



NORTHERN DISTRICTS REGIONAL PROFESSIONAL DEVELOPMENT AND RECOGNITION PROGRAMME

Registered Nurse Maintenance Requirements

Expert

Name _____ Contact Number _____ Work Area: _____

Assessor (s) _____ Assessment Date: _____



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Checklist of Requirements for Submission of Expert Maintenance Portfolio

- Submission form completed and put in front of portfolio
- Comprehensive Performance Review - current within last 12 months
- Curriculum Vitae – up to date and including relevant work history
- TDH DHB Compliance / Certifications in line with job description
- Verified record of Professional Development / Education, **identifying learning from activities** – minimum of 60 hours within the last 3 years
- Verified record of hours of nursing practice – minimum of 450 hours within the last 3 years
- Self review/reflective practice demonstrating competencies of **Expert** level of practice – signed and dated. Provide an example from practice against self review statements.
- Written attestations and / or peer review (minimum of 2) are signed and dated on each page.
- Completed Maintenance Expert workbook

Each competency statement needs to have at least one piece of first party and one piece of third party evidence to support it

First Party Evidence e.g. self review, reflective writing – material you produce about your own practice

Third Party Evidence e.g. attestations, peer review, performance review/ appraisal - material someone else produces about your practice

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Confidentiality

- As a Registered Nurse you are obliged to adhere to the Health Information Privacy Code. In accordance with this, no information contained within portfolios will identify clients / consumers / whānau / communities as well as health team members / staff. Confidentiality requires not only protecting the name of individuals / groups but also their locality / specific unique situation e.g. a high profile media case which could lead to their identify / a particular community that may be identified within the context of the reflection
- Consider professional implications before disclosing information about your practice or that of others that could be regarded as inappropriate. Please seek guidance if unsure.
- The portfolio is a personal document and the information it contains is private and confidential. All assessors are required to respect this expectation. However an assessor has an ethical and legal responsibility to refer any identified issue of unsafe practice to the PDRP Coordinator in the first instance who will then refer to the Director of Nursing
- Portfolios are to be held in a locked filing cabinet within Nursing and Quality Services. In the event of portfolios being assessed outside of the organisation, all due care will be taken by the assessor to ensure confidentiality and protection of the portfolio
- Written permission will be obtained for off site assessment on submission of the portfolio.

Breaches of confidentiality will require a portfolio to be returned to the applicant for amendment.

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Definition of Expert Registered Nurse:

- Guides others to apply the principles of Te Tiriti o Waitangi
- Guides others to implement culturally safe practice to clients
- Engages in Post Graduate level education (or equivalent*)
- Contributes to specialty knowledge
- Acts as a role model and leader
- Demonstrates innovative practice
- Is responsible for clinical learning/development of colleagues
- Initiates and guides quality improvement activities
- Initiates and guides changes in the practice setting
- Is recognised as an expert in her/his area of practice
- Influences at a service, professional or organisational level
- Acts as an advocate in the promotion of nursing in the health care team
- Delivers quality client care in unpredictable challenging situations
- Is involved in resource decision making/strategic planning
- Acts as leader for nursing work unit/facility

Referenced From: National Professional Development & Recognition Programmes Working Party (2005) *National Framework for Nursing Professional Development & Recognition Programmes & Designated Role Titles*. Available online at <http://www.nurse.org.nz/leadership/PDRP%20Final%20National%20Document%20Dec%202005.pdf> pp11-12.

* Post graduate level education or equivalent in the Northern District Regional PDRP means post registration education that impacts on practice at the expert level

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DOMAIN ONE: Professional Responsibility

Competency	Page number of evidence		Assessor comments (include reference to 1 st and 3 rd party evidence)	M	N
	1 st	3 rd			
1.1 Accepts responsibility for ensuring that his/her nursing practice and conduct meets the standards of the professional, ethical and relevant legislated requirements.					
1.2 Demonstrates the ability to apply the principles of the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice.					
1.3 Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by nurse assistants, enrolled nurses and others.					
1.4 Promotes an environment that enables client safety, independence, quality of life and health.					
1.5 Practices nursing in a manner that the client determines as being culturally safe.					

Summary:

Assessor:

Date:

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DOMAIN TWO – Management of Nursing Care

Competency	Page number of evidence		Assessor comments (include reference to 1 st and 3 rd party evidence)	M	N
	1 st	3 rd			
2.1 Provides planned nursing care to achieve identified outcomes.					
2.2 Undertakes a comprehensive and accurate nursing assessment of clients in a variety of settings.					
2.3 Ensures documentation is accurate and maintains confidentiality of information.					
2.4 Ensures the client has adequate explanation of the effects, consequences and alternatives of proposed treatment options.					
2.5 Acts appropriately to protect oneself and others when faced with unexpected client responses, confrontation, personal threat or other crisis situations					

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DOMAIN TWO – Management of Nursing Care contd

Competency	Page number of evidence		Assessor comments (include reference to 1 st and 3 rd party evidence)	M	N
	1 st	3 rd			
2.6 Evaluates client's progress toward expected outcomes in partnership with clients.					
2.7 Provides health education appropriate to the needs of the client within a nursing framework.					
2.8 Reflects upon, and evaluates with peers and experienced nurses, the effectiveness of nursing care.					
2.9 Maintains professional development.					

Summary:

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DOMAIN THREE - Interpersonal relationships

Competency	Page number of evidence		Assessor comments (include reference to 1 st and 3 rd party evidence)	M	N
	1 st	3 rd			
3.1 Establishes, maintains and concludes therapeutic interpersonal relationships with client.					
3.2 Practices nursing in a negotiated partnership with the client where and when possible.					
3.3 Communicates effectively with clients and members of health team.					

Summary:

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DOMAIN FOUR: Interprofessional health care & quality improvement

Competency	Page number of evidence		Assessor comments (include reference to 1 st and 3 rd party evidence)	M	N
	1 st	3 rd			
4.1 Collaborates and participates with colleagues and members of the health care team to facilitate and coordinate care.					
4.2 Recognises and values the roles and skills of all of the health care team in the delivery of care.					
4.3 Participates in quality improvement activities to monitor and improve standards of nursing.					

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APPENDIX 1

Self Review Guidelines

- Self review is a professional responsibility. Honest assessment of your practice against Nursing Council Competencies ensures consumer safety and maintains professional credibility
- When undertaking self review consider: **WHAT, WHY, HOW and WHEN – provide examples** to verify your practice. Support your knowledge with **references**. There are various ways that a self review can be written eg a single review against each competency, reflective writing that focus on components of your nursing practice but are inclusive of the competencies.
- Reflect on your strengths and areas that you see as needing to be developed.
- Use proactive statements when describing your professional growth and identifying opportunities for professional development /information sharing.
- Consider your performance over the whole time under review (ie the previous 3 years) and acknowledge your successes and achievements.

Reference:

Ministry of Health (2002). Toward Clinical Excellence. An introduction to clinical audit, peer review and other clinical practice Improvement activities. Wellington: New Zealand. This document is available on the M.O.H. website: <http://www.moh.govt.nz>

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