

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

## Levels of Practice Definitions: The Proficient Registered Nurse (RN)

- Acts as a **role model** and a **resource person** for other nurses and health practitioners
- **Participates in changes** in the practice setting, which recognises and integrates the principles of Te Tiriti o Waitangi and cultural safety
- Has a **holistic overview** of the client and the practice context
- Demonstrates **autonomous and collaborative** evidence-based practice
- Acts as a **role model and resource person** to other nurses and health practitioners
- **Actively** contributes to clinical learning for colleagues
- **Supports and guides** the health care team in day to day health care delivery
- Participates in **quality improvements** and changes in the practice setting
- Demonstrates in-depth understanding of the **complex factors** that contribute to clients health outcomes

## 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 – Proficient RN

	<b>Applicant Name:</b>	<b>Applicant to complete</b>	<b>Assessor to complete</b> Docs sighted
<b>1</b>	<b>Annual Practising Certificate</b> Printout from NCNZ Website, or copy of current APC (front and back)	<input type="checkbox"/>	<input type="checkbox"/>
<b>2</b>	<b>Hours of Practice</b> Evidence of 450 hours of practice to be <b>verified by Charge Nurse/Nurse Manager/HR Dept</b> – validated in Performance appraisal or Record of Practice Hours report/form verified (signed and dated) from your organisation.	<input type="checkbox"/>	<input type="checkbox"/>
<b>3</b>	<b>Current CV</b> Providing work and education history	<input type="checkbox"/>	<input type="checkbox"/>
<b>4</b>	<p><b>Performance Appraisal and/or peer appraisal/competence assessment</b> 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.</p> <p><b>Self-Assessment</b> 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 8, 9, or 10 were completed over 12 months ago then a separate piece of evidence or statement would be needed.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>5</b>	<p><b>Professional Development</b> <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 <b>of attendance to be verified.</b></p>	<input type="checkbox"/>	<input type="checkbox"/>
	<p><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 <b>OR</b> three key professional development activities (describing the difference the learning has made to you nursing practice)</p>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6</b>	<b>Verification that application of Proficient Level discussed with Manager or an Equivalent Designated Senior Nurse</b>	<input type="checkbox"/>	<input type="checkbox"/>
<p><b>NB.</b> 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><b>Participation in practice change or quality initiative</b>          May use the templates found on the website          Please state where evidence is found:</p>	<input type="checkbox"/>	<input type="checkbox"/>
8	<p><b>Evidence of Teaching/Preceptorship or Supporting skill development of colleagues.</b>          If a teaching session is used, evidence of organisation and delivery to be included.          Please state where evidence is found:</p>	<input type="checkbox"/>	<input type="checkbox"/>
9	<p><b>Ability to manage and coordinate care processes for patients with complex needs</b>          Please state where evidence is found:</p>	<input type="checkbox"/>	<input type="checkbox"/>
10	<p><b>I agree for my portfolio and associated documentation to be removed from PDRP office for assessment</b>          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><b>Returning of your Portfolio</b>          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><b>Internal and External Moderation of Portfolios</b>          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><b>Practice Discussion if requested by applicant</b>          Applicant may request a practice discussion</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<p><b>Please Note:</b> Incomplete Portfolios may be returned to applicant for amendment as per the Te Kāhui Kōkiri Mātanga regional policy</p>			

## Assessment Process

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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

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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 RN 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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<b>Total Hours</b> (over last 3 years)			

### Verification of attendance by Nurse Educator or Manager

(Verify Original Certificates sighted)

<b>Signed:</b>	<b>Date:</b>
<b>Print Name:</b>	<b>Designation:</b>
<b>Contact Details:</b>	

## 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.

- Provides evidence that verifies practice consistently meets professional standards, scope of practice and relevant legislation and demonstrates the ability to integrate these requirements and role model this in the speciality area.
- Demonstrates ability to meet the standards of the professional, ethical and relevant legislated requirements, providing guidance and support to colleagues.
- Applies ethical principles and reflection to nursing practice including support and education of colleagues with legislative and professional requirements.
- Role models ethical principles in own practice, encourages discussions/debate on legal/ethical requirements.

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

- Applies Treaty of Waitangi principles in own nursing practice addressing disparities in health.
- Acknowledges the need for integration of processes appropriate for Maori, through encouraging collaborative cultural relationships to facilitate education and support of others.
- Demonstrates ability to apply the principles of the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice and role models to others the ability to integrate processes appropriate for Māori. For example whānau hui, karakia, whakawhanaungatanga

**Competency 1.3** - Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by enrolled nurses and others

- Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by enrolled nurses and others, providing guidance to colleagues
- Reflection on role of preceptor/teacher, including support of colleagues to accept greater responsibilities or to undertake new skills
- Effectively assumes leadership responsibilities
- Evaluates and manages workload demand, staffing levels and health consumer care, demonstrating effective use of resources and ensuring safety for all
- Co-ordinates transfer of care (e.g. transfer of care, handover, communicating patient/community outcomes/response/changes) in consultation with the patient and the wider health team
- Preceptors nursing students, supervises and delegates to EN's, HCA's and less experienced team members

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

- Identifies and responds to complex situations that impact on the physical and social environment to maximise health consumer safety, independence and quality of life and health.
- Contributes to the effectiveness and efficiency in the operational management of their area of practice to enable health consumer safety, independence, quality of life, and health.
- Evaluates and reflects on own practice and supports others to ensure health consumer/colleague safety and risk reduction (e.g. knowledge and practice of medication administration, evidence based treatments and interventions).
- Actively involved in resource role for ensuring safe environments, e.g. infection control, health and safety, restraint minimisation/de-escalation, CPR instructor.
- Demonstrates ability to match resources to demands and monitors health consumer outcomes.

**Competency 1.5** - Practices nursing in a manner that the health consumer determines as being culturally safe

- Role models culturally safe practice to meet health consumers individual needs, beliefs and values.
- Guides colleagues to access resources to meet the individual needs, beliefs and values of health consumers (e.g. religious support, interpreters).
- Is a role model to colleagues and able to seek ways to increase the acceptance of diversity.
- Recognises the impact that organisational culture and the culture of nursing has on health consumer care and role models cultural responsiveness to other colleagues.
- Role models practice that assists the health consumer to gain appropriate support and representation from those who understand the health consumers culture, needs and preferences

## Domain 2: Management of Nursing Care

**This domain contains competencies related to health consumer assessment and managing health consumer care, which is responsive to the health consumer/health consumers' needs, and which is supported by nursing knowledge and evidence based research.**

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

- Demonstrates ability to guide colleagues in planning and delivery of care.
- Role models best practice and acts as a resource in the teaching of colleagues in planning nursing care.
- Contributes at team level (MDT) in the management of complex cases.
- Demonstrates in depth understanding of complex factors that contribute to health consumer health outcomes.

**Competency 2.2** - Undertakes a comprehensive and accurate nursing assessment of health consumers in a variety of settings.

- Conducts a comprehensive and accurate nursing assessment of the health consumer with complex needs in a variety of settings.
- Demonstrates timely, systematic and holistic assessment skills in partnership with complex health consumers, educating and supporting colleagues in effective use of assessment tools.
- Provides evidence that verifies and describes use of advanced skill in undertaking clinical assessment and physical examination.
- Provides evidence that describes how clinical reasoning and decision-making is applied in practice.
- Educates, coaches and supports health team members in the use of appropriate assessment tools and methods

**Competency 2.3** - Ensure documentation is accurate and maintains confidentiality of information.

- Role models accurate, legible and objective documentation that maintains confidentiality in line with organisational policies.
- Participates in ongoing reviews of documentation used within the practice setting to ensure documentation is effective and maintained within a legal and ethical framework.
- Ensures own nursing documentation is accurate, legible and objective as per organisational process, ensuring health consumer confidentiality is maintained in own nursing practice, educating and assisting colleagues with this.

**Competency 2.4** - Ensures the health consumer has adequate explanation of the effects, consequences and alternatives of proposed treatment options.

- Guides and supports colleagues to use information and culturally appropriate communication to enable health consumers to make informed choices.
- Acts as a resource for colleagues in facilitating the health consumer's access to appropriate therapies or interventions and respects the health consumer's right to choose alternatives.
- Demonstrates knowledge of area specific treatments, interventions and alternatives.
- Role models advanced clinical knowledge and the ability to provide sound non-judgemental advice.



**Competency 2.5** - Acts appropriately to protect oneself and others when faced with unexpected health consumer responses, confrontation, personal threat or other crisis situations

- Demonstrates ability to lead or actively manage a critical or unexpected event.
- Role models prioritisation and co-ordination of health consumer care during an emergency/acute situation.
- Role models effective and appropriate responsiveness to changing health status of health consumers.
- Acts as a role model in responding to situations of unexpected health consumer responses, confrontation, personal threat or other crisis situations.
- Demonstrates ways to achieve highest professional standards of psychological and physical safety for self and other nurses.

**Competency 2.6** - Evaluates health consumer's progress toward expected outcomes in partnership with health consumers.

- Demonstrates ability to take a lead role in facilitating inter-professional team decision-making in partnership with health consumers to support best possible outcomes.
- Role Models skilled advocacy in support of health consumer.
- Evaluates/revises expected outcomes of care in partnership with the health consumer and guides less experienced colleagues in evaluating progress.
- Role models effective nursing interventions and health education with health consumers to achieve expected outcomes.
- Advises less experienced nurses to enable them to negotiate understanding of expected outcomes effectively with health consumers.
- Role models and collaborates in care planning with patients/health consumers to achieve identified outcomes

**Competency 2.7** - Provides health education appropriate to the needs of the health consumer within a nursing framework.

- Provides evidence of complex discharge/transfer/rehabilitation/palliative care coordination, demonstrating partnership and health education given to the health consumer.
- Provide evidence that verifies you implement health teaching and promotion appropriate to the patient and role models this to colleagues.
- Provides and supports others in the provision of health consumer health education to meet the complex needs of health consumers.
- Provides and facilitates an inter-professional approach to health consumer health education to meet the complex needs of health consumers.
- Actively participates in informal/formal teaching situations demonstrating the ability to identify learning needs of others.
- Development/review of patient education and/or health promotion resources

**Competency 2.8** - Reflects upon, and evaluates with peers and experienced nurses, the effectiveness of nursing care.

- Uses and supports others to use reflective processes to explore their clinical and cultural decision-making and actions.
- Uses audits to evaluate the effectiveness of nursing care within the service.
- Explores evidence-based practice and decision-making to facilitate the growth and development of own and others practice.
- Participates in debriefing and in the development of colleagues in both formal and informal debriefing technique/processes.
- Actively participates and supports others in the use of reflection and evaluation as a tool to ensure the effectiveness of nursing care delivery

**Competency 2.9** - Maintains professional development

- Contributes to clinical learning and is proactive in seeking professional development opportunities to extend own and others practice.
- Develops increased knowledge and skills in a specific clinical area and shares this knowledge with others (e.g. teaching, preceptorship, conference presentations, quality initiatives)
- Engages in formal nursing education to extend own and other practice.
- Actively receives, and or provides clinical supervision (Mandatory at SDHB)

**Domain 3: Interpersonal Relationships**

**This domain contains competencies related to interpersonal and therapeutic communication with health consumers, other nursing staff and interprofessional communication and documentation.**

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

- Role models and guides others in establishing, maintaining and concluding therapeutic interpersonal relationships.
- Challenges negativity and promotes a positive environment.
- Maintains professional boundaries in your nursing practice and assisting team members with the development of therapeutic interpersonal skills.
- Provides advice and guidance for staff on how to initiate and sustain effective interpersonal relations with Health consumers and Whanau

**Competency 3.2** - Practices nursing in a negotiated partnership with the health consumer where and when possible.

- Acts as a resource to others to negotiate nursing care in partnership with the health consumer with complex needs.
- Provides evidence of effective advocacy for health consumers (demonstrating partnership ) and supports/role models this to colleagues.
- Acts as a resource to other nurses on how to develop and conduct patient facilitated learning.
- Demonstrates ability to play a significant role in the support of health consumer and/or colleagues

**Competency 3.3** - Communicates effectively with health consumers and members of the health care team.

- Demonstrates effective communication skills with health consumers and health team members, and assists in the development of appropriate communication techniques/methods/resources.
- Provides education and support to members of the healthcare team to ensure that information is effectively communicated to the health consumer and others.
- Role models a range of communication skills to communicate effectively with health consumers, colleagues and members of the health team.
- Is skilled in presenting complex information effectively with patients/health consumers, families/whanau and colleagues.
- Demonstrates advanced skills in presenting complex information effectively with health consumers and colleagues

## Domain 4: Interprofessional Health Care and Quality Improvement.

This domain contains competencies to demonstrate that, as a member of the health care team, the nurse evaluates the effectiveness of care and promotes a nursing perspective within the interprofessional activities of the team.

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

- Demonstrates ability, and supports others, when assisting health consumers to progress through the continuum of care (e.g. referrals, transfers, discharges).
- Provides evidence of a collaborative team approach used to maintain continuity and enhance coordination of health consumer care, including the communication of health consumer information to health care team.
- Role models the ability to work collaboratively and to participate effectively with colleagues and other members of the healthcare team.
- Acts as a role model in providing a nursing perspective and contribution within the interprofessional activities of the health care team.
- Verify that your opinion on issues or problems is sought by others – both peers and managers.
- Proactive participation to represent the nursing perspective in care e.g. MDT, daily care.

**Competency 4.2** - Recognises and values the roles and skills of all members of the health care team in the delivery of care.

- Uses a collaborative approach with other disciplines to negotiate changes.
- Demonstrates and shares with colleagues an in depth understanding of the roles and skills of all members of the health care team and their role in the delivery of holistic health consumer care
- Actively works in partnership and role models the consultation and sharing of information with other health professionals on delivery of care to health consumers

**Competency 4.3** - Participates in quality improvement activities to monitor and improve standards of nursing.

- Initiates and guides quality improvement principles in nursing practice and contributes to quality involvement within area of practice including support and encouragement of others
- Contributes to planning/evaluation/development/review of area policy, participation in audits, evidence based practice
- Contributes to change processes to improve standards of nursing care
- Provides evidence that verifies involvement in quality improvement activities (e.g. auditing, quality group)Contributes to or reviews nursing protocols, policies and assessments based on relevant research