Assessor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Portfolio Assessment START Time ………… FINISH Time…………

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| **EVIDENCE REQUIRED**  Please put the evidence in your portfolio in the order below. This assessment tool should be at the very front. All documents must be copies of the originals.  **ONLY THE DOCUMENTS LISTED GO INTO YOUR PORTFOLIO FOLDER** | | **✓**  **MET** | | **COMMENTS** |
| **Yes** | **No** |
| 1. | **Application Letter** – Signed |  |  |  |
| 2. | **Role Description** – One Page ONLY |  |  |  |
| 3. | **Copy of APC** – FRONT & BACK (Printout from NCNZ Website) |  |  |  |
| 4. | **Full Self and Peer Assessment** – LESS than 12 months old and signed off by both the Nurse and the Peer Assessor. **MUST INCLUDE** **Comment of Endorsement** either by the Charge Nurse or Nurse Manager and be **Signed** |  |  |  |
| 5. | **Education Session –** Include the **Reference List**. A copy of the **presentation** and a MAXIMUM of **4 education sessions evaluations forms** |  |  |  |
| 6. | **Evidence of Practice Hours** – 450 Hours or More in last 3 Years |  |  |  |
| 6a | **Verified Practice Hours** – Signed by Charge Nurse or Nurse Manager |  |  |  |
| 7. | **Professional Development & Career Plan (PDCP)** – LESS than 12 months old |  |  | Date Completed: |
| 7a | **PDCP** Signed by both the Nurse and the Charge Nurse or Nurse Manager |  |  |  |
| 8. | **Nursing Performance Appraisal** **(NPA)** – Confirms Scope & Level of Practice |  |  | Date Completed: |
| 8a | **NPA** Signed by the Charge Nurse or Nurse Manager |  |  |  |
| 9. | **Professional Development Record** – 60 Hours or more in last 3 Years |  |  |  |
| 9a | Verified **Professional Development Record** - Signed |  |  |  |
| 10. | **3 Reflections** – Most RECENT Education Sessions |  |  |  |
| 11. | **CORE Competency** – Current or Plan for Completion attached |  |  |  |
| 11a | **CORE Competency** Verified by Charge Nurse or Nurse Manager/Educator |  |  |  |
| 12. | **Curriculum Vitae (CV)** |  |  |  |

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| **Evidence Required** | **✓**  **Met** | | **Comments** |
| **Yes** | **No** |
| 1.1 Identifies one professional, one ethical and one legislated requirement, describes how practice meets each of them and provides evidence of assisting a colleague to meet a requirement. |  |  |  |
| 1.2 Identifies the 4 principles of the Treaty of Waitangi and describes their application to practice *in caring for the Māori health consumer and whānau*; includes reference/s. |  |  |  |
| 1.3 Describes differences in accountability and responsibility for the RN, EN and unregulated workers; and how this impacts on the process of direction or delegation, includes reference/s. |  |  |  |
| 1.4 Resolves a problem or issue to promote a safe environment for patient safety, independence of quality of life including minimisation of risk. |  |  |  |
| 1.5 Describes how practices in a culturally manner as determined by the patient, advocacy and subsequent learning. |  |  |  |
| 2.1 Identifies an expected outcome, describes plan of care; uses evidence and considers influencing factors; includes reference/s. |  |  |  |
| 2.2 Describes a comprehensive assessment using direct health consumer assessment and physiological or other clinical parameters. Demonstrates advanced clinical judgement. |  |  |  |
| 2.3 Describes how and why documentation is accurate and assists colleagues with maintaining confidentiality of information *and identifies organisation guidelines or legislation to support discussion* |  |  |  |
| 2.4 Proactively resolved a problem to enable a health consumer to have explanation of the effects, consequences and alternatives of a proposed treatment. |  |  |  |
| 2.5 Describes actions and management of an unexpected situation. and reflects on what has been learnt from the event |  |  |  |
| 2.6 Describes evaluation of care and how achieves this in partnership with health consumers and how practice changed after an evaluation. |  |  |  |
| 2.7 Describes education given to a health consumer within a nursing framework, evaluation of appropriateness and subsequent learning. |  |  |  |
| 2.8 Reflects on care with peers and experienced nurses and discusses what has been learnt about own practice. |  |  |  |
| 2.9 See section 8 below |  |  |  |
| 3.1 Establishes, maintains and concludes therapeutic interpersonal relationships and describes challenges to maintaining professional boundaries. |  |  |  |
| 3.2 Describes how negotiated a partnership to support health consumer’s independence which overcame challenges to nurse’s own resourcefulness. |  |  |  |
| 3.3 Overcame challenges to communicate effectively with health consumers and members of the HCT. |  |  |  |
| 4.1 Collaborates with students, beginning practitioners or new staff members to facilitate care. |  |  |  |
| 4.2 Values non-nursing member of the HCT and describes effect on the team when all members are valued. |  |  |  |
| 4.3 Participates in quality initiatives and describes impact on practice or service delivery. |  |  |  |
| **Portfolio meets NCNZ Competency requirements for Proficient RN:** | **YES** | **NO** |  |
| **Reason if not yet met:** | | | |
| **Additional comments:**  **Name of Portfolio Assessor: Signature: Date: Level of Assessor’s PDRP:**  **NCNZ Registration:** | | | |