

<b>Name of Applicant:</b>		<b>PDRP Level:</b>	
<b>APC/Registration number:</b>			
<b>Domain 1: Professional Responsibility</b>			
	Self-Assessment Met	Peer Assessment/ Senior Nurse Assessment Met	Further Evidence Required (please state if applicable)
Competency 1.1			
Competency 1.2			
Competency 1.3			
Competency 1.4			
Competency 1.5			
<b>Domain Met</b>	<b>Yes</b>	<b>No</b>	
<b>Domain 2: Management of Nursing Care</b>			
Competency 2.1			
Competency 2.2			
Competency 2.3			
Competency 2.4			
Competency 2.5			
Competency 2.6			
Competency 2.7			
Competency 2.8			
Competency 2.9			
<b>Domain Met</b>	<b>Yes</b>	<b>No</b>	
<b>Domain 3: Interpersonal Relationships</b>			
Competency 3.1			
Competency 3.2			
Competency 3.3			
<b>Domain Met</b>	<b>Yes</b>	<b>No</b>	
<b>Domain 4: Interprofessional Health Care &amp; Quality Improvement</b>			
Competency 4.1			
Competency 4.2			
Competency 4.3			
<b>Domain Met</b>	<b>Yes</b>	<b>No</b>	
<b>Levels of Practice Specific Requirements (Proficient only)</b>			
Practice Change or Quality Initiative			
Teaching / Preceptorship / Skill Development			
Care Coordination & Management Complex Care			
<b>Levels of Practice Specific Requirements (Expert only)</b>			
Integration of Acquired Nursing Knowledge (throughout portfolio)			
Expert Knowledge and Application: Complex Care and Clinical Leadership			
Contribution Specialty Knowledge / Innovation / Quality Improvement			
Engagement / Influence Activities (Nursing Advocacy)			
Responsibility for Learning / Development of Colleagues			

Assessor Summary and Recommendations

PDRP Level Achieved?

Yes

No

Date

Assessor Name

Designation

Signature

Assessment Time