

# **Nurse Entry to Practice (NETP) Expansion Programme – Primary Health Care**



## **Graduate Nurse Handbook**

**2010**

Authorised by: BOPDHB DoN	Issue date: 2009
BOPDHB NETP Expansion Programme	Review date: 30/11/2010
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## **Acknowledgements**

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Midcentral Primary Health Care Development Team

Future Workforce (2008) Nurse Entry to Practice (NETP) Expansion Programme Learning Framework

This document has been revised in collaboration with the NETP Expansion Programme's Advisory Committee, to reflect the primary health care context within the Bay of Plenty District Health Board district

## **Programme Overview**

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The aim of the Nurse Entry to Practice (NETP) Expansion Programme is to achieve the vision:

'New Zealand nursing graduates enthusiastically commencing their careers in New Zealand: well-supported, safe, skilled and confident in their clinical practice; equipped for further learning and professional development; meeting the needs of health and disability support service users and employers; and building a sustainable base for the New Zealand registered nursing workforce into the future' (NETP, 2005).

The NETP Expansion Programme will assist Graduate Nurses in developing their confidence in nursing practice, independence in clinical reasoning and decision making, and acceptance of the responsibility of the registered nurse role. To achieve this, newly registered nurses will have access to a supported teaching and learning environment, effective orientation and preceptorship.

This programme gives the Graduate Nurse a time of transition where knowledge and clinical skills can be consolidated while integrating the principles of the Treaty of Waitangi into practice, supporting promotion of equity of outcomes for Maori.

During the graduate programme, nursing and decision-making skills, priority setting and time management can be developed. The programme will also facilitate practice in a culturally safe manner with all client groups.

The first year as a newly graduated nurse is an intensive learning time. Confidence and competence will be nurtured within the practice setting, and the application of knowledge and skills will aid development as a Registered Nurse. This enables the graduate to practice safely, effectively and confidently, progressing from a new registered nurse to a competent registered nurse within 12 months of undertaking the programme.

This involves the Graduate Nurse:

- becoming familiar with the primary health care context, which has an emphasis on health promotion and long term disease management processes
- working within a new team and becoming an effective team member
- developing workload planning & priority setting
- integrating theory into practice
- demonstrating technically competent practice
- accepting responsibility and accountability for actions
- identifying further skills and educational needs
- demonstrating the ability to practice in a culturally safe manner

## **First Year Programme Objectives**

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The goals of the Bay of Plenty District Health Board (BOPDHB) NETP Expansion Programme - Primary Care are to:

- assist newly Graduated Nurses to develop the knowledge, skills and experience to enable them to work at optimum levels for the benefit of the patient/client
- provide a supportive environment in primary care for transition from student nurse to registered nurse as they consolidate their nursing knowledge and practice
- provide clinical learning opportunities through one or two clinical practice rotations using clinical preceptorship as a recognised key role in achieving a smooth transition
- integrate the clinical and academic learning components of the programme in order to focus on the development of clinical practice knowledge
- promote the practice of nursing in a manner consistent with the Primary Health Care Nursing and BOPDHB Vision and Values, Nursing Council of New Zealand Competencies and the principles of the Treaty of Waitangi
- support the graduates to achieve the Competent level on the BOPDHB Professional Development and Recognition Programme (PDRP)
- assist with the recruitment and retention strategy for the Bay of Plenty district

## **Education Principles**

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Principles of adult learning and experiential learning form the basis of the educational strategies of the NETP Expansion Programme. It builds on the knowledge and skills gained through the nurses' undergraduate programme, with the aim to consolidate, apply and extend this knowledge.

The clinical and academic components of the programme are integrated to focus on the development of practice based knowledge. Clinically based learning is central to the programme to provide experiential learning and develop the skills of problem solving, critical thinking and reflective practice.

Clinical learning is structured and supported by preceptors (Registered Nurses who have undertaken BOPDHB or other recognised preceptor training programme) to promote safety for clients and graduates. Other supports available within the clinical settings are the Nurse Coordinator – NETP Primary Care, Clinical Nurse Team Leaders (CNTL) as well as the Primary Health Care Nurse Specialists.

Academic work provides the newly graduated nurse with the ability to link theory to their practice, with the aim to build on, and extend their nursing knowledge and skills. The assessment points of the academic component encourage the Graduate Nurse to take advantage of these learnt skills and opportunities and apply these to their practice settings.

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The programme recognises that newly graduated nurses are adult learners and have completed an undergraduate degree. They bring a wealth of knowledge with them as they begin their nursing career. The programme aims to reflect the principles of adult learning and encourages an environment of self directed learning. The teaching, learning and assessment processes include:

- Practice based learning
- Case based teaching
- Problem based learning
- Practice based assessments
- Self and peer assessments
- Self directed learning
- Classroom and practical sessions
- Written assignments

## **Expected Graduate Nurse Outcomes**

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On completion of this programme the Graduate Nurse will:

- be able to practice confidently and safely within the Registered Nurse Scope of Practice
- be an effective team member within the primary health care practice environment
- demonstrate development and application of knowledge and skills in their nursing care and primary care responsibilities at the 'competent' registered nurse level on the Professional Development and Recognition Programme (PDRP) as defined by Nursing Council of New Zealand (NCNZ)
- be aware of their limitations and seek assistance accordingly
- accept responsibilities and accountabilities for action
- demonstrate self directed learning skills and a commitment to ongoing professional development
- uphold the values of the profession in achieving quality nursing care, prompting client advocacy and cultural safety, Tikanga Best Practice, demonstrating the required level of technical competency, developing communication and problem solving strategies within the workplace
- be able to effectively assess, plan, implement, evaluate and document nursing care, while ensuring it conforms with current legal and ethical standards

## **Graduate Nurse Responsibilities**

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- Completes 10 to 12 months of clinical practice, which may comprise of one ten to twelve month placement or two five to six month clinical rotations
- Attend a minimum of 12 Graduate Nurse study days, which is inclusive of orientation study days
- Notify sick leave and annual leave to Nurse Coordinator - NETP/E Programmes and CNTL. Unexplained absence from study days will be referred back to the CNTL
- Identifies with preceptors, CNTL and/or Nurse Coordinator own areas of required learning and participates in learning opportunities
- Works and liaise with their designated preceptor
- Completes required Orientation Workbook within 6 weeks of commencement
- Completes written self assessments at 3-4 months & 9-10 months and undertakes performance appraisal at these times (see page 14)
- Submits one case study and one reflective writing that focuses on nursing practice within primary health care
- Completes 16 hours of development (see pg 11 for guidelines)
- Completes a portfolio for progression to 'competent' level on the Bay of Plenty District Health Boards' (BOPDHB) PDRP as per certificate criteria
- Provides evaluation and feedback to the Coordinator of the programme regarding the NETP Expansion Programme process to allow quality improvements to be made

## **Preceptor Responsibilities**

- Provides introduction to work area and their colleagues, including policies, protocols and standards
- Assists with setting of objectives/goals and facilitates meeting these
- Helps the graduate identify learning opportunities and experiences
- Identifies with CNTL and/or Nurse Coordinator own areas of required learning and participates in learning opportunities
- Collaborates with the Graduate Nurse to utilise and complete the Orientation Workbook requirements within 6 weeks of commencement
- Provides timely & constructive informal feedback - written assessment and feedback is provided at 3-4 months and 9-10 months (see page 14)
- Following the initial four – six weeks of orientation, the preceptors and graduates are to be released together from clinical practice for the equivalent of two 'development days' (16 hours) over the 10 to 12 month period of the programme

## **Clinical Nurse Team Leader (CNTL) Responsibilities**

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- Works with the Nurse Coordinator - NETP/E Programmes to identify and assign preceptors for the Graduate Nurses
- Ensures each graduate has been assigned with a named preceptor
- Rosters preceptor and Graduate Nurse on same shifts and sharing the same load for the first six weeks if graduate is undertaking one placement OR first four weeks (first rotation) and first two weeks (second rotation) if undertaking two rotations – the Graduate Nurse is supernumerary
- Provides an environment for learning and development
- Provides opportunity for the graduates and preceptors to meet for total of 16 hours (paid time) away from the work area to discuss development
- Ensures roster enables Graduate Nurses to attend study days/workshops (paid time)
- Provides support for Graduate Nurse and preceptor
- Provides ongoing feedback to Graduate Nurse on progress made
- Formally hands over Graduate Nurse to the CNTL at their next rotation (as applicable)
- Ensures that the preceptor has an opportunity to participate in 16 hours of relevant education per year (paid time)
- Provides formal written feedback as per the identified timeframes – see page 14. The final assessment needs to be measured against the four Domains of the NCNZ’s ‘Competencies for Registered Nurse Scope of Practice’. Assessment to be completed as per identified assessment timeframe schedule (pg 14)

## **Nurse Coordinator – NETPE Responsibilities**

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- Ensures that all graduates have a designated named preceptor (who has completed a preceptorship training programme) prior to commencement of placements
- In conjunction with clinical service, ensures that the preceptor and Graduate Nurse are released together for total of 16 hours
- Sets expected outcomes for the 1<sup>st</sup> year of practice with the Graduate Nurse
- Assists with identifying education needs through the nurses feedback
- Seeks regular feedback from the Graduate Nurse and the preceptor on progress & development
- Is available to preceptors for 1 - 1 collegial support, guidance, leadership & assistance
- Ensures completion of Graduate Nurse competent level assessment within 12 months of beginning the programme

## **Channel of Support**

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Should you have any concerns or queries, please action the following channel:

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Approach your:

- Preceptor – unless there are issues relating directly to them or you feel uncomfortable talking to them
- Clinical Nurse Team Leader (CNTL)
- Nurse Coordinator – NETP/E Programme

Maori and Pacific Island Graduate Nurses will have the opportunity to access cultural supervision / support.

### **Nurse Coordinator – NETP/E Programme contact details:**

Nurse Coordinator – NETP/E Programme  
Practice Development, 4<sup>th</sup> Floor, Tauranga Hospital, Private Bag 12024,  
Tauranga 3134  
Email: [wendy.tustin-payne@bopdhb.govt.nz](mailto:wendy.tustin-payne@bopdhb.govt.nz)  
Phone: (07) 579 8134  
Cell Phone: 021 473 582

### **Assessment Philosophy**

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Competency assessment is a part of the teaching / learning process, designed to assist the Graduate Nurse to evaluate their own progress, facilitate feedback, assist with the identification of learning needs and establish the achievement of the required competencies.

It is recognised that the level of performance a Graduate Nurse will differ to that of experienced nurses.

In an effort to provide the Graduate Nurse with a clear indication of the expected level of performance within practice, the following level of performance has been included. This will assist the Clinical Nurse Team Leader facilitate the assessment process and provide guidelines for Preceptors regarding expectations of the Graduate Nurses practice.

The **level of performance** expected of a Graduate Nurse is outlined below:

- Demonstrates synthesis of theory and practice in a variety of settings by independently integrating theoretical knowledge and research to provide safe, evidence-based practice
- **Performance meets standards required in the Performance Appraisal at the minimal level of 'independent' by the completion of NETP programme**
- Supervision may be required in accordance with legislation and local agency policy

A variety of methods will be utilised to support the assessment of NCNZ competencies, including the development of a portfolio, demonstration of clinical competencies, and oral presentations such as feeding back to graduate peers findings from critique of articles at graduate study days.

It is expected that the programme assessment requirements will contribute to the Graduate Nurse's portfolio at Competent Level Registered Nurse and be reflective of the individual primary health care contexts that the nurse is situated in.

Competency based assessments can be formal or informal and include the integration of theory to practice. Assessment is based on NCNZ competencies.

It is anticipated that the Graduate Nurse will progress from dependent to independent levels over the 10 - 12 month programme. New graduates failing to meet the minimum requirements of Independent level, at the end of the NETP programme, will be deemed to be dependent. Behaviours consistent of this include:

- does not meet the expected standards of the Competency Assessment Form (CAF) i.e. performance appraisal

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- does not demonstrate sufficient knowledge and skill to indicate safety at a beginner level
- may attempt a procedure but is unsuccessful or may be unable to begin
- requires direction regarding professional behaviour
- cues are directive and continuous to the extent that it is as if the instructor is performing the behaviour

Should clinical or professional issues arise during the year, or where the graduate is showing signs of not achieving outcomes, then this will be managed in accordance with their organisation's performance management process with the involvement of the Nurse Coordinator - NETP/E Programmes as per 'Remedial Assistance with Non Achievement of Programme Criteria' (pg 15).

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## Levels of Performance Summary

In an effort to provide the Graduate Nurse with a clear indication of the expected level of performance on practicum, the following levels of performance are outlined. **Note:** This is a guide only and is not an exhaustive list of behaviours required at each level.

Dependent	Assisted	Supervised	Independent
<p>The Graduate Nurse:</p> <ul style="list-style-type: none"> <li>is unable to demonstrate the expected standards of the Competency Assessment Form (CAF) i.e. performance appraisal</li> <li>is unable to demonstrate sufficient knowledge and skill to indicate safety at a beginning level</li> <li>may attempt a procedure but is unsuccessful or may be unable to begin</li> <li>requires direction regarding professional behaviour</li> <li>requires directive and continuous cues to the extent that it is as if the instructor is performing the behaviour</li> </ul> <p><b>Supervision and assistance is required</b></p>	<p>The Graduate Nurse:</p> <ul style="list-style-type: none"> <li>is beginning to link to practice including the setting/client needs</li> <li>is skilful in only parts of procedures</li> <li>is beginning to develop time management skills</li> <li>is beginning to cope with urgent or unexpected client needs (with assistance)</li> <li>Is beginning to focus on the client rather than themselves and the task(s) to be completed</li> <li>recognizes the importance of research and its relationship with practice</li> <li>Is beginning to identify individual learning needs</li> <li>Demonstrates acceptable professional behaviour</li> </ul> <p><b>Supervision and assistance is required</b></p>	<p>The Graduate Nurse:</p> <ul style="list-style-type: none"> <li>is able to provide acceptable rationale for actions</li> <li>uses research at a beginning Level</li> <li>utilises more effort than anticipated to complete tasks/care requirements</li> <li>begins to recognise own limitations</li> <li>requires further development re time and resource management skills</li> <li>demonstrates self-directed skills in the development of evidence-based practice</li> <li>is able to draw the focus from the client to the skill, when this becomes more complex</li> <li>is able to cope (with supervision) when faced with urgent, unexpected client needs</li> <li>demonstrates acceptable professional behaviour</li> <li>requires occasional supporting cues with infrequent directive cues</li> </ul> <p><b>Supervision is required</b></p>	<p>The Graduate Nurse:</p> <ul style="list-style-type: none"> <li>demonstrates synthesis of theory and practice in a variety of settings by independently integrating theoretical knowledge and research to provide safe, evidence-based practice</li> <li>provides rationale for actions</li> <li>appears confident</li> <li>works with minimal or no supervision safely</li> <li>recognizes own limitations</li> <li>collaborates appropriately with the multidisciplinary team</li> <li>effectively uses time and equipment</li> <li>demonstrates professional behaviour</li> <li>demonstrates appropriate interaction with clients/staff and others</li> <li>demonstrates practice that focuses on the client</li> <li>requires no cues</li> <li>demonstrates competency</li> </ul> <p><b>Supervision may be required in accordance with legislation and local agency policy</b></p>

Reference: Waiariki. (2009). Nursing Undergraduate Programme. Rotorua: Author.

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## Assessment Requirements

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The criteria set by the BOPDHB in collaboration with the primary health care sector to attain the Graduate Nurse Programme Certificate are:

### Formative:

- Complete 10 to 12 months of practice within primary health care – it is optional whether the graduate undertakes one clinical placement or two clinical rotations
- Attend a minimum of 12 Graduate Nurse study days, which is inclusive of orientation study days. Notify sick leave and annual leave to Nurse Coordinator - NETP/E Programmes and CNTL. Unexplained absence from study days will be referred back to the CNTL
- Complete, the organisation's orientation programme within 6 weeks of commencing
- In partnership with Preceptor and CNTL undertake a 3-4 month evaluation and a 9-10 month evaluation using either the 'Graduate Nurse Placement Assessment Form', or your organisation performance appraisal form. If the organisation's performance appraisal form is used a self assessment and preceptor assessment must be included as evidence for your evaluation. Submit a copy to Nurse Coordinator NETP Primary Care
- Complete a total of 16 hours of development (see pg 14 for details) – submit evidence of hours on 'Graduate Nurse Development' form to your CNTL and the Nurse Coordinator - NETP/E Programmes

### Summative:

- Submit one reflective writing showing advancement in practice through reflection (by due date) as per marking / assessment criteria – this will be a component of your assessment at competent level of practice - submit copy to Nurse Coordinator – NETP/E Programme
- Submit one case study (by due date) as per case study guidelines – this will be a component of your assessment at competent level of practice - submit copy to Nurse Coordinator – NETP/E Programme
- Complete portfolio for advancement to 'Competent' level on the BOPDHB PDRP – submit to PDRP Coordinator, BOPDHB or the Nurse Coordinator – NETP/E Programme (by due date) – this is an ongoing assessment utilising information gained through formative and summative assessments

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## **Outline of Assessment Responsibilities/NETP Requirements**

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<b>Programme Components</b>	<b>Employing Organisation (CNTL) Role</b>	<b>Graduate Role</b>	<b>Preceptor Role</b>	<b>NETP Coordinator Role</b>	<b>Time Frame</b>
Orientation	provide and support	complete	assess	support and moderate	6 weeks
Setting specific competencies	provide	complete	assess	support	ongoing
Individualised learning plan	complete	complete	support	support	ongoing
Performance appraisal	complete	complete	support	support	assessment @ 3 – 4 months & 9 - 10 months
Reflective writing/case study	support	complete	support	provide and support and moderate	due dates
Professional development hours – 16 hrs	support	complete	complete	support	within 10-12month programme duration
Preceptor/ Graduate assessment	support	complete	complete	support	assessment @ 3 - 4 months & 9 – 10 months
Portfolio - PDRP	support	complete	support	support and moderate	due date

## **Development Hours Guidelines**

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16 hours of development allows for one-on-one time with the Graduate Nurse and preceptor, nurse educator or nurse specialist for:

- Development of goals
- Assessment of progress – i.e. discussion and work with workbooks
- Placement / rotational final assessment
- Peer support / cultural support
- Critical reflection
- Education

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## **Achievement of Programme Criteria**

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A Certificate of completion will be issued at the end of the program providing the Graduate Nurse meets the following criteria:

- Undertakes 12 study days within 10 to 12 month programme timeframe (this is inclusive of orientation study days)
- Completes 16 hours of development with preceptor, nurse educator or clinical nurse specialist and document learning
- Completes and achieves the academic requirements of the programme i.e. reflective writing and case study
- Completes 10 to 12 months of practice, whereby there is a satisfactory standard of performance in clinical nursing documented by clinical appraisals during single placement or two rotations
- Achieves Competent Level of practice on the BOPDHB PDRP

## **Remedial Assistance for Non Achievement of Programme Criteria**

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It is the BOPDHB and primary health care's intention to make available to the Graduate Nurses support and resources to ensure that they have the ability to achieve the criteria of the programme.

Should clinical or professional issues arise during the year, or where the graduate is showing signs of not achieving outcomes, then this will be managed in accordance with their organisation's performance management process with the involvement of the Nurse Coordinator - NETP/E Programmes

Processes:

- CNTL to arrange a meeting with the Graduate Nurse to discuss issues or concerns
- If further action is required, then the Nurse Coordinator – NETP/E Programmes may be brought in to assist with performance development
- Should the issues continue, then a formal professional development plan will be negotiated and signed off by the CNTL, Graduate Nurse and Nurse Coordinator – NETP/E Programmes
- If issues are ongoing, refer to the Employer's Performance Development policy for normal organisation procedures

## **Assessment 1 - Reflective Writing Due: 18 June 2010**

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## **Aim**

The aim of this writing is to:

- Develop the graduate's ability to apply theoretical knowledge to real life experiences within primary health care
- Promote in-depth critical thinking within practice, thereby assisting the graduate to question situations and further develop their practice competency
- Encourage the graduate to examine their own attitudes, beliefs, values and goals, so as to enable them to better understand and appreciate other's perspectives
- Identify and explore assumptions that impact on assessment and decision making processes in order to develop quality nursing care
- Demonstrate the Graduate Nurse's competency development as a registered nurse

There is no word limit for this piece of writing, however, it is expected that the writing shows that confidentiality has been maintained and an advancement in your practice through reflection.

The following will also help and support when completing this piece of work. For further information, it is encouraged that contact with the Nurse Coordinator – NETP/E Programmes, or the PDRP Coordinator is made.

1. Reflective practice provides a structured and analytical tool on which to review practice as a means to recognise professional growth in practice and/ or identify ways to improve practice.
2. The goal of reflective practice is to be able to illustrate critical thinking and skilled nursing practice. Reflective practice needs to focus on reason, analysis and decision making, which take into account both nursing practice and the wider situation.
3. Before reflecting on practice, confidentiality must be adhered to. As a Registered Nurse, you are obliged to adhere to the Health Information Privacy Code (1994). In accordance with this, no information contained within this reflective writing will identify clients / consumers / whanau / 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 (Northern Districts Regional PDRP, 2007).

For further information relating to confidentiality please refer to page 3 in the Northern Districts Regional PDRP Registered Nurse Competencies – Competent Level

- Your writing needs to be reflective of YOUR practice, therefore consider professional implications before disclosing information about practice or that of others' practice that could be regarded as

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inappropriate (*please seek guidance if unsure*) from the PDRP Coordinator, Nurse Coordinator - NETP/E Programmes or a PDRP assessor to provide constructive feedback.

- In order to remove any possible recognition of the situation, identifying the nursing practice in a more general sense is a useful place to start e.g. emotional, social, understanding disease and implications on lifestyle or ethical issue. Using the nursing practice as the central point will help to remove individuals from the situation and protect privacy and confidentiality of all those involved.
4. There are a range of texts and online journal articles to support your writing, which are available through the BOPDHB Library. Reflective models such as Driscoll's (2007) 'The What? Model of Structured Reflection'; John's (2007/08) 'Model of Structured Reflection'; and Gibb's (1994) 'Reflective Cycle' are just some of many models you may wish to access (see Appendix one for further information).
  5. Experience has shown that reflection on a range of practice situations can demonstrate the extent of a nurse's practice. The reflection should include knowledge based on evidence to support clinical decision making. The following suggestions may help to identify what to reflect on:
    - Reflection on working in partnership with clients within the Consumer Code of Rights, principles of the Treaty of Waitangi and culturally safe practice.
    - Reflection on responding to/ managing crisis / unexpected events
    - Reflection on role, workload management, interaction with the health team, client education, medication management
    - Reflection on ethical / professional / cultural and / or social issues
    - Reflection about situations that went well
    - Reflection about situations where there may be new or alternative ways of doing things
  6. Some of these practice situations may overlap with one another and are likely to meet a number of criteria/competencies, rather than just one.
  7. All work must be referenced, as per academic standards, but the system you choose is optional. e.g. APA.

**PLEASE NOTE:** 10% of Reflective Writing will also be read and assessed for moderation purposes by one of the Nurse Educators within BOPDHB.

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## NETP/E Reflective Writing Assessment Criteria

**Graduate:**

**Workplace:**

**Submission date:**

<b>Assessor Evaluation</b>	<b>Assessor comments to support graduates ongoing professional development</b>
<p><i>Writing presented in a structured and professional manner</i></p> <p>Is there evidence of:</p> <ul style="list-style-type: none"> <li>• Structured writing includes introduction, body and conclusion</li> <li>• Correct grammar, structured sentences and paragraphing</li> <li>• Utilisation of reflective framework/model</li> <li>• Referencing eg APA (within text and reference list)</li> </ul>	
<p><i>Demonstrates safe nursing practice</i></p> <p><i>Effective application of nursing knowledge to clinical practice</i></p> <p>Is there evidence of safe nursing practice through demonstration, understanding and application of:</p> <ul style="list-style-type: none"> <li>• Policies / protocols / guidelines</li> <li>• Legislative frameworks</li> <li>• Standards of practice</li> <li>• Ethical frameworks</li> </ul> <p>Evidence of applying theory to practice</p>	
<p><i>Reflection</i></p> <p>Does the graduate consider and demonstrate evidence of reflection on:</p> <ul style="list-style-type: none"> <li>• Ethical, legal and professional issues in nursing practice</li> <li>• Previous assumptions and knowledge prior to reflecting</li> <li>• New knowledge gained through reflection</li> <li>• How application of the reflective process has developed or enhanced their nursing practice</li> </ul>	

**Comments:**

**Assessor:**

**Date:**

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## **Assessment 2 – Case Study Due: 16 August 2010**

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### **Aim**

The aim of this case study is to assess the Graduates Nurse's ability:

- To evaluate and critique the physical and social sciences underlying a patho-physiological condition and treatment as experienced by a client within primary health care
- To assess the meaning of this condition and treatment for the client
- To review and apply current knowledge and literature in evaluating the management of this client

### **Social Knowledge**

- Explore the scientific basis of this client's condition and treatment
- Examine any contributing factors from the client's background and lifestyle that may have led to his/her requiring care and hospitalisation
- Review the rationale for the management of this condition

### **Health Promotion within Primary Health Care**

- Discuss how this client's condition and or their treatment will or has affected their lifestyle and that of their families
- Review the nursing management of this client in the light of current knowledge and practice. Use practice protocols and guidelines to evaluate the care this client received
- Discuss how the principles of the Treaty of Waitangi were applied into the nursing practice
- Discuss how the nursing practice was undertaken in a manner that the client determines as being culturally safe

### **Confidentiality**

As a Registered Nurse, you are obliged to adhere to the Health Information Privacy Code (1994). In accordance with this, no information contained within this case study will identify clients / consumers / whanau / 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 (BOPDHB PDRP, 2007).

For further information relating to confidentiality please refer to page 3 in the Northern Districts Regional PDRP Registered Nurse Competencies – Competent Level

**PLEASE NOTE:** 10% of Case Studies will be cross marked by one of the Nurse Educators within BOPDHB.

***A reminder, the case study must reflect your involvement throughout the client's phase of care***

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## Graduate Nurse Case Study Assessment Criteria

Graduate:	Workplace:	Date:
<b>Assessment Criteria</b>	<b>Assessor comments to support graduates ongoing professional development</b>	
<b>1.1 Demonstrates understanding of the clinical basis of the client's condition and treatment by:</b> <ul style="list-style-type: none"> <li>• Articulating the patient history, current illness and care requirements utilizing an assessment framework</li> <li>• Critically analyzing the treatment and technology requirements</li> <li>• Providing explanations of altered pathophysiology or psychopathology state</li> <li>• Explaining in-depth clinical nursing knowledge</li> </ul>		
<b>1.2 Explores the impact of the condition and treatment on the client and significant others:</b> <ul style="list-style-type: none"> <li>• Explains understanding of individual client and their specific responses.</li> <li>• Identifies the implications of individual lifestyle factors</li> <li>• Articulates understanding and application of the principles of the Treaty of Waitangi</li> <li>• Applies principles of cultural safety in nursing practice.</li> </ul>		
<b>1.3 Evaluates the nursing management of the client demonstrating current nursing knowledge, practice and literature:</b> <ul style="list-style-type: none"> <li>• Utilises procedures and practice guidelines, including policies and protocols that support practice</li> <li>• Recognises and applies evidence based practice surrounding chosen treatments</li> <li>• Evidence of wide range of reading to support knowledge development and case study</li> <li>• Utilises current literature to evaluate nursing practice</li> <li>• Makes recommendations to enhance nursing practice and self development through use of reflective framework/model</li> </ul>		
<b>1.4 Constructs and presents assignment in an academic manner:</b> <ul style="list-style-type: none"> <li>• Structured writing includes introduction, body and conclusion</li> <li>• Correct grammar, structured sentences and paragraphing</li> <li>• Utilisation of reflective framework/model</li> <li>• Use of APA referencing (within text and reference list)</li> </ul>		

**Comments:**

**Assessor:**

**Date:**

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## **Assessment 3 – Competent Level Portfolio Due: 26<sup>th</sup> October 2010**

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### **Undertaken within the Professional Development & Recognition Programme (PDRP)**

The purpose of the PDRP is to provide a competency based assessment process which allows registered nurses to progress through the career pathway. There is an expectation that the nurse will move through from Graduate Nurse Level to Competent Nurse by the end of the first year of practice. The PDRP has a moderation process and all assessors are regularly re-assessed to ensure that they are competent to undertake assessment of portfolios. Should there be a 'non achievement' with the application for advancement, an appeal process is available. Repetitive practice leads to practice wisdom, as the graduate gains as much experience as they can to consolidate theory into practice. (Reference: BOPDHB Professional Development and Recognition Programme Manual, 2007)

**NOTE: This assessment will be completed within 12 months of commencing on the NETP Expansion Programme**

### **Portfolio Guidelines**

The evidence to be included in portfolios incorporates NCNZ requirements for Competency Based Practising Certificates and includes:

- Performance Appraisals undertaken with CNTL – the final 10 month appraisal is compulsory, previous appraisals are optional, but encouraged – performance review documentation needs to include your self-assessment against NCNZ competencies
- Preceptor evaluation / self assessments – optional, but encouraged
- CV – optional, but encouraged
- Record of verified nursing practice (450 hours or 60 days)
- Verified record of professional development, including your learning from the NETP study days (and any additional professional development activities you have attended), including organisational certification (minimum of 60 hours)
- Reflective writing and case study undertaken within NETP Programme
- Completed orientation manual
- Copy of the Competent Level PDRP Workbook

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## Portfolio Assessment Process

- All portfolios should be submitted to the Nurse Coordinator - NETP/E Programmes or PDRP Coordinator to be distributed for assessment
- Assessments of competent level portfolios submitted by Graduate Nurses on the NETP will be completed within 12 months of commencing on the programme
- Each portfolio will be assessed by one assessor. This does not preclude the possibility of choosing to have more than one assessor per portfolio
- All new assessors are to have their first 6 portfolios cross marked (assessed by a second assessor)
- Māori have the option of being assessed by Māori
- A face-to-face discussion may occur as part of the assessment process for all levels. This may be instigated by the applicant or the assessor
- Assessors will be allocated by the PDRP Coordinator or Nurse Coordinator - NETP/E Programmes with the applicant having the right to decline the assessor (maximum of 2 choices)

## Appeal Process

- There are considered to be two appeal processes within the PDRP, one is an appeal on process, the other an appeal on outcome
- The DON or designate will be notified of all appeals
- The applicant may wish to notify the relevant union of the appeal
- Appeals are to be made to the PDRP Coordinator in writing within 14 days, and will be complete within 28 days of receipt of notification
- If there is no resolution the DON is to be involved
- The appeal outcome will be advised to the applicant in writing
- If the PDRP Coordinator has been an assessor then a designate will be appointed by the DON to carry out a review of the portfolio under appeal

## Professional Development

From initial registration onwards there is an expectation that nurses will demonstrate how they continue to learn and maintain their competence.

- You are responsible for seeking opportunities to learn and to maintain the level of your competence in the interests of client care
- Your professional development must be relevant to your practice as a registered nurse
- You should choose activities to meet your needs in the context of your practice, or where you plan to practice. These may be within your work area or with an education institution. This is the basis of effective career planning

The PDRP framework reflects the Nursing Council of New Zealand Requirements for Competence-Based Practising Certificates and the base-line competencies for entry to the register of nurses adapted to suit local needs.

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## Professional Portfolios

A professional portfolio is a record of professional nursing practice and development in the current area and scope of practice.

This is a personal collection of evidence in relation to each of the competencies/criteria within the domains of the PDRP framework.

It is created by a continuing process that involves reflecting on and recording your practice and ongoing education.

The Graduate Nurse is responsible for ensuring that the information recorded in their portfolio is accurate and up to date.

For PDRP assessments, the portfolio also includes the relevant generic competency workbook and any area specific requirements.

It should include anything that demonstrates competency at a particular level.

## Additional Online Information

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Information and documents pertaining to the NETP Programme and NETP Expansion Programme can be accessed externally and are available through:

<http://www.bopdhb.govt.nz/TrainingResearch/gradnurseprogram.aspx>

On-line documents / information available are:

- 2010 Graduate Nurse study day dates and outline (outlines are subject to change)
- Graduate Nurse Development Form (16 hours)
- 3-4 month and 9-10 month Graduate Nurse assessment form
- Reflective writing and Case study assessment criteria
- Professional Development Activities form
- Northern Districts PDRP - Competent Level workbook (2006)
- Submission for PDRP assessment form

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## Orientation Programme

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On entering the programme the Graduate Nurse will engage in 4 orientation study days which may include:

- Marae – 1 day (first day of orientation, last day of programme for those finishing)
  - Welcome
  - Understanding demographics of the Eastern and Western Bay of Plenty region
  - Introduction to NETPE
  - Revisit cultural safety (e.g. case study – identification of cultural considerations)
  - Engagement with patients e.g DNA's
  - PDRP requirements
- Primary Health Care, library orientation, IT Login – ½ day
- Chronic disease management: Cardiac & Respiratory
- Immunisation – 2 days

Graduate Nurse will also undertake:

- 6 weeks clinical load sharing with preceptor whereby they are supernumerary
- Completion of individualised learning plan (reflection and goal setting)
- Completion of individual organisations orientation requirements

## Study Days Programme

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Study days will include the following:

- Cardio vascular
- Diabetes
- Respiratory
- Community services / resources
- Ethical and legal, professional issues
- PDRP
- Motivational interviewing; Care Plus; PHI and cognitive behaviour therapy
- Wound management
- Health in aging
- Mental health
- Communication & leadership
- Palliative care
- Health promotion

Graduates will combine with the secondary care graduate RN's for most study days.

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## Appendix One

### REFLECTIVE PRACTICE



**Introduction to Practice**

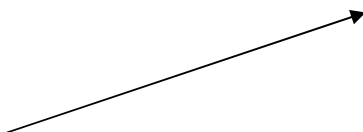
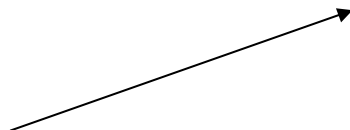
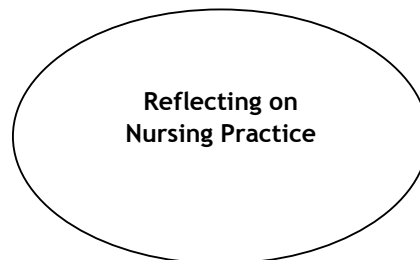
- Identify key features of event /practice concentrate on practice management NOT personal details ie client / colleague / whanau /community
- Give background / relevant details that impacted on practice management eg: support / resources available.
- Relate yourself to identified practice eg new experience, team leader, community, new to area, enrolled nurse



**Exploration of Practice**

- What was your role?
- What actions did you take? - include not just what you did, but also the rationale for your actions
- Did previous experiences have an impact on your actions?
- What were you trying to achieve?
- Identify knowledge used
- What were the challenges? - identify how / why you worked through these
- Were there broader issues? eg professional, cultural, social, ethical - if so identify how / why you worked through these

### WRITING MODEL



**Reflection**

- How has the decisions you made in managing this practice impacted on you, your practice, others? eg colleagues, client, whanau etc?
- Has your management of this practice had a wider impact? eg identified a quality improvement initiative?
- Did you learn anything - if so what?
- Have you considered another way to manage this practice?
- Has your practice changed in any way?

**Knowledge / Evidence Based Practice**

- Support knowledge used throughout the process with references

**Points to remember:**

- Reflect on **YOUR** practice - NOT others
- Confidentiality - reflect on practice, NOT client / colleague /whanau/community
- Reflect on practice that demonstrates continuing competency
- Ensure reflection is current within 3 years

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## Driscoll's (2000) Model of Reflection

### What?: Returning to the situation

- What is the purpose of returning to this situation?
- What exactly occurred?
- What did you see? What did you do?
- What was your reaction?
- What did other people do? E.g. colleague, patient, relative
- What do you see as key aspects of this situation?

### So what?: Understanding the context

- What were you feeling at the time?
- What are you feeling now? Are there any differences and, if so, why?
- What were the effects of what you did (or did not do)?
- What good emerged from the situation e.g. for self, others?
- What troubles you, if anything?
- What were your experiences in comparison to your colleagues?
- What are the main reasons for feeling differently from your colleagues?

### Now what?: Modifying future outcomes

- What are the implications for you?
- What needs to happen to alter the situation?
- What are you going to do about the situation?
- What happens if you decide not to alter anything?
- What might you do differently if faced with a similar situation again?
- What information do you need to face a similar situation again?
- What are your best ways of getting information about the situation should it arise again?

Driscoll J (2000) *Practising clinical supervision*. Edinburgh: Balliere Tindall

For further reflective practice models please see the PDRP site

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## Reflective practice books held in the BOPDHB libraries

Ghaye, T, & Lillyman, S. (2000) *Effective clinical supervision: the role of reflection*. Wiltshire: UK.

- Tauranga Hospital Library (21770)

Ghaye, T, & Lillyman, S. (2007) *Effective clinical supervision: the role of reflection*. (2<sup>nd</sup>. Ed.). Wiltshire: UK.

- Whakatane Hospital Library (21770)

Milligan, K. & Neville, S. (1999). *Exemplars from practice : a collection of work*. Christchurch Polytechnic: Christchurch.

- Whakatane Hospital Library: Nursing Collection (21312)

Westberg, J. & Jason, H. *Fostering reflection and inviting feedback : helping others learn from experience*. Springer: New York

- Tauranga Hospital Library (25329)

Street, A. (2009) *From image to action : reflection in nursing practice*. Deakin University: Geelong.

- Tauranga Hospital Library (28425);

- Whakatane Hospital Library: Nursing Collection (21641)

Johns, C. (2004). *Becoming a reflective practitioner*. Blackwell: Oxford.

Tauranga Hospital Library (30577)

- Whakatane Hospital Library: Nursing collection (24996)

Johns, C, & Freshwater, D. (Eds). (2004) *Transforming nursing through reflective practice*. Blackwell: Oxford.

- Whakatane Hospital Library: Nursing collection (20215)AM 19/08/2004

Johns, C, & Freshwater, D. (Eds). (2005) *Transforming nursing through reflective practice*. (2<sup>nd</sup>. Ed.). Blackwell: Oxford.

- Whakatane Hospital Library: Nursing collection (24335)

Johns, C. (2002). *Guided reflection : advancing practice*. Blackwell: Oxford.

- Whakatane Hospital Library: Nursing collection (22203)

Walsh, M. (1998). *Models and critical pathways in clinical nursing: conceptual frameworks for care planning*. Bailliere Tindall: UK

- Whakatane Hospital Library: Nursing Collection (21327)

Thomson, S. (1997). *Nurse teachers as researchers: a reflective approach*. Arnold: London.

- Whakatane Hospital Library: Nursing Collection (20249)

Hudson, R. & Richmond, J. (1994). *Unique and ordinary : reflections on living and dying in a nursing home : an essential text for all nurses and health care workers involved in caring for dying people in nursing homes or other health care settings*. Ausmed: Melbourne

- Tauranga Hospital: Pod 1D (7873)

Further requests can be discussed with the Librarians at both Tauranga and Whakatane Hospital

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## Appendix Two

### Professional Development Form – Graduate Nurse i.e. 16 hours over the 12 month period of NETP Expansion Programme

Date:		Time:	
Graduate:		Preceptor:	

Learning objectives set prior to professional development time:

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Learning outcomes:

Length of session (in minutes)	
Session Verification (signature of Preceptor):	

**On completion of this form, please photocopy and send a copy to:**  
Nurse Coordinator – NETP Expansion (Primary Care), Room 410, 4<sup>th</sup> Floor, Tauranga Hospital.  
Private Bag 12024, Tauranga

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