



THE ASSOCIATION OF
REGISTERED NURSES
OF PRINCE EDWARD ISLAND

CONTINUING COMPETENCE PROGRAM

Nurse Practitioner

JULY 2015

Association of Registered Nurses of Prince Edward Island

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TABLE OF CONTENTS

	Page
Background	4
Beliefs and Guiding Principles	4
Questions and Answers about Continuing Competence Program	5
Continuing Competence Program Components	5
Definitions	6
Self-assessment Worksheet	7
Standards	
#1 Professional Responsibility and Accountability	8
#2 Health Assessment and Diagnosis	10
#3 Therapeutic Management	11
#4 Health Promotion and Prevention of Illness and Injury	12
Learning Plan Worksheet	13
Record of Continuing Education Experiences	15
Peer Review	16
Evaluation Worksheet	17
Verification of Hours Audit Form	18
References	19

BACKGROUND

Registered nurses and nurse practitioners practice in a variety of settings in clinical, administrative, education and research roles, often overlapping. In the face of evolving technologies, dwindling resources, and increasing expectations, it is critical that registered nurses and nurse practitioners continue to develop professional knowledge and competence throughout their careers. Continuing competence is a necessary element of practice and the public interest is best served when nurses enhance their knowledge, skill and judgment on an ongoing basis.

BELIEFS AND GUIDING PRINCIPLES

Continuing Competence:

1. The nursing profession, through its regulatory organizations, promotes the advancement of nursing practice, identifies standards of practice, and promotes professional development.
2. Registered nurses, as competent professionals, are committed to career-long learning.
3. Continuing competence promotes good nursing practice, assists in preventing poor practice, and contributes to positive client outcomes.
4. Competence is continually acquired and maintained through reflective practice, career-long learning, and integration of learning into nursing practice.
5. The individual registered nurse has a professional obligation and the primary responsibility for acquiring and maintaining competence.
6. Acquiring and maintaining competence requires support from others, including colleagues, employers, professional and regulatory nursing organizations, and government.
7. Continuing competence can be facilitated or hindered by the environment in which individuals practice.
8. Nursing colleagues, through their moral commitment to their profession and to one another, support each other in developing, demonstrating and maintaining competence.

Continuing Competence Programs:

1. The public has the right to expect that registered nurses demonstrate continuing competence throughout their careers. The role of the regulatory body is to establish mechanisms that promote the delivery of safe, ethical, and competent care by registered nurses throughout their careers.
2. Provincial and territorial standards of practice and codes of ethics for registered nurses provide the foundation for continuing competence programs.

QUESTIONS AND ANSWERS ABOUT ARNPEI CONTINUING COMPETENCE PROGRAM (CCP)

Why do we have a Continuing Competence Program?

1. To support registered nurses and nurse practitioners in their professional commitment to career-long learning and excellence.
2. To identify areas of practice needing enhancement.
3. To demonstrate to the public that nurses are maintaining competence by engaging in career-long learning.
4. To ensure employment mobility across the country.

How do we measure compliance with the CCP?

Five to ten percent (5-10%) of the active practicing membership will be randomly selected in July to participate in an annual audit to determine compliance with the CCP requirements.

What happens if I do not participate in the CCP?

Participation in the CCP is mandatory for license renewal. If a member applying for licensure has not participated in the CCP, or has not complied with an audit request, a temporary license will be granted (see below).

What happens if I am audited and I do not comply with the request for documentation (ie. proof of having met the CCP requirements)?

The deadline for submission of audit materials is prior to the end of the licensure year. If the required documentation is not provided by the license renewal deadline, a temporary license will be granted for a 90 day period, provided all other licensure requirements are met. A member who is issued a temporary license will be charged a fee over and above the annual re-licensure fee. The member's employer(s) will be notified of the temporary status of the member's license. Only after the audited member complies with all audit requirements will a full practicing license be issued for the licensure year.

Any information provided to ARNPEI is confidential and used only for the purposes of determining that the CCP requirements are being met.

CONTINUING COMPETENCE PROGRAM COMPONENTS

The CCP requires registered nurses and nurse practitioners to reflect upon their practice through self-assessment, developing and implementing a learning plan, peer review and evaluating the impact of the learning activities upon their nursing practice.

Self-Assessment:

The ARNPEI Standards for Nursing Practice and the Nurse Practitioner Standards for Practice, characteristic of self-regulation, are based on the values of the profession. To protect the public, the *Registered Nurses Act* mandates ARNPEI to set standards of practice. The values of the nursing profession are articulated in the Canadian Nurses Association *Code of Ethics for Registered Nurses 2008*.

The ARNPEI Standards document provides the basis for reflection on nursing practice. Reflecting on their practice helps nurses plan professional learning that is relevant to their nursing practice. Reviewing the Standards and reflecting upon one's experiences in practice, enables nurses to identify both strengths and learning needs.

Peer Feedback:

Registered nurses (formally and informally) seek and receive feedback from colleagues related to their practice. It also includes seeking a knowledgeable and trusted colleague familiar with their practice area, who can respond to and support specific questions related to their professional growth. In the employment setting this occurs during an annual performance appraisal.

Learning Plan:

The learning plan may include both short and long term goals. Short term goals should be attainable within the upcoming licensure year; long term goals may be achieved over several years. Continuing education activities are directed toward meeting the goals of the learning plan. Evaluate the effects of learning activities on your practice. Ask yourself if the learning activity was useful. Were you able to integrate it into your practice? If not, seek out a colleague who may know how to find the information you were seeking.

Hours of Practice:

Registered nurses are required to practice 1125 hours over the previous five years as a means to demonstrate and maintain their knowledge, skill and judgment in nursing. Nurse practitioners are required to practice 1800 hours in the previous three years.

DEFINITIONS

Competence

The ability to apply the knowledge, skills, judgment, and personal attributes required to practice safely and ethically in a designated role and setting.

Competencies

The specific knowledge, skills, judgment and personal attributes required for a registered nurse to practice safely and ethically in a designated role and setting.

Continuing Competence

The ongoing ability of a registered nurse to integrate and apply the knowledge, skills, judgment and personal attributes required to practice safely and ethically in a designated role and setting. Maintaining this ongoing ability involves a continual process linking the code of ethics, standards of practice and career-long learning. The registered nurse reflects on his/her practice on an ongoing basis and takes action to continually improve that practice.

Continuing Competence Program

A program that focuses on promoting competence among registered nurses and nurse practitioners throughout their careers.

Competence Assessment

An evaluation of the registered nurse's ability to integrate and apply the knowledge, skills, judgment and personal attributes required to practice safely and ethically in a designated role and setting.

Nurse Practitioner Self-Assessment Worksheet

Instructions:

1. Review the ARNPEI Nurse Practitioner Standards for Practice and corresponding indicators listed in the following pages.
2. Consider how each indicator relates to your nursing practice role and setting.
3. Rate your practice on a scale of 1 to 4. If there is an aspect of an indicator that you would like to focus on check the box in the last column and continue.
4. Having identified which indicator(s) you may not be meeting consistently, prioritize at least one indicator on which to focus. Record this indicator in the first column of the Learning Plan Worksheet.

Self-Assessment Example:

Maxine is a nurse practitioner. During her self-assessment she realizes that she needs to learn more about palliative care. Caring for and treating the dying is an increasing expectation in her area of practice and Maxine realizes the need to increase her knowledge in the care and treatment of the dying. Increasing her knowledge of palliative care will provide her with the tools to provide quality care.

During her self-assessment Maxine realizes that she meets the expectations of most of the indicators. Indicators 1.6, 3.3 and 3.7 are areas that she could improve upon. She decides to use indicator 3.3 (I provide client education about interventions including: expected action, importance of compliance, side effects, potential adverse reactions, possible interactions and follow-up plan) as the focus of her learning plan about palliative care for the upcoming licensure year.

Self-Assessment Worksheet: ARNPEI Nurse Practitioner Standards for Practice

1) **Professional Responsibility and Accountability:** The nurse practitioner is responsible and accountable for his/her own practice and professional conduct.

How does each standard of practice indicator apply to my practice?	Am I meeting expectations of this indicator consistently?					I will focus on this indicator this licensure year.
Indicators	Not at all		Always			
1.1 I practice in accordance with current federal and provincial legislation, professional and ethical standards, and policy relevant to nurse practitioner practice.	1	2	3	4	n/a	
1.2 I maintain an active practicing ARNPEI RN license.	1	2	3	4	n/a	
1.3 I understand the differences in scope of practice from that of a registered nurse and the responsibilities and accountabilities of a nurse practitioner endorsement.	1	2	3	4	n/a	
1.4 I attain, maintain, and enhance competencies within my area of practice.	1	2	3	4	n/a	
1.5 I incorporate knowledge of diversity, cultural safety, and the determinants of health in assessment, diagnosis, and therapeutic management of the client.	1	2	3	4	n/a	
1.6 I engage in evidence-informed practice by critically appraising and applying relevant research, best practice guidelines and theory.	1	2	3	4	n/a	
1.7 I integrate the principles of resource allocation and cost-effectiveness in clinical decision-making.	1	2	3	4	n/a	
1.8 I provide consultation to and accept referrals from other health care providers or clients whose health conditions are within the NP scope of practice and individual expertise.	1	2	3	4	n/a	
1.9 I collaborate, consult and/or refer to other health care providers when the diagnosis and/or treatment plan is unclear or is not within the NP scope of practice.	1	2	3	4	n/a	
1.10 I document clinical data, assessment findings, diagnoses, plans of care, therapeutic interventions, client responses and clinical rationale in a timely and accurate manner.	1	2	3	4	n/a	
1.11 I maintain and retain client health records according to relevant legislation, professional standards and employer policies.	1	2	3	4	n/a	

Self-Assessment Worksheet: ARNPEI Nurse Practitioner Standards for Practice

1) **Professional Responsibility and Accountability:** The nurse practitioner is responsible and accountable for his/her own practice and professional conduct.

How does each standard of practice indicator apply to my practice?	Am I meeting expectations of this indicator consistently?					I will focus on this indicator this licensure year.
Indicators	Not at all		Always			
	1	2	3	4	n/a	
1.12 I practice within the context of a therapeutic nurse-client relationship and direct friends and family members to seek care from other health care providers when possible.	1	2	3	4	n/a	
1.13 I do not become involved in self-care.	1	2	3	4	n/a	
1.14 I act as a preceptor and mentor to nursing colleagues, other members of the health care team and students.	1	2	3	4	n/a	
1.15 I contribute to the advancement of evidence-based practice through initiation and/or participation in research activities, presentations, or publications.	1	2	3	4	n/a	
1.16 I articulate the role of the NP to clients, health care professionals and key stakeholders.	1	2	3	4	n/a	

Notes:

Self-Assessment Worksheet: ARNPEI Nurse Practitioner Standards for Practice

2) **Health Assessment and Diagnosis:** The nurse practitioner integrates a broad knowledge base and critical appraisal in determining diagnosis and client needs.

How does each standard of practice indicator apply to my practice?	Am I meeting expectations of this indicator consistently?					I will focus on this indicator this licensure year.
Indicators	Not at all		Always			
2.1 I apply advanced assessment techniques and clinical decision making skills when assessing clients.	1	2	3	4	n/a	
2.2 I systematically collect and interpret health data by performing a comprehensive and focused health assessment using multiple tools and sources of data.	1	2	3	4	n/a	
2.3 I synthesize health assessment information using critical inquiry and clinical reasoning to diagnose health risks and states of health/illness.	1	2	3	4	n/a	
2.4 I diagnose diseases, disorders, injuries and conditions, and identify health needs, while considering the client's response to the health/illness experience.	1	2	3	4	n/a	
2.5 I ensure that diagnostic tests are interpreted and results are acted upon in an appropriate and timely manner.	1	2	3	4	n/a	
2.6 I document all diagnostic tests ordered and/or discontinued on the client's permanent health record.	1	2	3	4	n/a	
2.7 I communicate the diagnosis to clients and to interdisciplinary team members as required.	1	2	3	4	n/a	
2.8 I involve clients in the development, implementation and evaluation of their plan of care.	1	2	3	4	n/a	
2.9 I synthesize information from individual clients to identify broader implications for health within the family or community.	1	2	3	4	n/a	

Notes:

Self-Assessment Worksheet: ARNPEI Nurse Practitioner Standards for Practice

3) Therapeutic Management: The nurse practitioner utilizes advanced knowledge and judgment in applying pharmacological and non-pharmacological interventions.

How does each standard of practice indicator apply to my practice?	Am I meeting expectations of this indicator consistently?					I will focus on this indicator this licensure year.
Indicators	Not at all		Always			
3.1 I provide treatment in accordance with provincial Nurse Practitioner Regulations	1	2	3	4	n/a	
3.2 I consider the known risks and benefits to the client, the anticipated outcome, and ensure safeguards and resources are available to manage outcomes when initiating interventions	1	2	3	4	n/a	
3.3 I provide client education about interventions including: expected action, importance of compliance, side effects, potential adverse reactions, possible interactions and follow-up plan.	1	2	3	4	n/a	
3.4 I create an environment in which effective communication of diagnostic and therapeutic intervention can take place.	1	2	3	4	n/a	
3.5 I obtain and document informed consent from clients prior to performing procedures.	1	2	3	4	n/a	
3.6 I perform procedures (non-invasive and invasive) for the clinical management/prevention of disease, injuries, disorders or conditions.	1	2	3	4	n/a	
3.7 I utilize an authoritative source of evidence-based drug and therapeutic information when prescribing drugs and other interventions.	1	2	3	4	n/a	
3.8 I prescribe drugs in accordance with the Prescription Guidelines approved by the Nurse Practitioner Diagnostic and Therapeutics Committee.	1	2	3	4	n/a	
3.9 I document interventions and client's response(s) in the client's permanent health record.	1	2	3	4	n/a	
3.10 I document and report adverse events associated with drugs and other interventions.	1	2	3	4	n/a	
3.11 I collaborate with clients in monitoring their response to therapeutic interventions and in adjusting interventions as needed.	1	2	3	4	n/a	

Self-Assessment Worksheet: ARNPEI Nurse Practitioner Standards for Practice

4) Health Promotion and Prevention of Illness and Injury: The nurse practitioner promotes health and reduces the risk of complications, illness and injury for clients.

How does each standard of practice indicator apply to my practice?	Am I meeting expectations of this indicator consistently?					I will focus on this indicator this licensure year.
Indicators	Not at all		Always			
4.1 I integrate the five World Health Organization principles of primary health care into clinical decision making: accessibility, public participation, health promotion, appropriate technology and intersectoral collaboration.	1	2	3	4	n/a	
4.2 I initiate or participate in the development of strategies to address identified client and/or population health implications.	1	2	3	4	n/a	
4.3 I initiate or participate in the evaluation process of health promotion and prevention strategies.	1	2	3	4	n/a	
4.4 I advocate for health promotion and prevention strategies at the policy level.	1	2	3	4	n/a	
4.5 I assess, identify, and critically analyze information from a variety of sources to determine client and/or population trends and patterns that have health implications.	1	2	3	4	n/a	

Notes:

Learning Plan Worksheet

The learning plan provides an opportunity to list the standard of practice indicator(s) that you listed in the self-assessment worksheet to identify learning needs, set objectives, plan learning activities and record your target dates for completion.

Identify learning activities that will help you meet your learning objectives. These activities must be related to the work you are doing now in your practice setting or plan to do in the near future. Setting target dates for each learning activity will help you keep on track.

Learning activities may include:

- Reading articles and text books
- Attending seminars, in-services or workshops
- Attending conferences
- Completing a CNA certification in your area of practice
- Enrolling in continuing education courses
- Seeking peer feedback
- Providing seminars, presentations or lectures
- Preceptor students
- Mentoring peers

Learning objectives should describe the desired outcome to be demonstrated at the end of your learning process. Learning objectives should be **SMART**: (Specific; Measurable; Acceptable; Realistic; and Timely with a deadline).

Learning objectives can focus on outcomes such as:

- Knowledge
- Critical thinking and problem solving
- Comprehension – the application of knowledge
- Performance outcomes such as tasks or behaviors
- Affective outcomes such as feeling, emotion and attitudes

Learning Plan Worksheet

NAME: _____

LICENSURE YEAR _____

Create your learning plan for the standard indicator(s) chosen in the Self-Assessment Worksheet to focus on for this licensure year. List which indicator(s) in the first column. Develop your learning objective(s) and detail the learning activities you plan to accomplish. Record your target and completion dates for the learning activities. Evaluate your learning plan before beginning to assess your practice for the next licensure year.

Standard of Practice Indicator Number	Learning Objective What am I going to learn?	Learning Activities How am I going to learn?	Dates Target Completed

Remember to keep all documentation associated with continuing competence for five (5) years

**ASSOCIATION OF REGISTERED NURSES OF PEI
CONTINUING COMPETENCE PROGRAM**

PEER REVIEW

NAME _____

LICENSUR YEAR _____

Instructions to nurse:

Ask a nurse with whom you work frequently and whose opinion you respect to:

- consider your practice
- complete this form (to list 3 things you do very well and 1 thing that would benefit your practice)
- discuss your practice with you.

THREE STARS (three things you do well as a professional nurse)

1.

2.

3.

ONE WISH (one thing that would benefit your practice)

1.

PEER REVIEWER'S NAME _____

DATE DISCUSSED _____

Remember to keep all documentation associated with continuing competence for five (5) years.

ARNPEI CONTINUING COMPETENCE PROGRAM

Verification of Hours Audit Form

Verification of RN Hours Worked in the Past 5 Years (To Be Released to ARNPEI)

From: _____
RN Surname Given Name(s)

ARNPEI Registration Number:

To: _____
Name of Employer/Agency

Street Address

City/Town Province Postal Code

Consent

I have been randomly selected by the Association of Registered Nurses of PEI (ARNPEI) to provide verification that I have practiced as a Registered Nurse. I hereby grant consent and request that Payroll/HR complete the bottom portion of this form providing documentation of my hours worked as a RN and **RETURN TO ARNPEI.**

RN Signature _____
Date

Payroll/HR: Please return to ARNPEI. Do not include leave(s) of absence. Include overtime only as actual time worked. Do not count "on call" hours, only actual RN hours worked.

EMPLOYER NAME _____
TELEPHONE

EMPLOYEE NAME _____
JOB TITLE

The above named RN is: Full-time Part-time Casual Other: _____

AS PER ARNPEI's Membership Year	RN Hours of Work	Comments
2014: Nov 1, 2013 - Oct 31, 2014		
2013: Nov 1, 2012 - Oct 31, 2013		
2012: Nov 1, 2011 - Oct 31, 2012		
2011: Nov 1, 2010 - Oct 31, 2011		
2010: Nov 1, 2009 - Oct 31, 2010		

I confirm that the above employee has been working as a Registered Nurse

Signature, Payroll/ Human Resources _____
Title

Please feel free to attach documentation that will verify practice hours. **Return to:**
Audit Program – ARNPEI, Unit 6 -161 Maypoint Road, Charlottetown, PE C1E 1X6
Tel: (902)-368-3764 Fax: (902) 628-1430 Email: info@arnpei.ca

REFERENCES

Appreciation is extended for permission to use parts of the following documents:

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