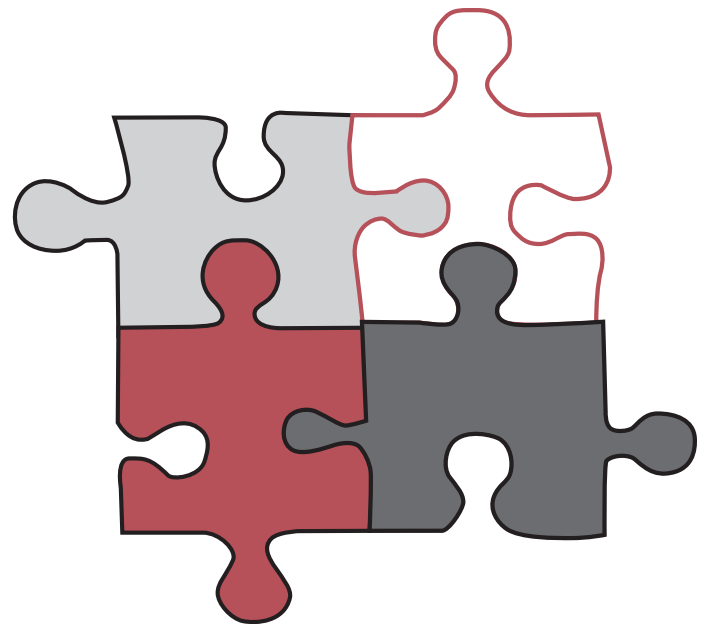




**CONTINUING
COMPETENCE
PROGRAM
FOR RNs AND RN(NP)s**



**CONTINUING
COMPETENCE**

Saskatchewan Registered Nurses' Association

October 2006

The Saskatchewan Registered Nurses' Association gratefully acknowledges the work of the

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Welcome SRNA Members



The SRNA wishes to acknowledge the RNs who worked on the development of the Continuing Competence Program. We thank the committee and members who are leading education sessions on this important program. We also recognize the expertise in continuing competence programs and documents from other nursing jurisdictions across Canada, especially British Columbia, Ontario, Nova Scotia, and Alberta that assisted us in the development of our program.

Confidentiality / Privacy

The documents you compile, complete and identify as your way of maintaining competence are confidential. During an audit process you may be required to submit your documents for review. *The Registered Nurses Act, 1988* was amended in 2003 to ensure that any information related to a member's participation in the continuing competence program is confidential. Section 38.1(1) addresses this protection. Your documents cannot be used against you in a legal proceeding.

Need Help?

Click on to the SRNA website www.srna.org and/or phone SRNA at 1-306-359-4200 or toll free at 1-800-667-9945 ext. 240 and ask for the Continuing Competence Program Coordinator. Review the SRNA website frequently as new resources are added throughout the year. A Continuing Competence tutorial is accessible on the SRNA website. The tutorial will provide you with examples of how RNs from different practice areas have chosen to complete their reflective practice. It will facilitate the development of your own practice review. Review the NurseONE website as many resources can be found there.

TABLE OF CONTENTS

Tab #1: Introduction and Overview . . .	2
Tab #2: Personal Assessment.	4
Tab #3: Feedback	16
Tab #4: Learning Plan.	18
Tab #5: Evaluation	23
References.	24
• <i>Bylaws 2003.</i> (SRNA, amended September 2006)	
Tab #6: <i>Standards and Foundation Competencies For The Practice of Registered Nurses (SRNA, 2007)</i>	
Tab #7: Resources	
• Online Resources	
• SRNA WebMap	
• The Canadian Nurses Portal – NURSEONE information sheet	
Tab #8: RN(NP) Continuing Competence Program	

Introduction

Effective 2007, the Continuing Competence Program is fully implemented. Continuing Competence is the ongoing ability of a RN,RN(NP) 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 continued process linking the code of ethics, standards of practice and life long learning. The RN,RN(NP) reflects on his/her practice on an ongoing basis and takes action to improve continually that practice.

We have prepared this document to assist you in meeting the requirement that all RNs,RN(NP)s participate in a continuing competence program. In an effort to assure the public that “RN” equals competent, caring nursing, regulatory bodies for nursing throughout Canada have made continuing competence a national priority. The SRNA is accountable to the people of Saskatchewan to promote competent, ethical nursing by RNs,RN(NP)s throughout their careers.

Continuing Competence Framework (adopted from CNA) Guiding Beliefs and Principles

1. The nursing profession as a whole, through its professional and regulatory organizations, promotes the advancement of nursing practice, identifies standards of practice and promotes professional development.
2. RNs,RN(NP)s are competent, self regulating professionals and are committed to lifelong learning.
3. Continuing competence is essential to professional nursing practice. It aims to promote good nursing practice, to prevent poor practice, and to contribute to the quality of nursing practice and best possible client outcomes.
4. Continuing competence is maintained and enhanced through reflective practice, lifelong learning and integration of learning into nursing practice.

5. The individual RN,RN(NP) has the professional obligation and the primary responsibility for maintaining continuing competence.
6. Maintaining competence requires support from others, including colleagues, employers, professional regulatory nursing organizations, and government.
7. An individual’s ability to maintain, enhance, or demonstrate competence is influenced by the practice setting. 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 demonstrating, developing, and maintaining competence.

Components of the SRNA Continuing Competence Program

The continuing competence program requires the RN,RN(NP) to self reflect on his/her practice. The components of the continuing competence program include:

- an optional professional profile,
- a personal assessment,
- feedback,
- development and implementation of a learning plan,
- and evaluation of the impact that the learning plan has had on your practice.

Initially, the RN,RN(NP) completes a personal assessment of his/her practice using the current *Standards and Foundation Competencies For The Practice of Registered Nurses*, and the *Code of Ethics for Registered Nurses*. RN(NP)s also utilize the *Registered Nurse (Nurse Practitioner) RN(NP) Standards and Core Competencies, 2003*. It also includes asking a peer, another health care professional, a client, or sometimes a supervisor to give you feedback on your practice. Following completion of the assessment, the RN,RN(NP) develops a learning plan to address his/her learning needs, and schedules that learning during the next year.

A learning plan is an individual's identified objectives or goals. It includes a timeline to meet those priorities for learning that have been identified in the personal assessment. A written evaluation of the impact of the learning plan on nursing practice is the final component.

Audits

Random audits will be completed each year. Audits may include surveys and/or submission of documents. Each year at registration renewal you will be asked to verify that you have completed a personal assessment, obtained feedback, developed and implemented a learning plan and evaluated the impact that the learning plan had on nursing practice. For those members who work in more than one practice area, the audit of that member will focus on their primary role.

In 2007, the audit begins with a random sample of RN(NP)s. In 2008 RNs will be included in the audit.

Each RN, RN(NP) shall retain his/her reflective practice review for five membership years following the end of the membership year in which the review is completed and shall produce it to the registrar at any time on request (Bylaw VI Section 3 [14]). The self assessment, peer feedback, and learning plans will assist you in your next year documentation for your continuing competence program.

A RN who does not complete a reflective practice review in a membership year is not eligible to be licensed to practice in the membership year next ensuing (Bylaw VI Section 3 [14]).

Your Professional Profile

The professional profile is a tool that helps RNs, RN(NP)s identify, collect, reflect upon and most importantly, value their experiences, learning and accomplishments. An efficient professional profile is an organized collection of information you have retained to verify the learning you have participated in to maintain competence. The profile is unique to you. The

professional profile is self directed. You can choose to maintain or develop a profile, as an effective system to record and collect your learning activities. Your professional profile can be used to support your participation in the SRNA Continuing Competence Program.

A simple method of initiating a portfolio is to purchase a 3 ring binder and collect all your documented accomplishments or attendance at workshops with the material that was covered. A list of possible documents you may want to consider is found below. Remember elements of a professional profile are self selected.

These are only suggestions:

- current resume
- transcripts of formal education courses
- diplomas/certificates
- professional licences
- course outlines
- job descriptions (paid, volunteer)
- performance appraisals/evaluation of performance on special projects
- letters of reference or recommendation (employers, colleagues, teachers, clients)
- letters of verification of learning (employers, colleagues, teachers)
- samples of your work (paper, video, audio tape, etc.)
- publications you have authored/coauthored
- business cards
- thank you letters
- flyers, brochures, conference/workshop/seminar outlines of learning opportunities attended
- old daybooks, diaries, journals
- photos
- videos
- awards, prizes, scholarships
- newspaper articles about you
- student evaluations
- records of continuing education, inservices, etc.
- anything else that might help you remember accomplishments.



Personal Assessment

The goal of reflective practice is to help you continually grow in your practice, by identifying what you do well and areas that you can improve upon. Personal assessment is one way to identify your strengths and your learning needs. Personal assessment has been described as a form of learning in which individual learners take the initiative and the responsibility to assess their own educational needs, set goals and objectives, plan and identify appropriate educational activities, implement those activities and evaluate outcomes (Swankin, 1995). As a RN, RN(NP), you will find that you have been assessing your care or practice, and taking appropriate action for change. The personal assessment form, that is

included in this document, is a formal way to identify your strengths and learning opportunities. This information is then utilized to develop a learning plan. RNs, RN(NP)s practice in a wide variety of roles and settings, making it very challenging to develop one tool specific enough to meet everyone's personal assessment needs. Your personal assessment tool is based on the current SRNA *Standards and Foundation Competencies For The Practice of Registered Nurses*. The tool can be used or adapted to RNs, RN(NP)s working in all domains of practice – direct care, administration, education, and research. RN(NP)s will also use the *Registered Nurse (Nurse Practitioner) RN(NP) Standards and Core Competencies, 2003*.

Implementation of Standards into the Personal Assessment

The Personal Assessment form is based on the current Standards and Foundation Competencies as outlined in the document. RNs, RN(NP)s have a responsibility to practice according to the standards and competencies. The standards apply to all RNs, RN(NP)s practicing as an educator, direct care provider, administrator, researcher or in a policy/consultation role.

For the key on the personal assessment form, check off the category that best describes your skills, knowledge and abilities for the indicators identified.

- **Not applicable** – a skill or practice that is unlikely to become part of your role.
- **Confident** – a skill or practice you feel very comfortable about your performance.
- **Satisfactory** – a skill or practice that you believe you meet minimum requirements.
- **Needs developing** – a skill or practice you do not presently believe you can do well, but should refine it for your role.
- **Priority for learning** - a skill or practice that must be learned or reinforced to ensure quality and safety, as it has a significant effect on your performance as a RN, RN(NP).

In summary the key assists you to develop your learning plan. Your strengths are identified in a category “confident” and “satisfactory”, your learning needs in “needs developing” and “priority for learning”. The latter may be transferred to your learning plan. When you have completed the personal assessment form for all the standards you will be able to see where your focus for learning should be directed and then appropriate resources can be located.

PERSONAL ASSESSMENT FORM

Continuing Competence Program (Interpret for your primary area of Practice)



STANDARD I - Professional Responsibility and Accountability

The registered nurse consistently demonstrates professional conduct and competence while practising in accordance with the SRNA standards for registered nursing practice and the code of ethics for registered nurses. Further, the registered nurse demonstrates that the primary duty is to the client to ensure safe, competent, ethical nursing care.

Not Applicable Confident Satisfactory Needs Developing Priority for Learning

Foundation Competencies:

The registered nurse:

1.	Is accountable and accepts responsibility for his/her own actions and decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Articulates and enacts the role and responsibilities of a registered nurse as a member of the health care team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Recognizes limitations of practice and seeks assistance as necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Practices to the full extent of his/her competence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Demonstrates professional presence.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Consistently identifies himself/herself by name and professional designation to clients and co-workers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Displays initiative, confidence, self-awareness, and encourages collaborative interactions within the nursing and health care team, with the client as the centre of the health team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Advocates for clear and consistent roles and responsibilities within the health team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	Demonstrates effective collaborative problem solving strategies, including conflict resolution.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	Advocates and intervenes as needed, to ensure client safety.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	Demonstrates critical inquiry in relation to new knowledge and technologies as it relates to nursing practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	Promotes current evidence-informed best practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Promotes healthy, culturally safe environments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	Recognizes and addresses abusive situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Consistently intervenes in the client's best interest.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	Discusses, as appropriate, unsafe practice or professional misconduct of a health care worker with the individual prior to reporting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
17. Reports unsafe practice or professional misconduct of a health care worker to appropriate authorities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Recognizes, reports and takes action in a timely manner, in unsafe situations when client/staff safety and/or well-being is potentially or actually compromised.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Challenges and takes action as necessary, on questionable orders, decisions or actions made by other health team members, to safeguard the client.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. In accordance with agency policy and legislation, and in a timely manner, recognizes, and reports near misses, adverse events and critical incidents, takes action to minimize harm, and participates in root cause analysis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Utilizes a systems approach to patient safety, participates with others in the prevention of errors, near misses and adverse events.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Integrates quality improvement principles and activities into nursing practice in an ongoing manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Exercises professional judgment when using agency policies and procedures, or when practising in the absence of agency policies and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Participates in the analysis, development, implementation and evaluation of clinical practices, care delivery frameworks and policies that guide delivery of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Organizes workload and develops time-management skills for meeting responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Fulfills the requirements of the SRNA Continuing Competence Program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Demonstrates professional leadership by:					
a. building relationships and trust;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. creating an empowering environment;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. supporting knowledge development and integration within the health team;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. leading and sustaining change; and	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. balancing competing values and priorities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summary: (Notes to yourself to explain why you identified the priorities you did.)

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STANDARD II - Knowledge-based Practice

Knowledge-based practice has been subdivided into two parts: Specialized Body of Knowledge and Competent Application of Knowledge.

II.1 *Specialized Body of Knowledge: The registered nurse draws on diverse sources of knowledge and ways of knowing, which includes the integration of nursing knowledge along with knowledge from the sciences, humanities, research, ethics, spirituality, relational practice, critical inquiry and the principles of primary health care.*

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
Foundation Competencies					
The registered nurse:					
28. Applies a knowledge base from nursing and other disciplines in the practice of nursing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Demonstrates and utilizes nursing informatics and other information communications technology in promoting and providing safe nursing care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. Proactively seeks new information and knowledge and utilizes best practice in the provision of nursing care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Applies knowledge about potential and emerging community disasters and global health issues to nursing practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Contributes to a culture that supports involvement in nursing or health research through collaboration with others in conducting, participating in, and implementing research findings into practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

II.2 *Competent Application of Knowledge: The registered nurse demonstrates competence in the provision of nursing care. The competency statements are grouped into four areas. While the presentation of these competency statements appear linear, the nature of providing nursing care reflects a critical inquiry process that embraces all competency statements.*

i) On-going holistic assessment: The registered nurse incorporates critical inquiry and relational practice to conduct an organized and comprehensive assessment that emphasizes client input and the determinants of health.

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
Foundation Competencies					
The registered nurse:					
33. Uses appropriate tools and techniques in consultation with clients and other team members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. In collaboration with the client, performs an assessment of physical, emotional, spiritual, cognitive, developmental, environmental, social, and learning needs, and the client's beliefs about health and wellness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
35. Collects information on client status using assessment skills such as observation, interview, history taking, interpretation of data, and where applicable, physical assessment, including inspection, palpation, auscultation and percussion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Analyzes and interprets data obtained in client assessments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. Facilitates client engagement in identifying their health needs, strengths, capacities and goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Collaborates with other health care team members to identify actual and potential client health care needs, strengths, capacities and goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Documents assessment in accordance with agency policies and protocols.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Uses existing health and nursing information systems to manage nursing and health care data during client care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ii) Collaborates with clients to develop plans of care: Within the context of critical inquiry, relational practice, the registered nurse plans nursing care appropriate for clients.

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
Foundation Competencies					
The registered nurse:					
41. Uses a critical inquiry process to support professional judgment and decision-making to develop plans of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Uses principles of primary health care in developing plans of care and in identifying and addressing priority needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Facilitates the appropriate involvement of clients in identifying their preferred health outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Negotiates priorities of care with clients where appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Anticipates potential health problems or issues and their consequences for clients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Anticipates potential staff safety concerns and initiates appropriate action.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Develops learning plans and plans of care with clients and health care team members to promote continuity of care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Consults with other health care team members as needed to analyze and address health challenges.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Collaborates with other team members and health related sectors to assist clients to access resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- iii) Provides registered nursing care: Within the context of critical inquiry and relational practice, the registered nurse consistently provides individualized nursing care for people of all ages and genders in situations related to:
- health promotion, prevention and population health;
 - altered health status including acute and chronic health conditions and rehabilitative care; and
 - hospice, palliative and end-of-life care.

Not
Applicable Confident Satisfactory Needs
Developing Priority
for
Learning

Foundation Competencies

The registered nurse:

50.	Provides nursing care that is informed by evidence relevant to primary health care, health and healing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51.	Incorporates evidence from research and clinical practice, in conjunction with client preference, to make decisions about client care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52.	Provides care that is culturally safe, demonstrating sensitivity to client diversity and culture.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53.	Supports clients through role changes and developmental transitions from birth to death.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54.	Manages multiple nursing interventions simultaneously.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55.	Applies principles of population health to implement strategies to prevent illness and injury.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56.	Assists clients to understand the link between health promotion strategies and health outcomes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57.	Supports clients to make informed choices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58.	Implements learning plans to meet identified client learning needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59.	Assists clients to identify and access health and other relevant resources in their communities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60.	Implements preventive, therapeutic and safety strategies based on evidence-informed practice, to prevent injury and the development of complications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61.	Uses technology appropriately, ensuring client safety.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- iv) **On-going evaluation of client care: The registered nurse collaborates with clients and members of the health care team while conducting an on-going organized and comprehensive evaluation to inform current and future care planning.**

Not
Applicable Confident Satisfactory Needs
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Foundation Competencies

The registered nurse:

62.	Employs a critical inquiry process to monitor the effectiveness of client care, in collaboration with the client, individuals, families, groups and communities, and other members of the health care team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63.	Utilizes the results of outcome evaluation to modify and individualize client care in collaboration with clients and other members of the health care team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64.	Reports and documents client care and its ongoing evaluation clearly, concisely and accurately.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
65.	Advocates for change where optimum client care is impeded.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summary: (Notes to yourself to explain why you identified the priorities you did.)

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STANDARD III – Ethical Practice

The registered nurse demonstrates competence in professional judgment and practice decisions by adhering to the current Canadian Nurses Association (CNA) code of ethics for registered nurses and by establishing therapeutic, caring, and culturally safe relationships with clients and health care team members.

Not
Applicable Confident Satisfactory Needs
Developing Priority
for
Learning

Foundation Competencies

The registered nurse:

66.	Practices in accordance with the values of the current CNA code of ethics for registered nurses and the accompanying responsibility statements, as amended from time to time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
67.	Identifies the effect of his/her values, beliefs and experiences in relationships with clients, recognizes potential conflicts and ensures culturally safe client care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
68.	Establishes and maintains professional relationships and boundaries with clients and other team members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
69. Establishes and maintains a caring environment that supports clients to achieve optimal health outcomes, goals to manage illness or a peaceful death.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
70. Protects clients from negligence, misconduct, incompetence and mistreatment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
71. Promotes a safe environment that addresses the unique needs of clients within the context of care and uses a culturally safe approach to nursing care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
72. Provides care for all clients respectful of their health/illness status, diagnoses, life experiences, beliefs, and health practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
73. Respects and incorporates the spiritual and religious beliefs and practices of clients into nursing care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
74. Differentiates between ethical and legal considerations and their relevance when providing nursing care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
75. Ensures that informed consent is provided as it applies to multiple contexts (e.g., consent for care; refusal of treatment; release of health information; and consent for participation in research).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
76. Supports clients in making informed decisions about their health care, and respects those decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
77. Advocates for clients or their representatives, especially when they are unable to advocate for themselves.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
78. Uses a principled ethically reasoned decision-making process to address situations of ethical distress and dilemmas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
79. Seeks assistance as necessary in addressing personal ethical distress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
80. Understands ethical and legal considerations in maintaining client confidentiality in all forms of communication: written, oral, and electronic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summary: (Notes to yourself to explain why you identified the priorities you did.)

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STANDARD IV – Service to the Public

The registered nurse protects the public by providing and improving health care services in collaboration with clients and other members of the health care team.

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
Foundation Competencies					
The registered nurse:					
81. Articulates the authority and scope of practice of the registered nurse.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
82. Maintains knowledge of health care delivery at all applicable levels (clinical or program, agency, regional/municipal, provincial/territorial, national/international) within the context of a systems perspective.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
83. Demonstrates awareness of the impact of organizational culture on the provision of health care and acts to enhance the presence of a culturally safe practice environment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
84. Collaborates with all members of the health care team to facilitate:					
a. assignment and monitoring of appropriate workloads;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. delegation to and monitoring of the performance of delegated registered nursing activities;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. maintenance of professional boundaries and accountabilities;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. direction and coordination of team members in emergency situations; and	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. evaluation of team staff mix.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
85. Participates and contributes to nursing and health care team development by:					
a. building partnerships with health team members, recognizing and respecting the unique and shared competencies of each member;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. recognizing that values, assumptions and positional power affects team interactions;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. contributing nursing perspectives on issues;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. recognizing and supporting the scope of practice of various disciplines;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. using appropriate channels of communication; and	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. providing and encouraging constructive feedback amongst team members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
86. Collaborates with the health care team and the public to respond to changes in the health care system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
87. Uses established communication protocols within and across health care agencies and with other service sectors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
88. Advocates for public participation in defining health care needs at all applicable levels of health care delivery to ensure effective policies and actions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
89. Ensures a culture of safety by using established occupational health and safety practices, and other safety measures to protect client, self and colleagues from injury or potentially abusive situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
90. Manages resources to provide effective and efficient care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
91. Supports professional efforts in nursing to achieve a healthier society.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
92. Advocates for and promotes healthy public policy and social justice especially with vulnerable populations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
93. Advocates for and participates in emergency preparedness planning and works collaboratively with others to develop and implement plans to facilitate protection of the public.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Summary: (Notes to yourself to explain why you identified the priorities you did.)

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STANDARD V – Self-regulation

The registered nurse demonstrates an understanding of professional self-regulation by advocating in the public interest, developing and enhancing his/her competence and ensuring safe practice.

	Not Applicable	Confident	Satisfactory	Needs Developing	Priority for Learning
Foundation Competencies					
The registered nurse:					
94. Demonstrates knowledge of the registered nursing profession as self-regulating and autonomous, which is mandated by provincial legislation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
95. Practices within the scope of nursing practice as defined and described in The Registered Nurses Act, 1988, and SRNA documents.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
96. Articulates and differentiates between the mandates of professional regulatory bodies and unions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- | | | | | | |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 97. Develops support networks and mentor roles with registered nurse colleagues, other care team members and community based resources. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 98. Takes needed action to protect client from unsafe nursing care. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 99. Reports critical incidents through appropriate channels. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 100. Understands and participates in the development and utilization of a framework that addresses quality improvement. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Summary: (Notes to yourself to explain why you identified the priorities you did.)

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FEEDBACK

Consider the two parts of the word “feed” and “back”. The word “feed” means to nourish, comfort, or to meet another’s needs. “Back” in this context is to return something to another. In this sense, feedback is a gift to nourish another’s practice. (Balzar Riley, 1996).

Validating Your Assessment

Obtaining peer feedback will help to validate your personal assessment. Feedback is someone else’s perspective, who works in the same or similar position. Giving feedback is something we do verbally or non-verbally on a daily basis. Keeping track of the feedback will provide additional perspectives to add to your personal assessment. Feedback may take various forms depending upon the setting you work in. These may include feedback from clients and/or co-workers; scenario reviews; or on site observation by peers. Team conferences, de-briefing following an incident, family care feedback discussions are all ways of receiving feedback.

A peer is often a RN,RN(NP) working in the same or similar position as you. Peer feedback from a RN,RN(NP) is especially useful, as he/she knows the standards and competencies that are in the scope of the practice of registered nursing. A colleague

working in the same environment may be able to provide suggestions on how you can incorporate feedback observations into your learning plan.

Other sources may be mentors or other health care professionals. It does not need to be a RN,RN(NP). Obtaining feedback is mandatory to fulfill the requirements of the SRNA continuing competence program.

Remember peer feedback is not peer review. Choose a peer/colleague whose opinion you respect and whose judgment you trust. Identify to the peer what specific issue or situation you want feedback on.

The form attached may be helpful for your “peer” to document an observation. The form is optional, a piece of white paper is adequate. To enable you to use the feedback in your learning plan, it needs to be dated and signed by the peer.

PEER FEEDBACK

Peer feedback can be very valuable. This form is an example only.

Briefly describe a situation/incident/work performance experience that you have observed or participated in with your peer over the past year.

List three things your colleague did well in this situation:

1.

2.

3.

List three things that may enhance your colleague's practice after this experience:

1.

2.

3.

Signature

Date



Learning Plan

Using the results of your personal assessment and feedback you can now develop a learning plan. A suggested outline of a learning plan and the various areas necessary is attached for you to use as a resource.

Consider some or all of the following when developing your personal learning plan:

- what areas in my self assessment did I identify that needed attention?
- what areas in my province are changing or may change in the near future that I should be responding to by obtaining more education?
- what are my strengths that will assist me in meeting my learning goals?
- how do I learn best?
- how will I know I have met my objectives and goals, and made a difference in my practice?

The overall challenge is to balance what you need to learn with what you want to learn and the resources available. Your learning plan is a guide. Flexibility is the operational reality in these busy days for all of us. Your learning plan should become an ongoing monitor of your learning needs, how you met them and the outcome of your activity. Your learning activities will depend on the identified needs from your personal assessment.

Learning is a continuous process. The tool that has been provided for you takes you through a step-by-step process. At the end of that process were the overall objectives met, how did your practice improve and what did you learn from the process?

If you requested feedback from a colleague, you may want to ask for a situation to be observed again. You are encouraged to focus on the priority areas that you and/or your peer has identified.

Documentation of the outcome of your learning objectives will assist you in monitoring your successes and identifying areas for further development. Just a reminder, all of your learning needs may not be met in a short time so look realistically at your time frames, you may have short and long term objectives.

Methods to Achieve Learning Goals

There are many ways to meet your learning goals. Some methods that you can employ to achieve your learning goals include:

- reading journals
- consultation
- formal courses
- workshops
- in house inservice
- use of internet resources

EXAMPLES

Submitted by SRNA Members

LEARNING PLAN
Continuing Competence Program



What are you going to learn	How are you going to learn (identify resources)	How will you know you have learned it	Timelines with target dates for completion	Relevance to my practice (statement or examples)
<p>Personal</p> <p>How to change a flat tire</p>	<ul style="list-style-type: none"> - workshop - community college - garage 	<ul style="list-style-type: none"> - can I do it successfully when I need to, demonstrate and request feedback 	<ul style="list-style-type: none"> - In next 3 months (ending Nov 20/06) 	<ul style="list-style-type: none"> - not have to wait for a service call or CAA, so I do not get behind on my appointments
<p>Professional</p> <p>How to give meaningful peer feedback</p>	<ul style="list-style-type: none"> - friend - library - internet - contact a continuing education resource - in-service education 	<ul style="list-style-type: none"> - my peer and I were comfortable and we both learned from each others peer feedback 	<ul style="list-style-type: none"> - Next 6 months by May 30 	<ul style="list-style-type: none"> - good skill to have - more comfort when requested to be a peer giving feedback for the continuing competence process
<p>Nursing Admin Practice</p> <p>How to do effective performance appraisals</p>	<ul style="list-style-type: none"> - contact H.R. - contact other nurse managers - library - internet - SAHO - management textbooks 	<ul style="list-style-type: none"> - I will feel comfortable with the format I am using with the employees, by getting - long range – improved employee performance 	<ul style="list-style-type: none"> - 3-6 months to develop and study format - 12-18 months to complete the appraisals on the unit 	<ul style="list-style-type: none"> - promotes quality care - promotes continuous improvement - good two way dialogue with each employee and supervisor - promotes teamwork
<p>Educator Practice</p> <p>04 Nov 30 How to prepare and present a power point</p>	<ul style="list-style-type: none"> - A. consult with IT staff - B. training session (find out if work offers short sessions on basics on PPT) - C. ask other people I work with for tips - D. check with Journals - E. review critiques I have made of others PPT – what did I like or dislike 	<ul style="list-style-type: none"> - F. successfully prepare a basic (text only) slide presentation of at least 10 slides - G. present my mini session to colleagues and ask for feedback on various aspects of the session – were the slides clear, uncluttered, easy to read (font and color, type and background contrast suitable). Be prepared to act on feedback to improve presentation skills/content 	<ul style="list-style-type: none"> - A. 04 Dec 02nd - B. 04 Dec 10th - C. 04 Dec 10th - D. 04 Dec 12th - E. 04 Dec 06th - F. 04 Dec 14th - G. 04 Dec 19th 	<ul style="list-style-type: none"> - as a nurse educator I need to be able to use and present educations sessions using a variety of media. PowerPoint is widely available now both in house and in conference centers/hotels. - PowerPoint presentations are easily updated, transported and stored. Continuous improvement of presentation skills will be of benefit to me in maintaining audience attention and engagement

EXAMPLES

Submitted by SRNA Members

LEARNING PLAN
Continuing Competence Program



<p>What are you going to learn</p>	<p>How are you going to learn (identify resources)</p>	<p>How will you know you have learned it</p>	<p>Timelines with target dates for completion</p>	<p>Relevance to my practice (statement or examples)</p>
<p>Med/Surg Rural</p> <p>Current trends for diabetic management</p>	<ul style="list-style-type: none"> - ask MEDEC program at RGH for updated information - ask dietitian for updated information - research medical and nursing journals - contact diabetic Association for info 	<ul style="list-style-type: none"> - will be able to manage care of diabetic patients in accordance with best practices - able to provide accurate and appropriate information when teaching diabetic patients 	<ul style="list-style-type: none"> - 2 months for collection of information - 4 months to review information and have opportunity to seek any clarification for going on and understanding of information 	<ul style="list-style-type: none"> - more confident when caring for diabetic patients - diabetic patients will be provided with better care and teaching
<p>Long Term Care</p> <p>Subcutaneous line for medication administration in palliative care</p>	<ul style="list-style-type: none"> - obtain protocol - research information in medical and nursing journals - request inservice presentation from clinical educator for palliative care 	<ul style="list-style-type: none"> - able to set up and initiate subcutaneous line - knowledgeable about the drugs and therapeutic dosages for subcutaneous administration - knowledgeable about the care of subcutaneous lines and any problems to watch for 	<ul style="list-style-type: none"> - 4-6 months for collection of information & arrangements for presentation - 4-6 months for opportunity to work with patient having a subcutaneous line 	<ul style="list-style-type: none"> - confident in caring for patient with subcutaneous - patient will experience better management of drugs through subcutaneous line
<p>Homecare Practice</p> <p>How to identify indicators that will give me a measurement of the quality of the nursing service I deliver to my home care client caseload (how will I know that what I am doing is good).</p>	<ul style="list-style-type: none"> - library – U of S remote access to nursing databases - internet – SRNA, CNA, CIHI, HQC and other websites - look for in-services or workshops on quality indicators - connect with the quality personnel in my health region. 	<ul style="list-style-type: none"> - I will identify and measure one quality indicator 	<ul style="list-style-type: none"> - complete the end of September (over the next nine months) 	<ul style="list-style-type: none"> - I will gain a better understanding of the effectiveness of my nursing practice to home care clients. This will either validate my current service delivery or provide evidence of a change that would be beneficial to my clients

EXAMPLES

Submitted by SRNA Members

**LEARNING PLAN
Continuing Competence Program**



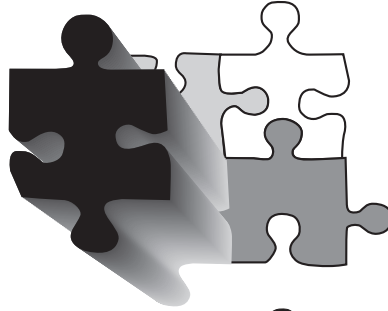
What are you going to learn	How are you going to learn (identify resources)	How will you know you have learned it	Timelines with target dates for completion	Relevance to my practice (statement or examples)
<p>RN(NP)</p> <p>How to improve my infectious disease drug therapy, by using evidenced-based guidelines</p>	<ul style="list-style-type: none"> - attend the Drug Therapy Decision Making conference (Mar 18/19) - consult the RX Files - Drug Comparison Chart - Sept - internet - NPOS Education Day June 	<ul style="list-style-type: none"> - improved recovery time for all infectious diseases - patients express increased satisfaction in recovery time of infectious diseases - few patients express concerns of treatment failure in relation to infectious disease therapy 	<ul style="list-style-type: none"> - in the next 6 months (ending Sept) 	<ul style="list-style-type: none"> - many infectious diseases are encountered daily within the Nurse Practitioner's practice - by improving the treatment of infectious diseases I am providing my clients with the best possible therapy for their disease process, but I am also improving access to quality health care for the people of Saskatchewan
<p>Tracheal Intubation</p>	<ul style="list-style-type: none"> - read a learning package - read a procedure text - view a video (e.g. NRP) - review a protocol (e.g. NRP) - find a colleague to walk you through the procedure (e.g. MD, RT) - seek out opportunities to intubate with supervision 	<ul style="list-style-type: none"> - successful intubation of patients of a variety of weights of differing circumstances (e.g. emergency, elective) 	<ul style="list-style-type: none"> - 3 months (or the time it takes to carry out the procedure successfully in accordance with unit standards) 	<ul style="list-style-type: none"> - prepared to perform elective or emergency airway management



LEARNING PLAN
Continuing Competence Program

What are you going to learn	How are you going to learn (identify resources)	How will you know you have learned it	Timelines with target dates for completion	Relevance to your practice (statement or examples)

***You may wish to copy this form to complete your Learning Plan.**



Evaluation

Were my objectives and goals met?

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How will my nursing practice improve?

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What did I learn from the process?

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References

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Canadian Nurses Association. (2000). A national framework for continuing competence programs for registered nurses, Ottawa, ON: Author.

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Registered Nurses' Association of Nova Scotia. (August 1997). Continuing competence of registered nurses in Nova Scotia. A consultation paper. Halifax N.S.: Author.

Swankin, D. (1995). The Role of Licensing in Assessing the Continuing Competence of Health Care Professionals: A Resource Guide. Washington D.C. Citizen Advocacy Centre

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SRNA. (1988). The Registered Nurses Act. Regina, SK: Author.

SRNA (2003) Registered Nurse (Nurse Practitioner) RN/NP Standards and Core Competencies

SRNA Bylaws 2003. (SRNA, amended September 2006)

Bylaw VI Section 1. Continuing Competence Program

(1) For the purposes of clause 38.1(1)(a) of the Act, the Continuing Competence Program administered by the SRNA for both the general practice and nurse practitioner membership categories is

established as the program for reviewing and improving the quality of nursing care provided by members.

- (2) A registered nurse licensed in the general practice category must participate in the Continuing Competence Program for that membership category.
- (3) A registered nurse licensed in the nurse practitioner category must participate in the Continuing Competence Program for the general practice category as well as the Continuing Competence Program for the nurse practitioner category.
- (4) As part of the Continuing Competence Program, a registered nurse must complete, in each membership year, a reflective practice review in the form provided by the Association, which includes:
 - (a) a personal assessment of her or his own nursing practice according to the nursing practice standards approved by the council;
 - (b) feedback on the personal assessment obtained by the registered nurse;
 - (c) a written learning plan developed from the personal assessment and feedback and implemented; and
 - (d) a written evaluation of the result of the learning plan on the practice of the registered nurse.
- (5) Each registered nurse shall retain his or her reflective practice review for five membership years following the end of the membership year in which the review is completed and shall produce it to the registrar at any time on request.
- (6) A registered nurse who does not complete a reflective practice review in a membership year is not eligible to be licensed to practice in the membership year next ensuing.
- (7) The registrar may suspend a registered nurse's licence to practice where the registrar determines that the registered nurse has not completed a reflective practice review in accordance with these bylaws.

Online resources:

Saskatchewan Registered Nurses' Association

www.srna.org

Has a wealth of information for members of the SRNA as well links to the other registered nursing professional associations in Canada.

Canadian Nurses Association

www.cna-aiic.ca

Canadian Nurses Protective Society

www.cnps.ca

The Canadian Nurses Protective Society (CNPS) was established in 1988.

Provincial and territorial nurses' professional associations banded together to create a national, non-profit society that would provide their members with adequate professional liability insurance.

All SRNA members who are in good standing (i.e. registered) are eligible to access CNPS services. It does not matter what your employment status is. You may be an independent practitioner, an employee, or a volunteer.

Periodically, the CNPS provides education sessions and information bulletins to members of the SRNA.

The Canadian Nurses Portal

www.NurseONE.ca

NurseONE is a personalized interactive web-based resource providing RNs, RN(NP)s in Canada with access to current and reliable information to support their nursing practice, manage their careers, and connect with colleagues and health care experts. (CNA, 2006)

RNs, RN(NP)s will have the ability to develop and save the individualized continuing competence documents on the NurseONE website.

Nursing Resources

- Practice Advise ment
- Ask a Practice Advisor FAQs
- Standards & Foundation Competencies
- Position Statements
- Interest Sheet
- SRNA Bylaws
- The Registered Nurses Act
- Workplace Representative Program
- Chapters/Professional Practice Groups
- Documents

Registration

- Licensure
- Approved Practice
- Extensions
- Audit Program
- 2007 Student Membership
- Fee Schedule
- Registration FAQs
- Name & Address Change
- Continuing Competence Program
- Continuing Competence Program Workbook

Nurse Practitioner

- RN(NP) Standards and Core Competencies 2003
- RN(NP) Maintaining Eligibility for Licensure
- Common Medical Disorders
- RN(NP) Continuing Competence Program
- CNPS Liability Protection for RN(NPs)
- RN(NP) Scope of Practice and the Law Information Sheet
- Mythbusters – Nurse Practitioner
- SRNA RN(NP) Fact Sheet
- RN(NP) Legislation
- RN(NP) Updates
- Links
- Canadian Nurse Practitioner Examination (CNPE)

Professional Conduct

- Investigation & Resolution Process
- Complaints Handling Process
- Submitting a Complaint – Public
- Submitting a Complaint – Employer/Co-worker
- Responding to a Complaint
- Hearing Process

News and Issues

- Special Events
- News Releases
- Annual Report
- Financial Statements
- Newsbulletin
- Call for Resolutions and Health Research Links
- Employee Newsbulletin
- Recognition Awards
- Environmental Scans

Links

- Provincial and Territorial Nurses Associations/ Colleges Links
- Canadian Nursing and Health Research Links
- Other related links

Search

- Search site

About Us

Learn all about the SRNA and all that we represent in the nursing sector

- About the SRNA
- SRNA Employment Opportunities
- FAQs
- Mission and Policies
- SRNA Council
- Staff Directory and Organization Chart

What's new at the SRNA?

- Want to know what's new at the SRNA?
- Want to know what's important to RNs in Saskatchewan and nationally?

Contact Us

- This link takes you directly to the SRNA directory

Photo Events

TIPS & SEARCH HELP

To get around the SRNA website, we are using a 'drop-down-revealing' navigation. To use the site you simply guide your mouse cursor over the area you want to explore and as your cursor comes over top of the link, the selection(s) for that area will be revealed below. You must be using a JavaScript enabled web browser such as the latest version of Microsoft® Internet Explorer®.

Searches are normally performed with "may contain" words. A match requires any of the words entered to be present on the page.

You can search for pages which contain a specific word by prefixing it with a plus (+) sign. Only pages which contain that word will be shown.

You can ignore all pages which contain a specific word by prefixing it with a minus (-) sign. Any page that contains that word will not be displayed in the search results.

You can search for a specific phrase by enclosing it in double quotes (" "). Only pages that contain that exact phrase will be shown.

All search words are not case sensitive. Matches will be found in the page title, keywords, description and body text.

Search String

Search String	Results will contain pages that:
lion tiger	contain either the word lion or the word tiger (or both)
+ lion + tiger	contain both the word lion and the word tiger
lion - tiger	contain the word tiger. If the page also contains the word lion it may rank higher in the results list.
+ lion - tiger	contain the word lion and not the word tiger

- When you click on a link to a document, allow several seconds for it to load, especially if you are opening a large document. Large documents may take awhile before they are fully ready to read or print.

- When printing large documents, try printing only a few pages at a time. Most printers will perform better with smaller tasks. To do this, give the command through File-Print-fill in Page Range.

- If your browser doesn't load a page properly, click on "STOP" or "BACK". Then, click the link again. Clicking on "REFRESH" or "RELOAD" will take you back to the SRNA Web Page.

- PDF files are electronic documents that look exactly like their professionally printed versions, complete with colour and graphics.

- You can download free Adobe Reader™ software to open PDF files from <http://www.adobe.com/products/acrobat/readmain.html>. Just follow the (fairly easy) instructions on the site to save and install this very useful program. Once you have it, PDF documents on any website will open automatically when you click a link to request them.

Calendar of SRNA Events

Competent, caring nursing for the people of Saskatchewan™

home search contact us links site map disclaimer

Welcome

The SRNA is the professional regulatory body for nurses in the province. Founded in 1917, the SRNA represents the largest group of health professionals in the province with over 9,000 members. The SRNA is the official voice of nursing in the province, speaking out on health care issues on behalf of nurses and the public.

Mark your calendars! 2006

79 days left until the 2006 Biennial Convention in Saskatoon. For information about the CNA 2006 Biennium visit www.cna-alc.ca

Events Calendar

2006 SRNA Out and About Schedule
April 3-6, 2006

2006 CNA Biennium
June 18-21, 2006

2006 SRNA Annual Meeting
May 2-3, 2006

2006 Reallack St.
Regina, Saskatchewan
Canada S4T 7X5
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Last Updated: March 29, 2006

Surfing www.srna.org

What is NurseONE?

NurseONE is a personalized interactive web-based resource providing nurses in Canada—this country's health care knowledge workers—with access to current and reliable information to support their nursing practice, manage their careers, and connect with colleagues and health-care experts.

What can NurseONE offer me?

You can access up-to-date, accurate information on a wide range of topics fully vetted and reviewed by the CNA and its review committee. Information from a trusted source—NurseONE is your online colleague.

Professional Practice: you can enrich your knowledge through evidence-based information, clinical references, disease-specific information, nursing policy statements, and much more.

Online Libraries: you can immediately access the Cochrane Collection, e-CPS, e-Therapeutics and STAT!Ref Electronic Medical Library.

Careers: you can send career questions to health-care career management experts, develop your portfolio or post your resume on-line.

As well, you have **My Account**, a personalized section of the site visible to you at all times while you are working in NurseONE and where you can save documents, web addresses and other important items.

And this is just the beginning. NurseONE also offers a self-assessment tool to assist nurses in managing their continuing competency requirements, emergency preparedness resources and will soon offer online discussion forums.

How and why was NurseONE created?

Delivering health care in Canada's diverse communities—from large urban centres to small northern inlets—is a challenge. But it is a challenge that First Nations and Inuit Health Branch, Health Canada knew could be overcome with technology. FNIHB partnered with the CNA, and provided three years of funding, to create NurseONE, a

unique personalized and interactive Web-based resource to support Canada's nurses.

To ensure NurseONE's relevance to you, we tested it with nurses throughout its development. The results have influenced the portal's navigation and will continue to impact the information that is developed for the site.

How can I access NurseONE?

You can access NurseONE by logging onto www.nurseone.ca and completing the registration steps outlined on the screen.

Over the coming months the site will evolve and grow. If you would like periodic updates on its development please email us at portalinfo@nurseone.ca and you will be added to our update database.





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*Competent, Caring
Nursing for the
People of
Saskatchewan*