirements (Proficient only)** |
| Practice Change or Quality Initiative | Yes / No |  |
| Teaching / Preceptorship  | Yes / No |  |
| In-depth Understanding – Care and Coordination | Yes / No |  |
| **Levels of Practice Specific Requirements (Accomplished only)** |
| Quality Improvement and Change Process Contribution | Yes / No |  |
| Engagement and Influence – Professional Activities | Yes / No |  |
| In-depth Understanding – Care and Coordination | Yes / No |  |

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| **Assessor Summary and Recommendations:** |
| **PDRP Level Achieved? Yes / No**  | **Date:** |
| **Assessor Name:** | **Designation:** |
| **Signature:** | **Assessment Time:** |