



Professional Association of Nurses in
Developmental Disability Australia Inc.

Professional Portfolio

REGISTERED NURSE

Registration Number:	
Roll:	
Year Registered:	
Name:	
Address:	
Phone:	
Email:	
Qualifications:	
Place of employment:	

Introduction

The Australian Health Practitioner Regulation Agency (AHPRA), through the Nursing and Midwifery Board of Australia has developed national standards for the regulation of the nursing and midwifery professions within Australia.

These standards have been developed in relation to current regulatory and legislative environments that govern healthcare in Australia.

Nurses are required to demonstrate that they have maintained their competence to practice as a nurse within their specialty or field of employment.

The Australian Nursing and Midwifery Council have developed the Continuing Competency Standards for the Registered Nurse (2006) and the Continuing Competence Framework (2009), which offers a structure to assist nurses to systematically evaluate their practice. This includes an evaluation of the competency standards, identifying learning and development needs and documenting ongoing education and displaying recency of practice.

This portfolio provides a frame work to allow nurses working in the area of intellectual disabilities to document the requirement of The Australian Nursing and Midwifery Council.

The portfolio is divided into three sections.

1. Recency of Practice

- Nurses must meet the recency of practice requirements and set out in the respective state/territory legislation

2. Assessment

- Annual self assessment of performance in current role, against the relevant ANMC competency standards
- Annual Professional review
- Annual self declaration of competence

3. Continuing Professional Development (CPD)

- Annual completion of 20 hours of relevant education

All nurses must meet all the framework requirements to be eligible for renewal of registration.

NOTE Your portfolio can be maintained in hard copy or electronic form. This document must be updated annually and can be requested at anytime by The Australian Nursing and Midwifery Council for review.

1. Recency of Practice

Practice is defined as any role in which the individual uses their nursing or midwifery skills and knowledge. It should be noted that for the purposes of the National Continuing Competence Framework, practice is not restricted to the provision of direct clinical care only. Being “in practice” therefore includes using nursing or midwifery knowledge in a direct relationship with clients, and working in nursing or midwifery management, administration, education, research, professional advice, regulatory or policy development roles and any other roles which impact on safe, effective nursing or midwifery service delivery. (ANMC, Continuing Competence Framework, 2009)

Please refer to Australian Nursing and Midwifery Council Continuing Competence Framework.

To maintain nursing registration you currently have to work 420 hours every 5 years. (Approximately one, 8 hour shift every 4 weeks).

Evidence:

- Keep your Portfolio and Curriculum Vitae Current
- Copies of pay advice
- Records of service from Pay Office or Manger
- Records of ongoing education in nursing

Please attach Curriculum Vitae

NOTE Information on how to develop a CV is on the following page.

How to develop your Curriculum Vitae

Your CV is a written reflection of your nursing career. It is an individual document but should include the following headings.

Personal Details

- Name
- Address
- Contact details – phone numbers and email address
- APRHA nursing registration number and year of initial registration

Memberships of Professional Organisations

- Career Summary – you begin by naming current position and commencement date
- Work backwards in time listing the dates commenced and date completed every work position you have had
- Each position should list the duties you are responsible for
For example – April 2007 to December 2010 – Registered Nurse (Health Service)
Responsible for:
 - In charge of shift for unit
 - Responsible for junior staff delivery of health care (mentoring and supervision during shift)
 - Liaising with unit and hospital management
 - Preparing all written documents, care plans and application for clients
 - Organising staff education and client programs

Professional Qualifications

- Again list from most recent qualification back in time

List further education sessions attended CPF with dates attended

- Each year your Continual Professional Development should be recorded and collated so that a summary of your training throughout your nursing career is maintained.

Continuing Professional Development (CPD) sessions, with dates:

- Each year your CPD should be recorded and collated so that a summary of education and development throughout your nursing career is maintained

Professional Achievements

- Record involvement in committees
- Project involvement
- Special projects

Communication Skills

- Ability to communicate and liaise with people, including:
 - Active participation in multidisciplinary team meetings
 - Writing reports
 - Computer Skills

Professional Referees

- You should list two professional Referees. One of which should be your current manager

Professional Referees

- Identify two professional referees. One of these should be your current manager

2. Assessment

Component 1. ANMC National Competency Standards

The ANMC, National Competency Standards for the Registered Nurse, (2006) lists the competencies below. Each competency should be reflected upon with your area of practice.

NOTE You can use the same evidence for multiple competencies.

Annual self assessment of performance in current role against ANMC Competency Standards.

Competencies sourced from: Australian Nursing and Midwifery Council (October 2002). National Competency Standards for the Registered Nurse. Retrieved 10 January, 2011: www.anmc.org.au/userfiles/competency_standards/Competency_standards_RN.pdf

PROFESSIONAL PRACTICE

Relates to the professional, legal and ethical responsibilities which require demonstration of a satisfactory knowledge base, accountability for practice, functioning in accordance with legislation affecting nursing and health care, and the protection of individual and group rights.

1. Practices in accordance with legislation affecting nursing practice and health care

1.1	<p>Practices in accordance with legislation affecting nursing practice and health care:</p> <ul style="list-style-type: none"> Identifies legislation governing nursing practice. Describes nursing practice within the requirement of the common law. Describes and adheres to legal requirement of medications. Identifies legal implications of nursing interventions. Actions demonstrate awareness of legal implications of nursing practice. Identifies and explains effects of legislation on the care of individuals/groups. Identifies and explains effects of legislation in the area of health. Identifies unprofessional practice as it relates to confidentiality and privacy legislation.
1.2	<p>Fulfils the duty of care:</p> <ul style="list-style-type: none"> Performs nursing interventions in accordance with recognised standards of practice. Clarifies responsibility for aspects of care with other members of the health team. Recognises the reasonability to prevent harm. Performs nursing interventions following comprehensive and accurate assessments.
1.3	<p>Recognises and responds appropriately to unsafe or unprofessional practice:</p> <ul style="list-style-type: none"> Identifies interventions which prevent care being compromised and/or law contravened Identifies appropriate action to be taken in specified circumstances. Identifies and explains alternative strategies for intervention and their likely outcomes. Identifies behaviour that is detrimental to achieving optimal care. Follows up incidents of unsafe practice to prevent re-occurrence.
<p>Examples of current evidence to consider:</p> <ul style="list-style-type: none"> Any training including workplace professional development relating to legal and ethical practice, updates, changes. Naming of documents read such as legislation updates, policy and procedure changes, drafts reviews. Minutes that shows your regular attendance and participation at staff meetings. Narrative of a report to your current supervisor. Lead or participate in case conferences. Conducts/participates/contributes to client assessments using approved workplace formats. Undertakes routine professional development in OHS, Duty of Care, Individual Planning, risk management, empowerment. samples of completed incident or/hazard reports. Any involvement/role description in working party/committee/body participation such as ethics committee, values and standards. Your current job description. Examples of advocacy undertaken. Participation in lobby groups eg "Every Australian Counts". 	

Sample suggestion of how you might respond to 'I fulfill the above competency by':

I practice using the professional standards of nursing observing Duty of Care, the Poisons Act, Confidentiality, Privacy Act. Professional and the Code of Conduct within my practice area. I have a working knowledge of the Disability Act. 1993 and the Guardianship Act 1987 and the Occupational Safety Act 2000 revised 2010.

I fulfill the above competency by:

Attach any documents/work samples that provide evidence of the elements and performance criteria listed above (Attachment 1).

2. Practices within a professional and ethical nursing framework

2.1	<p>Practices in accordance with legislation affection nursing practice and health care:</p> <p>Accepts individuals/groups regardless of race, culture, religion, age, gender, sexual preference, physical or mental state. Ensures that personal values and attitudes are not imposed on others. Conducts assessments that are sensitive to the needs of individuals/groups. Recognises and accepts the rights of others. Maintains an effective process of care when confronted by differing values, beliefs and biases. Seeks assistance to resolve situations involving moral conflict. Identifies and attempts to overcome factors which may constrain ethical decisions in consultation with the health care team.</p>
2.2	<p>Integrates organisational policies and guidelines with professional standards:</p> <p>Maintains current knowledge of and incorporates relevant professional standards into practice. Maintains current knowledge of and incorporates organisational policies and guidelines into practice. Reviews and provides feedback on the relevance of organisational policies and professional standards procedures to practice. Demonstrates awareness and understanding of developments in nursing that have an impact on the individual's capacity to practice nursing.</p>
2.3	<p>Practice in a way that acknowledges the dignity, culture, values, beliefs and rights of individuals/groups:</p> <p>Demonstrates respect for individuals/group common and legal rights in relation to health care. Identifies and adheres to strategies to promote and protect individual/group rights. Considers individual/group preferences when providing care. Clarifies individual/group requests to change and/or reuse care with relevant members of the health care team. Advocates for individuals/groups when rights are overlooked and/or compromised. Accepts individuals/groups to whom care is provided regardless of race, culture, religion, age, gender, sexual preference, physical or mental state. Ensures that personal values and attitudes are not imposed on others. Undertakes assessments which are sensitive to the needs of individuals/groups. Recognises and accepts and rights of others. Maintains and effective process of care when confronted by differing values, beliefs and biases. Provides appropriate information within the nurse's scope of practice to individuals/groups. Consults relevant members of the health care team when required. Questions and/or clarifies orders and decisions that are unclear, not understood or questionable. Questions and/or clarifies interventions that appear inappropriate with relevant members of the health care team.</p>
2.4	<p>Advocates for individuals/groups and their rights for nursing and health care within organisational and management structures:</p> <p>Identifies when resources are insufficient to meet care needs of individuals/groups. Communicates skill mix requirements to meet care needs of individuals/groups to management. Protects the rights of individuals and groups and facilitates informed decisions. Identifies and explains policies/practices which infringes on the rights of individuals or groups. Clarifies policies, procedures and guidelines when rights of individuals or groups are compromised. Recommends changes to policies, procedures and guidelines when rights are compromised.</p>
2.5	<p>Understands and practices within own scope of practice:</p> <p>Seeks clarification when questions, directions and decisions are unclear or not understood. Undertakes decisions about care that are within scope of competence without consulting senior staff. Raises concerns about inappropriate delegation with the appropriate registered nurse. Demonstrates accountability and responsibility for own actions within nursing practice. Assesses consequences of various outcomes of decision making. Consults relevant members of the health care team when required. Questions and/or clarifies interventions which appear inappropriate with relevant members of the health care team.</p>

2.6	<p>Integrates nursing and health care knowledge, skills and attitudes to provide safe and effective nursing care: Maintains a current knowledge base. Considers ethical responsibilities in all aspects of practice. Ensures privacy and confidentiality when providing care. Questions and/or clarifies interventions which appear inappropriate with relevant members of the health care team.</p>
2.7	<p>Recognises the differences in accountability and responsibility between registered nurses, enrolled nurses and unlicensed care workers: Understands requirements of statutory and professionally regulated practice. Understands requirements for delegation and supervision of practice. Raises concerns about inappropriate delegation with relevant organisational or regulatory personnel.</p>
<p>Examples of current evidence to consider: Evidence of regular supervision/appraisal sessions with Manager. Position description. Any involvement as a mentor or mentee eg agreements, mentoring sessions. Examples of referrals or programs/plans made in consultation with specialists eg Therapy, Behaviour support, allied health. Development, delivery or implementation of client and stakeholder education. Participation/application of cultural competence. Evidence of supervision of others within delegation. Any involvement/role description in working party/committee/body participation such as ethics committee, values and standards. Undertakes routine professional development in ethical conduct, empowerment, advocacy. Lead or participate in case conferences. Development, implementation and application of individual communication systems.</p>	

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 2).

CRITICAL THINKING AND ANALYSIS

Relates to self-appraisal, professional development and the value of evidence and research for practice. Reflecting on practice, feelings and beliefs and the consequences of these for individuals/groups is an important professional benchmark.

3. Practices within an evidence-based framework

3.1	<p>Identifies the relevance of research to improving individual/group health outcomes: Identifies problems/issues in nursing practice which may be investigated through research. Considers potential for improvement in reviewing the outcomes of nursing activities and individual/group care. Discusses implications of research with colleagues. Participates in research. Demonstrates awareness of current research in own field of practice.</p>
3.2	<p>Uses best available evidence, nursing expertise and respect for the values and beliefs of individuals/groups in the provision of nursing care: Uses relevant literature and research findings to improve current practice. Participates in review of policies, procedures and guidelines based on relevant research. Identifies and disseminates relevant changes in practice or new information to colleagues. Recognises that judgments and decisions are aspects of nursing care. Recognises that nursing expertise varies with education, experience and context of practice.</p>
3.3	<p>Demonstrates analytical skills in accessing and evaluating health information and research evidence: Demonstrates understanding of the registered nurse role in contributing to nursing research. Undertakes critical analysis of research findings in considering their application to practice. Maintains accurate documentation of information which could be used in nursing research. Clarifies when resources are not understood or their application is questionable.</p>
3.4	<p>Supports and contributes to nursing and health care research: Participates in research. Identifies problems suitable for research.</p>

3.5	<p>Participates in quality improvement activities:</p> <p>Recognises that quality improvement involves ongoing consideration, use and review of practice in relation to practice outcomes, standards and guidelines and new developments.</p> <p>Seeks feedback from a wide range of sources to improve the quality of nursing care.</p> <p>Participates in case review activities.</p> <p>Participates in clinical audits.</p>
<p>Examples of current evidence to consider:</p> <p>CPD evidence.</p> <p>Report relating to research undertaken.</p> <p>Awards of recognition relation to best practice.</p> <p>Guest speaking, research and conference papers.</p> <p>Assessment tasks/assignments from University or vocational qualifications where research was required.</p> <p>Participation in staff meetings and staff development involving changes to professional standards and benchmarks.</p> <p>Participation in workplace reflection opportunities eg. behaviour/communication analysis, OHS, supervision sessions.</p> <p>Accessing mentoring and feedback from supervisor and industry specialists.</p> <p>Online discussion forums.</p> <p>Internal/external training on values and beliefs.</p> <p>Involvement with professional groups and committees.</p>	

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 3).

4. Participates in ongoing professional development of self and others

4.1	<p>Uses best available evidence, standards and guidelines to evaluate nursing performance:</p> <p>Undertakes regular self-evaluation of own nursing practice.</p> <p>Seeks and considers feedback from colleagues about, and critically reflects on, own nursing practice.</p> <p>Participates actively in performance review processes.</p>
4.2	<p>Participates in professional development to enhance nursing practice:</p> <p>Reflects on own practice to identify professional development needs.</p> <p>Seeks additional knowledge and/or information when presented with unfamiliar situations.</p> <p>Seeks support from colleagues in identifying learning needs.</p> <p>Participates actively in ongoing professional development.</p> <p>Maintains records of involvement in professional development which includes both formal and informal activities.</p>
4.3	<p>Contributes to the professional development of others:</p> <p>Demonstrates and increasing responsibility to share knowledge with colleagues.</p> <p>Supports health care students to meet their learning objectives in cooperation with other members of the health care team.</p> <p>Facilitates mutual sharing of knowledge and experience with colleagues relating to individual/group/unit problems.</p> <p>Contributes to orientation and going education programs.</p> <p>Acts as a role model to other members of the health care team.</p> <p>Participates where possible in preceptorship, coaching and mentoring to assist and develop colleagues.</p> <p>Participates where appropriate in teaching others including students of nursing and other health disciplines, and inexperienced nurses.</p> <p>Contributes to formal and informal professional development.</p>
4.4	<p>Uses appropriate strategies to manage own responses to the professional work environment:</p> <p>Identifies and uses support networks.</p> <p>Shares experiences related to professional issues mutually with colleagues.</p> <p>Uses reflective practice to identify personal needs and seek appropriate support.</p>

Examples of current evidence to consider:

references on your CV.
 References from peers or students.
 supervision/appraisal evidence.
 Team meeting minutes.
 Case conferences/client reviews.
 Involvement with professional groups/networks eg PANDDA.
 Maintaining required Professional Development.

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 4).

PROVISION AND COORDINATION OF CARE

Relates to the coordination, organisation and provision of nursing care that includes the assessment of individuals/groups, planning, implementation and evaluation of care.

5. Conducts a comprehensive and systematic nursing assessment

5.1	<p>Uses a relevant evidence-based assessment framework to collect data about the physical socio-cultural and mental health of the individual/group:</p> <p>Approaches and organises assessment in a structured way. Uses all available evidence sources, including individuals/groups/significant other, health care team, records, reports, and own knowledge and experience. Collects data that relates to physiological, psychological, spiritual, socio-economic and cultural variables on an ongoing basis. Understand the role of research-based, and other forms of evidence. Confirms data with the individual/group and members of the health care team. Uses appropriate assessment tools and strategies to assist the collection of data. Frames questions in ways that indicate the use of a theoretical framework/structured approach. Ensures practice is sensitive and supportive to cultural issues.</p>
5.2	<p>Uses a range of assessment techniques to collect relevant and accurate data:</p> <p>Uses a range of data gathering techniques, including observation, interview, physical examination and measurement in obtaining a nursing history and assessment. Collaboratively identifies actual and potential health problems through accurate interpretation of data. Accurately uses health care technologies in accordance with manufacturer's specification and organisational policy. Identifies deviations from normal, or improvements in the individual's/group's health status. Identifies and incorporates the needs and preferences of individuals/group into a plan of care.</p>
5.3	<p>Analyses and interprets assessment data accurately:</p> <p>Recognises that clinical judgments involve consideration of conflicting information and evidence. Identifies types and sources of supplementary information for nursing assessment. Describes the role of supplementary information in nursing assessment. Demonstrates knowledge of qualitative and quantitative data assess individual/group needs.</p>
<p>Examples of current evidence to consider:</p> <p>Using workplace assessment tools eg BIS, CHAP, IP, Client profiles. Supervision records. Team meetings, case conferences, case reviews. List of regularly accessed resources eg MIMs, MyDr, JURD, Library. OHS audits, inspection of equipment, hazards, incidents.</p>	

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 5).

6. Plans nursing care in consultation with individual/groups, significant others and the interdisciplinary health care team

6.1	<p>Determines agreed priorities for resolving health needs of individuals/groups: Incorporates relevant assessment data in developing a plan for care. Determines priorities for care, based on nursing assessment of an individual's/groups needs for intervention, current nursing knowledge and research. Considers individual/group preferences when determining priorities for creatively in performance review processes.</p>
6.2	<p>Identifies expected and agreed individual/group health outcomes including a time frame for achievement: Establishes realistic short –and long-term gals that identify individual/group health outcomes and specify condition for achievement. Identifies goals that are measurable, achievable, and congruent with values and beliefs of the individual/group and or significant others. Uses resources to support the achievement of outcomes. Identifies criteria for evaluation of expected outcomes.</p>
6.3	<p>Document a plan of care to achieve expected outcomes: Ensures that plans of care are based on an ongoing analysis of assessment data. Plans care that is consistent with current nursing knowledge and research. Documents plans of care clearly.</p>
6.4	<p>Plans for continuity of care to achieve expected outcomes: Collaboratively supports the therapeutic interventions of other health teams members. Information necessary for continuity of the plan of care is maintained and documented. Responds to individual/group or carer's educational needs. Provides or facilitates an individual/group or carer's resources and aids as required. Identifies and recommends appropriate agency, government and community resources to ensure continuity of care. Initiates necessary contacts and referrals to external agencies. Forwards all information needed for continuity of care when an individual/group is transferred to another facility or discharged.</p>
<p>Examples of current evidence to consider: Training records in client support, Person Centered Thinking, values, rights. Supervision, client routines, shift reports. IP coordination. Networking/contact with client support network eg. day program, therapy, OPG, family.</p>	

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 6).

7. Provides comprehensive, safe and effective evidence-based nursing care to achieve identified individual/group health outcomes

7.1	<p>Effectively manages the nursing care of individuals/groups: Uses resources effectively and efficiently in providing care. Performs actions in a manner consistent with relevant nursing principles. Performs procedures confidently and safely. Monitors responses of individuals/groups throughout each intervention and adjusts care accordingly. Provides education and support to assist development and maintenance of independent living skills.</p>
7.2	<p>Provides nursing care according to the documented care of treatment plan: Acts consistently with the predetermined plan of care. Uses a range of appropriate strategies to facilitate the individual/group's achievement of short and long term expected goals.</p>
7.3	<p>Prioritises workload based on the individual's group's needs, acuity and optimal time for intervention: Determines priorities for care, based on nursing assessment of an individual/group's needs for intervention, current nursing knowledge and research. Considers the individual/group's preferences when determining priorities for care.</p>

7.4	Responds effectively to unexpected or rapidly changing situations: Responds effectively to emergencies. Maintains self-control in the clinical setting and under stress conditions. Implements crisis intervention and emergency routines as necessary. Maintains current knowledge of emergency plans and procedures to maximise effectiveness in crisis situations. Participates in emergency management practices and drills according to agency policy.
7.5	Delegates aspects of care to others according to their competence and scope of practice: Delegates aspects of care according to role functions, capabilities and learning needs. Monitors aspects of care delegated to others and provides clarification/assistance as required. Recognises own accountabilities and responsibilities when delegating aspects of care to other. Delegates to and supervises others consistent with legislation and organisational policy.
7.6	Provides effective and timely direction and supervision to ensure that delegated care is provided safely and accurately: Supervises and evaluates nursing care provided by others. Uses a range of direct and indirect techniques such as instructing, coaching, mentoring and collaborating in the supervision and support of others. Provides support with documentation to nurses being supervised or to whom care has been delegated. Delegates activities consistent with scope of practice/competence.
7.7	Educates individuals/groups to promote independence and control over their health: Identifies and documents specific educational requirements and requests of individual/groups. Undertakes formal and informal education sessions with individuals/groups as necessary. Identifies appropriate educational resources, including other health professionals.
7.8	Uses health care resources effectively and efficiently to promote optimal nursing and health care: Recognises when nursing resources are insufficient to meet and individual's group's needs. Demonstrates flexibility in providing care where resources are limited. Recognises the responsibility to report to relevant persons when level of resources risks compromising the quality of care.
Examples of current evidence to consider: Roster coordination. Professional development. Health plans, team meetings, care plans. IP. Policy and procedures supervision, team participation in safety drills. Peer references. List of regularly accessed resources.	

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 7).

8. Evaluates progress towards expected individual/group health outcomes in consultation with individuals/groups, significant others and interdisciplinary health care team

8.1	Determines progress of individuals/groups toward planned outcomes: Recognises when individual's/groups progress and expected progress differ and modifies plans and actions accordingly. Discusses progress with the individual/group. Evaluates individual/group responses to interventions. Assess the effectiveness of the plan of care in achieving planned outcomes.
8.2	Revises the plan of care and determines further outcomes in accordance with evaluation data: Revises expected outcomes, nursing interventions and priorities and any change in an individual's/group's condition, needs or situational variations. Communicates new information and revisions to members of the health care team as required.

Examples of current evidence to consider:

Participation in clients reviews, case conferences, IP audits.
 Attendance at interdisciplinary healthcare planning.
 Preparing, providing information and feedback to health care providers.
 Implementing instructions and recommendations from health professionals.
 Researching and following clients requests for support and information.
 Report writing.

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 8).

COLLABORATIVE AND THERAPEUTIC PRACTICE

Relates to establishing, sustaining and concluding professional relationships with individuals/groups. This also contains those competencies that relate to the nurse understanding their contribution to the interdisciplinary health care team.

9. Establishes, maintains and appropriately concludes therapeutic relationships

9.1	<p>Establishes therapeutic relationships that are goal directed and recognises professional boundaries: Demonstrates empathy, trust and respect for the dignity and potential of the individual/group. Interacts with individuals/groups in a supportive manner. Effectively initiates, maintains and concludes interpersonal interactions. Establishes rapport within individuals/groups that enhances their ability to express feelings, and fosters an appropriate context for expression of feeling. Understands the potential benefits of partnership approaches on nurse individual/group relationships. Demonstrates an understanding of standards and practices of professional boundaries and therapeutic relationships.</p>
9.2	<p>Communicates effectively with individuals/groups to facilitate provision of care: Uses a range of effective communication techniques. Uses language appropriate to the context. Uses written and spoken communication skills appropriate to the needs of individuals/groups. Uses an interpreter where appropriate. Provides adequate time for discussion. Establishes, where possible, alternative communication methods for individuals/groups who are unable to verbalise. Uses open/closed questions appropriately.</p>
9.3	<p>Uses appropriate strategies to promote an individual's group's self-esteem, dignity, integrity and comfort: Identifies and uses strategies which encourage independence. Identifies and uses strategies which affirm individuality. Uses strategies which involve the family/significant others in care. Identifies and recommends appropriate support networks to individuals/groups. Identifies situations which may threaten the dignity/integrity of an individual/group. Implements measures to maintain dignity of individual/groups during periods of self-care deficit. Implements measures to support individuals/groups experiencing emotional distress. Information is provided to individuals/groups to enhance their control over their own health care.</p>
9.4	<p>Assists and supports individual/group to make informed health care decisions: Facilitates and encourages individual/group decision-making. Maintains and supports respect for an individual/group's decision through communication with other members of the interdisciplinary health care team. Arranges consultation to support individuals/groups to make informed decisions regarding health care.</p>

9.5	<p>Facilitates a physical, psychosocial, cultural and spiritual environment that promotes individual/group safety and security:</p> <p>Demonstrates sensitivity, awareness and respect for cultural identity as part of an individual's/groups perceptions of security.</p> <p>Demonstrates sensitivity, awareness and respect in regard to an individual's/groups spiritual needs.</p> <p>Involves family and others in ensuring that cultural and spiritual needs and met.</p> <p>Identifies, eliminates or prevents environmental hazards where possible.</p> <p>Applies relevant principles to ensure the safe administration of therapeutic substances.</p> <p>Maintains standards for infection control.</p> <p>Applies ergonomic principles to prevent injury to individual/group and self.</p> <p>Prioritises safety problems.</p> <p>Adheres to occupational health and safety legislation.</p> <p>Modifies environmental factors to meet and individuals'/group's comfort needs where possible.</p> <p>Promotes individual/group comfort through-out interventions.</p> <p>Uses ergonomic principles and appropriate aids to promote the individual/group's comfort.</p>
<p>Examples of current evidence to consider:</p> <p>Examples of records or information to gain sensitivity, awareness, and respect of client group preferences/support.</p> <p>Samples of where you have built professional relationships with other staff/agencies.</p> <p>Orientation/induction to workplace staff.</p> <p>List of regularly accessed networks.</p> <p>Samples of where you have provided information to clients and staff so they can make informed decisions.</p> <p>Identify opportunities to develop new networks eg. Groups. Conferences, expos.</p> <p>Qualifications/training in communication.</p> <p>Identify forms of communication samples eg. email, letters, shift notes.</p>	

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 9).

10. Collaborates with the interdisciplinary health care team to provide comprehensive nursing care

10.1	<p>Recognises that the membership and roles of health care teams and service provides with vary depending on an individual's group's needs and health care setting:</p> <p>Recognises the impact and role of population, primary health and partnership health care models.</p> <p>Recognises when to negotiate with, or refer to other health care or service providers.</p> <p>Establishes positive and productive working relationship with colleagues.</p> <p>Recognises and understands the separate and interdependent roles and functions of health care team members.</p>
10.2	<p>Communicates nursing assessments and decisions to the interdisciplinary health care team and other relevant service providers:</p> <p>Explains the nursing role to the interdisciplinary team and service providers.</p> <p>Maintains confidentiality in discussions about an individual/group's needs and progress.</p> <p>Discusses individual/group care requirements with relevant members of the health care team.</p> <p>Collaborates with members of the health care team in decision making about care of individuals/groups.</p> <p>Demonstrates skills in written, verbal and electronic communication.</p> <p>Documents, as soon as possible, forms of communication, nursing interventions and individual/group responses.</p>
10.3	<p>Facilitates coordination of care to achieve agreed health outcomes:</p> <p>Adopts and implement a collaborative approach to practice.</p> <p>Participates in health care team activities.</p> <p>Demonstrates the necessary communication skills to manage avoidance, confusion and confrontation.</p> <p>Demonstrates an understanding of how collaboration has an impact on the safe and effective provision of comprehensive care.</p> <p>Establishes and maintains effective and collaborative working relationships with other members of the health care team.</p> <p>Consults with relevant health care professionals and service providers to facilitate continuity of care.</p> <p>Recognises the contribution of, and liaises with, relevant community and support services.</p> <p>Records information systematically in an accessible and retrievable form.</p> <p>Ensures that written communication is comprehensive, logical, clear and concise, spelling is accurate and only acceptable abbreviations are used.</p> <p>Establishes and maintains documentation according to organisation guidelines and procedures.</p>

10.4	<p>Collaborates with health care team to inform policy and guideline development:</p> <p>Regularly consults policies and guidelines. Demonstrates awareness of changes to policies and guideline. Attends meetings and participates in practice reviews and audits. Demonstrates understanding of the implications of national health strategies for nursing and health care practice.</p>
<p>Examples of current evidence to consider:</p> <p>Position description. Team meeting minutes. Samples of shift reports, IP's, audits of care plans. Policy and Procedure training.</p>	

I fulfill the above competency by:

Attach any documents/evidence that provide evidence of above (Attachment 10).

Component 2. Annual Professional Review

This is your annual performance review.

NOTE Attach copy of annual professional review.

Component 3. Annual Self-Declaration of Competence

Write in your own words how you meet the competencies to practise as a registered nurse.

I declare that I meet all the competencies required to practice as a Registered Nurse

Signature:

Date:

3. Continuing Professional Development (CPD)

As stated in the ANMC, Continuing Competence Framework (2009), 20 hours of continual professional development must be attended each year.

(1 hour of active learning equals one CPD point)

For nurses who hold multiple registrations, learning must occur in each area the nurse wishes to hold registration. Eg General nurse 20 hours of CPD + Psychiatric Nurse 20 hours of CPD = 40 hours/year.

Documentation must be provided of any CPD activities, and should include active learning of new skills or knowledge. Participation in mandatory in-service education such as Basic Life Support training or manual handling should not be counted as CPD unless new learning has taken place.

CPD activities can occur in a variety of ways and settings. For example:

Self Directed Learning

- Personal identified gap in knowledge which nurse investigates and learns information

Formal CPD Programs

- Professional organisation
- Learning endorsed by professional organisation, eg. conference, seminar

For every session of CPD education attended the nurse must complete the following.

Title:	
Hour/s of Training:	
Why did you choose to attend this training? What is your identified learning need?	
On reflection, what value or impact on practice did you achieve by attending this training?	
Total number of hours this year:	

References

Australian Nursing and Midwifery Council (2009) Continuing competence Framework, Retrieved 10 January 2011 from: www.nevicdgp.org.au/icms_docs/73727_Continuing_Competence_Framework.pdf

Australian Nursing and Midwifery Council, 4th Edition (Jan 2006). National Competency Standards For the Registered Nurse. Retrieved 10 January 2011 from: www.anmc.org.au/userfiles/file/competency_standards/Competency_standards_RN.pdf

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