

Wairarapa District Health Board & Hutt Valley District Health Board

Professional Development and Recognition Programme (PDRP) 2014-2016 Handbook for Registered and Enrolled Nurses

Creating a culture of excellence

For all general enquiries concerning the PDRP and/or portfolios, please contact your Nurse Educator, Nurse Specialist, Associate Clinical Nurse Manager or Nurse Manager.

Otherwise, for specific and application enquiries for the PDRP, contact the PDRP coordinator on the following:

Name	:	Karen Shaw
Address	:	Nurse Coordinator – Professional Development Practice Development Unit Corridor Two Pilmuir House Hutt Valley District Health Board
Phone	:	570 9978
e-mail	:	Karen.shaw@huttvalleydhb.org.nz

This handbook is intended for RNs and ENs.

For the sake of clarity, the term 'Manager' has been used throughout this handbook. This includes but is not limited to all senior nurses with delegated authority to manage the Performance Review process.

The term "the DHB" has been used throughout this document and refers to both Wairarapa DHB and Hutt Valley DHB.

Employees participating in the PDRP should access the process and support provided by their employing DHB.

Adapted with permission from PDRP Information Handbook – for Nurse Assistants, Enrolled Nurses and Registered Nurses from Capital & Coast DHB

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SECTION I: INTRODUCTION TO THE PDRP

Developing as a professional

The Professional Development and Recognition Programme (PDRP) is a way of recognising, valuing and acknowledging nursing practice. The PDRP provides a framework that helps nurses develop their professional practice and assist them on a career pathway. The PDRP encourages nurses to reflect on their practice and to set goals to plan for their future in care delivery and leadership. The DHB PDRP was developed by nurses, to enable nurses to demonstrate clinical expertise. Benner's (1984) model of 'novice' to 'expert' underpins the framework. The PDRP is about providing strategies to safely cope with the changes that occur consistently in nursing practice.

Goals of the PDRP

- Ensure nursing expertise is visible, valued and understood
- Enable differentiation between the different levels of practice
- Value and reward clinical practice
- Encourage practice development
- Identify expert nurse / role models
- Encourage reflection on practice
- Encourage evidence based practice
- Provide a structure for ongoing education and training
- Assist in the retention of nurses
- Assist nurses to meet the requirements for competence based practising certificates

Health Practitioner Competence Assurance Act (2003) and the Nursing Council of New Zealand

The Health Practitioner Competency Assurance Act 2003 (HPCA) requires the Nursing Council of New Zealand (NCNZ) to ensure the on-going competence of practitioners. To ensure nurses are maintaining competency requirements, the NCNZ randomly audit 5% of nurses across New Zealand (recertification audit). This audit involves assessment of the evidence in the nurses' portfolio.

NCNZ approves PDRP as recertification programmes under Section 41 of the HPCA Act for the purpose of ensuring nurses are competent to practice and meet ongoing competency requirements. The Framework and Standards for Approval of PDRP (2003 revised 2013) were developed by NCNZ to meet the requirements for competency-based APCs. The PDRP at the DHB is approved by NCNZ. Nurses at the DHB are exempt from NCNZ recertification audit as long as they have progressed onto and/or maintained their place on the PDRP.

SECTION II: APPLICATION TO THE PDRP

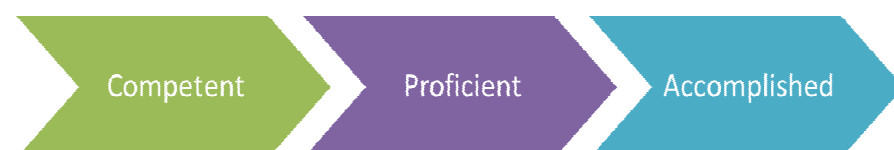
At the DHB, nurses can be placed on the PDRP either by *direct transfer* as per the New Zealand Nurses Organisation (NZNO) Multi Employment Collective Contract (MECA, 2012, Clause 27.9) or by application (performance review and portfolio assessment) for the relevant role and level. Nurses cannot be put onto the PDRP unless they have either transferred under clause 27.9 or completed their first performance review.

The terms RN or EN 1, 2, 3 or 4 were replaced by the terms 'Novice', 'Competent', 'Proficient', 'Expert' (for RN) and 'Accomplished' (for EN). The leadership level was added in 2012 and refers to nurses whose role lies predominantly in management, education, policy development or research.

Registered Nurse PDRP Levels



Enrolled Nurse PDRP Levels



New Employees

New employees who have not been on an NCNZ approved PDRP or who have come from overseas, must have a performance review and apply to progress onto the PDRP **within 12 months** of employment. Nurses cannot be put onto the PDRP until they have completed their first performance review and had their portfolio assessed. This is stipulated by NCNZ. Therefore nurses in their first 12 months of employment at the DHB may be selected by NCNZ for audit.

Their portfolio is assessed for application to the PDRP according to the process for the level they are applying for. New Employees are able to apply directly to Proficient/Expert or Accomplished level if the criteria are met.

Staff working across Wairarapa and Hutt valley DHB

Nurses working between Wairarapa DHB and Hutt Valley DHB must submit their portfolio to the PDRP coordinator of the DHB they are paid by.

Staff transferring employment between Wairarapa and Hutt Valley DHB's

A nurse with a current PDRP assessed by Wairarapa DHB or Hutt Valley DHB that transfers employment between these organisations will retain that level of practice in the new employment setting if they are transferring to the same area of practice. If the nurse is changing area of practice they have up to **12 months** to demonstrate achievement of competencies at that level of practice in the new setting or at the portfolio expiry date (whichever comes first). In this case, a **full** performance review and portfolio assessment at the relevant level must be completed **within 12 months** of employment and their portfolio assessed at this time. Nurses who do not submit a new portfolio based on the DHB template by the end of the 12 month period will then be recorded as not current.

Transferring from another DHB, Organisation or Service

A nurse with a current PDRP portfolio assessed through a NCNZ approved PDRP that transfers to permanent employment from either another organisation or area of practice, retains that level of practice in the new employment setting. The nurse then has up to **12 months** to demonstrate achievement of the competencies at that level of practice in the new setting or at portfolio expiry date (whichever comes first).

The nurse must complete the transfer letter at commencement of employment. The PDRP allowances are paid from the time of employment with provision for the nurse to meet the performance indicators for the level in the new area within a negotiated period.

A **full** performance review and portfolio assessment at the relevant level must be completed **within 12 months** of employment and their portfolio assessed at this time. This must be based on the DHB templates. Nurses who do not submit a new portfolio based on the DHB template by the end of the 12 month period will then be recorded as not current.

Returning Employees

Under normal circumstances, if a DHB employee on the PDRP resigns and then returns within *three years of their previous full portfolio review*, their status will be re-established, at the existing level.

Nurses who have been away for more than 3 years or who did not complete a full portfolio review prior to leaving cannot have their level re-established as the DHB cannot guarantee they meet NCNZ continuing competency requirements. This is a nationally endorsed expectation. A full performance review and portfolio assessment at the relevant level must be completed **within 12 months** of employment for all returning employees regardless of whether PDRP level was reestablished or not.

Casual Pool and Permanent Pool

Nurses employed on the Casual or Allocation Pool are entitled to apply for progression onto the PDRP, as long as they work at least fifty shifts per year for the DHB. Nurses who work less than this are individually responsible for maintaining NCNZ continuing competency requirements.

Maintenance of PDRP level

Progression on the PDRP does not end after completion of a portfolio. It is an ongoing process requiring maintenance of the portfolio and annual performance review.

To remain on a NCNZ approved PDRP, nurses are required to submit a fresh portfolio of evidence every 3 years. This reaffirms the nurse is consistently practising at that level of practice. A performance review is to be completed by the Manager every 12 months.

Removal from the PDRP

Should a nurse show a significant breach of nursing conduct or competence that demonstrates her/his inability to continue to perform at a RN/EN Competent, RN/EN Proficient, RN Expert or EN Accomplished Level – this nurse can have his/her status and recognition removed prior to the three yearly update.

The Manager, the Executive Director of Nursing & Midwifery (EDoNM), Human Resources, and NZNO (as appropriate) will have input into whether or not the removal of the PDRP status is the appropriate action in individual cases. The EDoNM is ultimately responsible for the decision to remove a nurse from the Hutt Valley DHB PDRP

Once removed from the PDRP, full reapplication is required. This can be to either the previous or a new PDRP level.

Resignation from Wairarapa or Hutt Valley DHB

On resignation from the DHB a nurse with a current portfolio will be removed from the PDRP list and will no longer be recorded as having a current portfolio. The nurse must then apply to have their PDRP recognised by any organisation or DHB they are subsequently employed by. The nurse is responsible for requesting transfer of their PDRP status and then supplying the employing organisation with appropriate documentation. The employing organisation may contact the PDRP Coordinator for further information. This is a NCNZ requirement.

SECTION III: GENERAL PORTFOLIO REQUIREMENTS

General Portfolio Requirements

The PDRP portfolio is a record of professional practice, activities and achievements and is something nurses should be proud of as it 'showcases' their practice. As the PDRP is a professional document it must be presented in a way that reflects this. The portfolios must be presented:

- In a plain folder (folders from professional organisations, such as NZNO, NCNZ and professional colleges are acceptable) OR
- Professionally bound
- Be printed double sided if possible, typed and spell checked
- If clear files are used in a folder, ensure that there are enough clear files for each piece of paper
- Three identical portfolios are required for Proficient and Expert/Accomplished (only one portfolio is required for Competent)
- Sections must be clearly separated with an appropriate labelled divider
- Examples from practice must be from the current area of practice and less than 12 months old

Portfolios must **not** include:

- Cartoons or non-nursing pictures that do not reflect a professional attitude
- Loose pages
- Original documentation (such as certificates). Please use the Professional Development List to avoid printing copies of certificates
- Information or documents that in any way could identify patients/family/whanau or other health care providers, unless written permission is given.
- Evidence which may demonstrate incompetence rather than competence of self or others
- Personal reflections or feelings which you would not want critiqued by others
- Work or evidence that is older than the specified time frames or from a previous area of employment
- Documents not required on the checklist. Only required evidence will be assessed
- Please write abbreviations out in full the first time they are used, e.g. Professional Development Recognition Programme (PDRP)

Failure to meet these requirements could result in the portfolio being returned.

Referencing

If you are referencing within the portfolio, these must be in the most current APA format. References from journals and books should be less than 10 years old unless it is a seminal piece of work (e.g. Benner, 1984)

Application Letter

The DHB Application Letter must be used on all RN/EN Portfolios. Applicants reapplying for their PDRP level or applying for the next level should include one copy of their previous portfolio.

Curriculum Vitae (CV)

Your CV should include:

- **Personal details** – name, contact details such as telephone number and address
- **Education and Academic Achievements** – a list of the educational institutions you have attended, dates of attendance and certificates, diplomas or degrees gained. It is usually a good idea to start with the most recent and highest qualification.
- **Relevant Work Experience** – list your most recent position first and work backwards. Give dates of employment, name and location of employer, position, responsibilities and achievements.
- **Personal Skills and Abilities/Strengths** – your key skills and major achievements.
- **List of professional development activities**

Annual Practicing Certificate (APC)

Please photocopy both sides of your current APC and have your manager or senior nurse verify the photocopy. A print-out from the NCNZ website is acceptable. The APC must include any conditions on practice.

Performance Appraisal

- Must be less than 12 months old
- Must reflect the level being applied for or maintained
- Needs to be signed by all parties involved

Support Letter from Manager

All PDRP portfolio submissions are required to contain a Support Letter from the Manager. If the nurse disagrees with the Support Letter from the Manager, then the nurse is able to appeal within one month of the date from assessment. Refer to pg. 27 for Appeal Process

Professional Development/Career Plan

It is an expectation that all professionals will continue to learn and maintain their competence. Each nurse is responsible for seeking opportunities to learn and maintain their competence in the interests of patient care and safety. A nurse needs to complete professional development in the context of their area of practice, within the work environment or within an educational context. Professional development may be taken as whole days or hours and include a variety of different learning activities such as degree papers, short courses, seminars, conferences, e-learning or in-service education. The plan must be supported by the Manager.

It is recommended that up to 30% of professional development should be in the form of e-learning but that this may be higher in individual circumstances.

Professional Development Record

The professional development requirements must include evidence of 60 Professional Development (PD) hours over the last three years **AND**:

- Validation by someone who can verify your attendance, certificate or an organisational record
- PD hours at an appropriate level for specific practice/related practice
- Code of Conduct training must be once completed every 3 years as per NCNZ requirements
- A reflection or statement describing the difference the learning has made to nursing practice. This needs to be at least three education attendances over the past 3 years.

Journal reading may be considered a professional development activity if it takes place within a formal framework such as a journal club, a presentation to colleagues or to inform an education or quality improvement process. Meetings may be considered a professional development activity if they have an educational focus and appropriate documentation is supplied.

Please avoid printing copies of certificates – use the Professional Development List (except certificates for postgraduate education).

Self-Assessment

The self-assessment is completed by the nurse applying for the PDRP and must include evidence of practice that answers the NCNZ indicators at the PDRP level being assessed against (NNO, 2005). For example, assessment against Proficient Level must demonstrate practice beyond that of Competent Level so the assessor can see the difference in the level of practice. The indicators ask for examples of actual practice and answers must include this. Examples must be from the current area of practice and less than 12 months old (NNO 2009). When discussing an example from actual practice, a Registered Nurse must verify the example.

- One piece of evidence for one indicator in each competency is required
- The evidence/example is to be from current area of practice within the previous 12 months
- Describe how the nurse's day to day practice meets the indicator
- Must be verified by a Registered Nurse

Competency Assessment / Peer Review

Competency assessment refers to a senior nurse assessment and is "*completed by a senior nurse in a designated position, e.g. a charge nurse, a nurse educator, team leader, coordinator, nurse manager or director of nursing*" (NCNZ, 2011). The applicant is assessed against the NCNZ competencies and the NCNZ indicators at the PDRP level being assessed. If the nurse being assessed disagrees with the choice of competency assessor, they must negotiate for an alternative assessor before the competency assessment commences. The competency assessor should not be a close personal friend or relative of the nurse being assessed. A high level of professionalism is expected of the competency assessor and any conflict of interest declared and another assessor chosen.

To meet NCNZ requirements, the competency assessment must include a statement that validates the nurses' self-assessment and include an example or examples demonstrating how the nurse meets each competency. This can be based on:

- Direct observation of practice
- An interview with him/her to ascertain nursing care in different scenario's
- Evidence provided by him/her including self-assessments, exemplars or examples of practice (NCNZ, 2011)

If the assessor is unable to complete the assessment, this must be discussed with the nurse and/or manager. If there are any pre-existing issues with the nurse's practice, the Manager should not delegate the assessment and should complete it themselves.

Competency assessments should ideally be done by one person. However, if completed by a number of people (no more than three, who must also be delegated by the Manager), the reason for this must be included in the portfolio.

The competency assessment must be completed by a nurse who:

- Has a current APC
- Holds a senior nurse title (e.g. CNM, ACNM, CNE) or the Manager can delegate to a senior RN who is a proficient or expert nurse on the PDRP Pathway or in the case of primary care a delegate senior nurse
- Has at least 3 years of clinical experience in the clinical area
- Be familiar with the practice of the nurse completing the portfolio
- Completed workplace assessor training or similar

If the nurse disagrees with the competency assessment, then the nurse is able to appeal within one month of the date from assessment. Refer to Appeal Process.

Age of Evidence

Evidence submitted in the portfolio should ideally be less than 3 years old. Where evidence is older it should be accompanied by a review and update that is less than 3 years old. This includes:

- Evidence of education sessions and preceptoring/supporting the skill development of students/colleagues
- Evidence of practice changes, quality initiatives, contribution to specialty knowledge and innovations in practice
- Reflections on practice
- Evidence demonstrating engagement and influence in wider service, professional or organisational activities

Educational Equivalence in an Expert Portfolio

The educational equivalence option [in an expert portfolio] reduces barriers for many nurses who have not had access to level 8 education but who have achieved the equivalent knowledge, skills and attributes through other pathways (NNO, 2009). The applicant is required to demonstrate within their portfolio the integration of the nursing knowledge at level 8 into their nursing practice. The education pathways to achieve this level of knowledge are to be presented (NNO, 2009).

Evidence should include:

- Post registration experience and education relevant to current area of practice which impacts on practice at expert level
- Changes in attitudes and skills which have occurred as a result of this

- Demonstration of expert practice, critical analysis and reflection consistently in nursing practice and evidenced throughout the portfolio

Applications for educational equivalence should be submitted using the appropriate form to the PDRP coordinator for your employing DHB prior to the submission of the expert portfolio. A panel of senior nurses will assess each application for educational equivalence individually. Discussion with the PDRP coordinator for your DHB is strongly advised prior to application for educational equivalence being made.

SECTION IV: REGISTERED NURSE PORTFOLIO REQUIREMENTS

Competent RN Portfolio Requirements

Documents must be in the portfolio in the order below.

RN Competent Portfolios are to be handed into and assessed by the Manager or delegated other.

Continuing Competence requirements

- a) Application Letter - **Signed**
- b) Curriculum Vitae
- c) Copy of entry on NCNZ online register showing current APC
- d) Copy of Job description
- e) Current Performance Appraisal including a separate professional development plan (within the last 12 months) - **Signed**
- f) Self-assessment – competent level against the NCNZ competencies - **Signed**
- g) Competency assessment – competent level against the NCNZ competencies - **Signed**
- h) Support from Manager for progression on the PDRP pathway - **Signed**
- i) Verification of 450 practice hours over the last 3 years, validated by a senior nurse (e.g. CNM) - **Signed**
- j) Evidence of 60 Professional Development (PD) hours over the last three years - **Signed. Three** reflections must be included.

Proficient RN Portfolio Requirements

Documents must be in the portfolio in the order below. If re-applying to proficient please send in **one** copy of the previous portfolio with the new submission.

3 Copies of the RN Proficient Portfolio are to be handed into the PDRP coordinator for your DHB (see page 2 for contact details).

Continuing Competence requirements

- a) Application Letter - **Signed**
- b) Curriculum Vitae
- c) Copy of entry on NCNZ online register showing current APC
- d) Copy of Job description
- e) Current Performance Appraisal including a professional development plan (within the last 12 months) - **Signed**
- f) Self-assessment – **proficient** level against the NCNZ competencies - **Signed**
- g) Competency assessment – **proficient** level against the NCNZ competencies - **Signed**
- h) Support from Manager for progression on the PDRP pathway - **Signed**
- i) Verification of 450 practice hours over the last 3 years, validated by a senior nurse (e.g. CNM) - **Signed**
- j) Evidence of 60 Professional Development (PD) hours over the last three years - **Signed**. **Three** reflections must be included.

Proficient Requirements

- a) An example of involvement in quality initiative or practice change and evidence of implementation evaluation. This example needs to be negotiated with and supported by the Manager
- b) An example of teaching session OR precepting or supporting the skill development of colleagues
 - If a teaching session is used the applicant must include learning objectives and evaluation of the session and should have been delivered to more than one person
 - Precepting or supporting skills development should include reflection and feedback from the person precepted or supported
- c) Reflection illustrating the ability to manage and coordinate care for patients with complex needs

Expert RN Portfolio Requirements

Documents must be in the portfolio in the order below. If re-applying to expert please send in **one** copy of the previous portfolio with the new submission.

3 Copies of the RN Expert Portfolio are to be handed into the PDRP coordinator for your DHB (see page 2 for contact details).

Continuing Competence requirements

- a) Application Letter - **Signed**
- b) Curriculum Vitae
- c) Copy of entry on NCNZ online register showing current APC
- d) Copy of Job description
- e) Current Performance Appraisal including a professional development plan (within the last 12 months) - **Signed**
- f) Self-assessment – **expert** level against the NCNZ competencies - **Signed**
- g) Competency assessment – **expert** level against the NCNZ competencies - **Signed**
- h) Support from Manager for progression on the PDRP pathway - **Signed**
- i) Verification of 450 practice hours over the last 3 years, validated by a senior nurse (e.g. CNM) - **Signed**
- j) Evidence of 60 Professional Development (PD) hours over the last three years - **Signed**. **Three** reflections must be included

Expert Requirements

- a) Evidence of level 8 post graduate education relevant to area of practice (certificate or official course transcript required) or equivalent (see page 14 for details). Post graduate education may have been completed **before** the 3 years under certification and does not expire as long as the applicant has maintained continuing professional development.
- b) Evidence demonstrating contribution to speciality knowledge **OR** innovation in practice and the change process in quality improvement activities. This example needs to be negotiated with and supported by the Manager and should evidence of post implementation evaluation.
- c) Reflection on the learning and/or development of colleagues
- d) Evidence demonstrating engagement and influence in wider service, professional or organisational activities. Highlighting advocacy for nursing needs to be included
- e) Reflection demonstrating expert knowledge and application of expert practice in care of complex patients and clinical leadership in care coordination

Leadership RN Portfolio Requirements

The Leadership RN portfolio is designed for senior nurses whose role is predominantly management, education, policy development or research.

Documents must be in the portfolio in the order below. If re-applying to leadership please send in **one** copy of the previous portfolio with the new submission.

3 Copies of the RN Leadership Portfolio are to be handed into the PDRP coordinator for your DHB (see page 2 for contact details).

Continuing Competence requirements

- a) Application Letter - **Signed**
- b) Curriculum Vitae
- c) Copy of entry on NCNZ online register showing current APC
- d) Copy of Job description
- e) Current Performance Appraisal including a professional development plan (within the last 12 months) - **Signed**
- f) Self-assessment – **leadership** level against the NCNZ competencies - **Signed**
- g) Competency assessment – **leadership** level against the NCNZ competencies - **Signed**
- h) Support from Manager for progression on the PDRP pathway - **Signed**
- i) Verification of 450 practice hours over the last 3 years, validated by a senior nurse (e.g. CNM) - **Signed**
- j) Evidence of 60 Professional Development (PD) hours over the last three years - **Signed**. **Three** reflections must be included

Section 5 – Leadership Requirements

- a) A level 8 Post Graduate qualification (or currently working towards) relevant to area of practice. This may have been completed before the 3 years under certification and does not expire as long as the applicant has maintained continuing professional development.
- b) Evidence demonstrating leadership in education, management, research or policy development. This evidence should reflect the central concerns of your position/role.
- c) Evidence demonstrating leadership in regards to innovation in practice and the change process in quality improvement activities. This should include evidence of the integration of evidence, best practice and implementation evaluation and needs to be verified.

- d) Reflection on the learning and development of colleagues including and advocating evidence based practice.
- e) Evidence demonstrating active participation and leadership roles in wider service, professional or organisational groups or activities and the implementation of this within the Service Area/Organisation. This should highlight leadership and advocacy for nursing/client needs.
- f) Evidence demonstrating quality monitoring and analysis of professional processes and how this information has been used to affect improvements in healthcare delivery. This evidence should reflect the central concerns of your position/role.

Section 6 – Credentialing requirements (optional)

- a) If you are going through or have been through the credentialing process please include the additional requirements for credentialing in this section.

SECTION V: ENROLLED NURSE PORTFOLIO REQUIREMENTS

Competent EN Portfolio Requirements

Documents must be in the portfolio in the order below.

EN Competent Portfolios are to be handed into and assessed by the Manager or delegated other.

Continuing Competence requirements

- a) Application Letter - **Signed**
- b) Curriculum Vitae
- c) Copy of entry on NCNZ online register showing current APC
- d) Copy of Job description
- e) Current Performance Appraisal including a professional development plan (within the last 12 months) - **Signed**
- f) Self-assessment – **competent EN** level against the NCNZ competencies - **Signed**
- g) Competency assessment – **competent EN** level against the NCNZ competencies - **Signed**
- h) Support from Manager for progression on the PDRP pathway - **Signed**
- i) Verification of 450 practice hours over the last 3 years, validated by a senior nurse (e.g. CNM) - **Signed**
- j) Evidence of 60 Professional Development (PD) hours over the last three years - **Signed. Three** reflections must be included

Proficient EN Portfolio Requirements

Documents must be in the portfolio in the order below. If re-applying to expert please send in **one** copy of the previous portfolio with the new submission.

3 Copies of the EN Proficient Portfolio are to be handed into the PDRP coordinator for your DHB (see page 2 for contact details).

Continuing Competence requirements

- a) Application Letter - **Signed**
- b) Curriculum Vitae
- c) Copy of entry on NCNZ online register showing current APC
- d) Copy of Job description
- e) Current Performance Appraisal including a professional development plan (within the last 12 months) - **Signed**
- f) Self-assessment – **proficient EN** level against the NCNZ competencies - **Signed**
- g) Competency assessment – **proficient EN** level against the NCNZ competencies - **Signed**
- h) Support from Manager for progression on the PDRP pathway - **Signed**
- i) Verification of 450 practice hours over the last 3 years, validated by a senior nurse (e.g. CNM) - **Signed**
- j) Evidence of 60 Professional Development (PD) hours over the last three years - **Signed**. **Three** reflections must be included

Section 5 – Proficient EN Requirements

- a) An example of involvement in quality initiative or practice change and evidence of implementation evaluation. This example needs to be negotiated with and supported by the Manager
- b) Reflection illustrating the depth of understanding of patient care and care co-ordinating within scope of practice

Accomplished EN Portfolio Requirements

Documents must be in the portfolio in the order below. If re-applying to accomplished please send in **one** copy of the previous portfolio with the new submission.

3 Copies of the EN Proficient Portfolio are to be handed into the PDRP coordinator for your DHB (see page 2 for contact details).

Continuing Competence requirements

- a) Application Letter - **Signed**
- b) Curriculum Vitae
- c) Copy of entry on NCNZ online register showing current APC
- d) Copy of Job description
- e) Current Performance Appraisal including a professional development plan (within the last 12 months) - **Signed**
- f) Self-assessment – **accomplished** level against the NCNZ competencies - **Signed**
- g) Competency assessment – **accomplished** level against the NCNZ competencies - **Signed**
- h) Support from Manager for progression on the PDRP pathway - **Signed**
- i) Verification of 450 practice hours over the last 3 years, validated by a senior nurse (e.g. CNM) - **Signed**
- j) Evidence of 60 Professional Development (PD) hours over the last three years - **Signed**. **Three** reflections must be included

Section 5 – Accomplished Requirements

- a) Evidence demonstrating participation in quality improvement and the change process and evidence of implementation evaluation. This example needs to be negotiated with and supported by the Manager
- b) Evidence showing engagement and influence in professional activities
- c) Reflection showing depth of understanding of patient care and care co-ordination within scope of practice, and the ability to identify changes in patient health status and action this appropriately

SECTION VI: ASSESSMENT AND MODERATION

The following does not apply to nurses on the Nurse Entry to Practice (NETP) Programme when initially applying for competent level.

Portfolio assessment for maintenance of PDRP levels is required every 3 years. This is stipulated by NCNZ and is a nationally endorsed expectation. Extensions must be applied for in writing to the PDRP Coordinator at least **six weeks** prior to expiration of portfolio. Extensions will only be granted in exceptional circumstances. Portfolios expire at the end of the given month; therefore the new portfolio should be handed in for assessment at the beginning of the expiry month in order to be rolled over.

Competent Level Portfolio Assessors

Requirements for a Competent Level Portfolio Assessor:

- a) Be an RN with a current APC (no restrictions impacting on ability to assess portfolios)
- b) Have completed NZQA 4098 or other training in assessment
- c) Have a Senior Nurse Title (for example, CNM, CNE, ACNM) or the Manager can delegate an appropriate senior nurse
- d) May or may not be the same nurse who completes the peer assessment

All Competent Level Portfolios are to be handed into the nurses' manager for assessment.

Proficient/Expert/Accomplished Level Portfolio Assessors

Proficient/Expert/Accomplished portfolio will be assessed by 2-3 assessors. Requirements for a Proficient/Expert/Accomplished Level Assessor:

- a) Be an RN with a current APC (no restrictions impacting on ability to assess portfolios)
- b) Have completed NZQA 4098, Workplace Assessor training or similar training
- c) Be an RN who is on the PDRP pathway at Proficient or Expert Level
- d) Complete the appropriate portfolio assessment tool

The PDRP Equivalence Panel

- a) Three nurses make up the PDRP equivalence panel, PDRP coordinator, EDoNM and Nurse Director PDU

The Leadership Portfolio Assessment team

The Senior Portfolio Assessment team will assess all Senior portfolios submitted. Requirements for a Senior Level Assessor:

- a) Be an RN with a current APC and be on the PDRP pathway
- b) Senior nurses in a management role (for example CNM, EDoNM, Nursing Director PDU)
- c) Have completed NZQA 4098 or workplace assessor training

All portfolios should be assessed using the appropriate portfolio assessment tool and a copy of this should remain with the portfolio.

Application Dates for Proficient/Expert/Leadership and Accomplished Portfolios

All Proficient/Expert/Leadership and Accomplished Portfolios are to be handed into the Nurse Coordinator – Professional Development, **no later than 1530hrs** on the following dates:

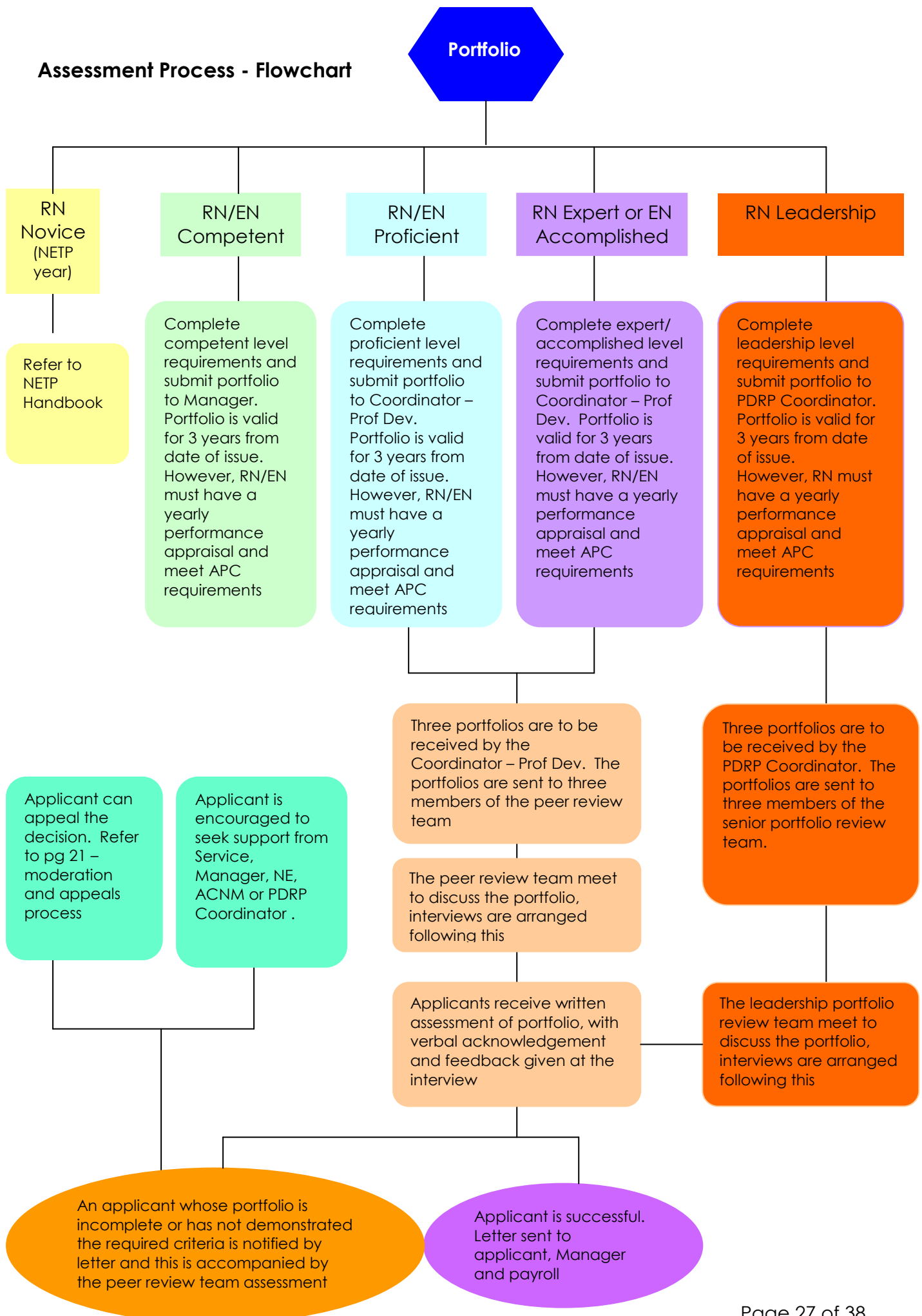
Year 2014	Year 2015	Year 2016
3 February 2014	2 February 2015	1 February 2016
3 March 2014	2 March 2015	1 March 2016
1 April 2014	1 April 2015	1 April 2016
1 May 2014	4 May 2015	2 May 2016
2 June 2014	2 June 2015	1 June 2016
1 July 2014	1 July 2015	1 July 2016
1 August 2014	3 August 2015	1 August 2016
1 September 2014	1 September 2015	1 September 2016
1 October 2014	5 October 2015	3 October 2016
3 November 2014	2 November 2015	1 November 2016

PDRP Allowances

PDRP allowances and study leave are as stipulated by the NZNO MECA clause 27. Competent Level does not attract any additional allowances.

Proficient, Expert and Accomplished applicants will have their PDRP allowances dated from the date the portfolio was assessed as successful. If a nurse is removed from the PDRP, all PDRP related allowances will cease from the date of removal.

Assessment Process - Flowchart



Confidentiality

All portfolio contents remain confidential to the assessor(s)/moderator(s) unless covered under the Health Practitioners Competence Assurance Act 2003 or as directed by NCNZ.

Moderation of Portfolios

Moderation of portfolios occurs to ensure consistency and fairness in assessment.

- a) Any portfolio not demonstrating the criteria applied for is moderated
- b) Random selection of 7% of competent level portfolios are moderated annually
- c) Every successful 7th RN/EN proficient, RN expert, RN Senior and EN accomplished portfolio presented is moderated
- d) All NETP Programme portfolios are moderated at the end of the programme
- e) External moderation of a selection of portfolios occurs every year by PDRP coordinators from other DHB's

When the applicant completes the application letter and submission of a portfolio they agree to their portfolio being involved in moderation.

After assessment, portfolios must be available within two weeks of request by the Nurse Coordinator – Professional Development for moderation.

In case of moderation, all documents must be left in the portfolio unless replaced by an updated version.

Moderation and Auditing of PDRP Programme

An evaluation of the programme is undertaken every five years. This includes feedback from nurses participating in the programme.

Auditing of the programme is routinely undertaken by NCNZ.

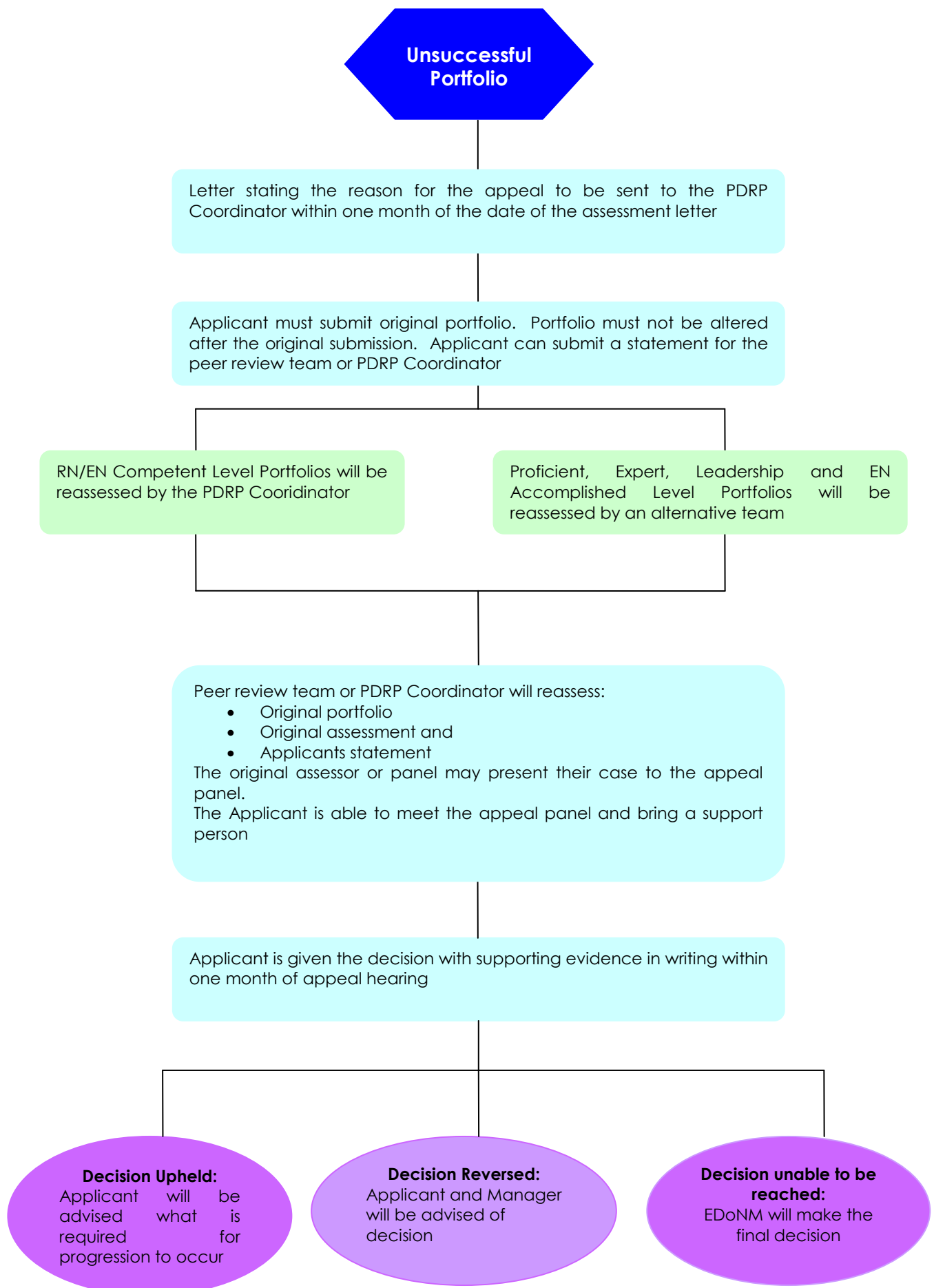
SECTION VII: APPEAL PROCESS

Appeal Process – Unsuccessful Portfolio

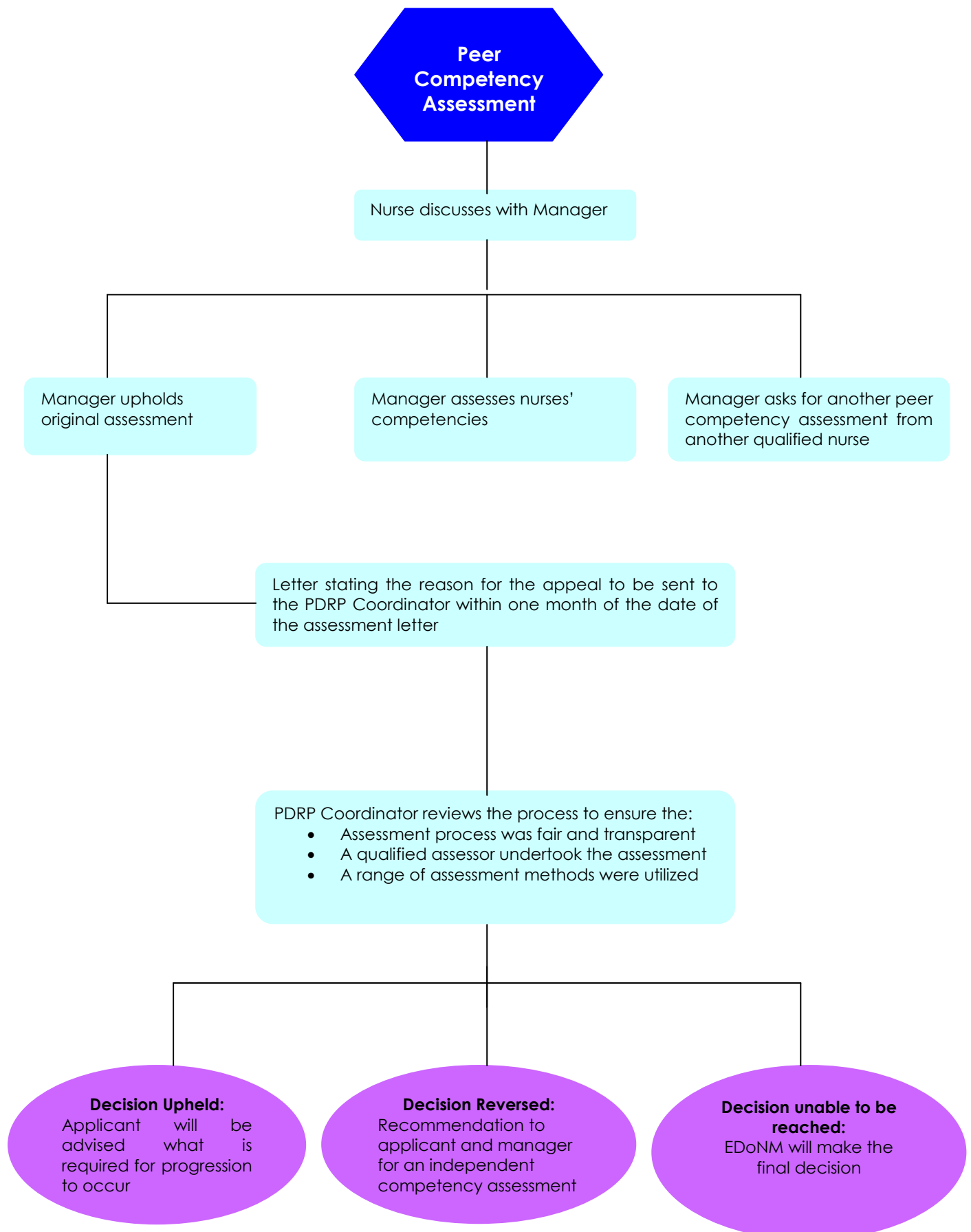
If the application is unsuccessful, the applicant can appeal the decision. A letter stating the reasons for appealing must be sent to the PDRP Coordinator within **one month** of the date of the assessment letter. The one copy of the original portfolio must be sent with the letter.

1. Competent level portfolios will be reassessed by the PDRP Coordinator
2. Proficient, Expert, Leadership and Accomplished portfolios will be reassessed by an Appeal Panel. This will be a different panel to the original one.
3. The PDRP Coordinator/Appeal Panel only considers portfolio evidence as originally submitted. Portfolios must not be altered after original submission.
4. The applicant may attend in order to present the grounds of the appeal to the Appeal Panel. They may bring a support person.
5. The Appeal Panel will consider the applicant's original portfolio, the assessment tool from the original assessment and the applicant's statement in regard to the appeal. The original assessor/panel may present their case directly to the Appeal Panel. The PDRP Coordinator/Appeal Panel's aim is to decide if the original decision is to be upheld or not. If it is upheld, the panel will advise the applicant what is required for progression to occur.
6. The Applicant is given the decision with supporting evidence in writing within 1 month of the appeal hearing.
7. If the applicant still disagrees with the decision they can apply in writing to the EDoNM for review within 1 month from the receipt of the appeal hearing decision. The decision of the EDoNM will be final.

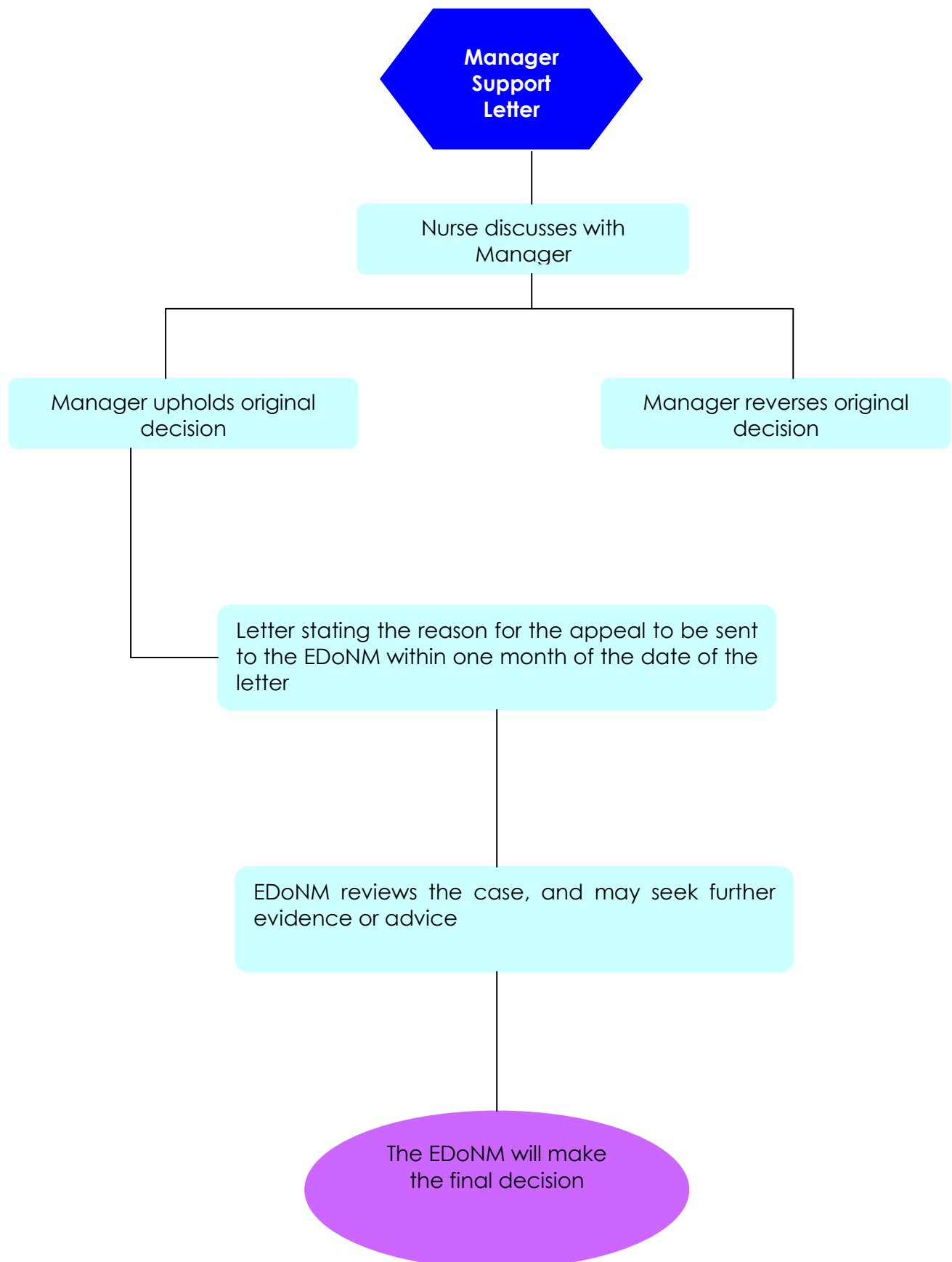
Appeals Process – Unsuccessful Portfolio Flowchart



Appeal Process –Competency Assessment Flowchart



Appeal Process – Manager Support Letter Flowchart



HANDBOOK REFERENCES

Benner P. (1984). *From Novice to Expert.*, California, Addison Wesley

Capital and Coast DHB, (2007). *Nursing and Midwifery standards and criteria of care and professional practice.* Wellington.

Health Practitioners Competence Assurance Act, New Zealand Government, Wellington, 2003.

National Nursing Organisation. (2005). *National framework for nursing professional development & recognition programmes & designated role titles.* Wellington.

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Nursing Council of New Zealand. (2008). *Framework for Approval of PDRP Programmes*, Wellington.

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APPENDIX - NATIONAL FRAMEWORK RN LEVELS FOR PDRP

Graduate Registered Nurse

- Is a newly Registered Nurse with a practising certificate
- Develops partnerships with clients that implement Te Tiriti o Waitangi in a manner which the client determines as culturally safe
- Is a multi-skilled beginner nurse with theoretical and practical student experiences
- Is reliant on learning from the experience of other nurses for his/her own experience
- Learns from appropriate allocated tasks
- Is able to manage and prioritise assigned patient/client care/workload with some guidance
- Is guided by procedures, policies and protocols
- Learns and is developing confidence from practical situations

The Competent Registered Nurse

- Develops partnerships with clients that implement the Te Tiriti o Waitangi in a manner which the client determines as culturally safe
- Effectively applies knowledge and skills to practice
- Has consolidated nursing knowledge in their practice setting
- Has developed an holistic overview of the client
- Is confident in familiar situations
- Is able to manage and prioritise assigned client care/workload
- Demonstrates increasing efficiency and effectiveness in practice
- Is able to anticipate a likely outcome for the client with predictable health needs
- Is able to identify unpredictable situations, act appropriately and make appropriate referrals

The Proficient Registered Nurse

- Participates in changes in the practice setting that recognise and integrate the principles of Te Tiriti o Waitangi and cultural safety
- Has an holistic overview of the client and the practice context
- Demonstrates autonomous and collaborative evidence based practice
- Acts as a role model and a resource person for other nurses and health practitioners
- Actively contributes to clinical learning for colleagues
- Demonstrates leadership in the health care team
- Participates in changes in the practice setting
- Participates in quality improvements in the practice setting

- Demonstrates in-depth understanding of the complex factors that contribute to client health outcomes

The Expert Registered Nurse

- Guides others to implement culturally safe practice to clients and apply the principles of Te Tiriti o Waitangi
- Contributes to specialty knowledge
- Acts as a role model and leader
- Demonstrates innovative practice
- Is responsible for clinical learning/development of colleagues
- Initiates and guides quality improvement activities
- Initiates and guides changes in the practice setting
- Is recognised as an expert in her/his area of practice
- Influences at a service, professional or organisational level
- Acts as an advocate in the promotion of nursing in the health care team
- Delivers quality client care in unpredictable challenging situations
- Is involved in resource decision making/strategic planning and acts as a leader for nursing work unit/facility.

APPENDIX - NATIONAL FRAMEWORK EN LEVELS FOR PDRP

The Competent Enrolled Nurse/Nurse Assistant

- Under the direction of the Registered Nurse, contributes to assessment, planning, delivery and evaluation of nursing care
- Develops partnerships with clients that implement Te Tiriti o Waitangi in a manner which the client determines is culturally safe
- Applies knowledge and skills to practice
- Has developed experiential knowledge and incorporates evidence-based nursing
- Is confident in familiar situations
- Is able to manage and prioritise assigned client care/workload appropriately
- Demonstrates increasing efficiency and effectiveness in practice
- Responds appropriately in emergency situations

The Proficient Enrolled Nurse/Nurse Assistant

- Develops partnerships with clients that implement Te Tiriti o Waitangi in a manner which the client determines is culturally safe
- Has an in-depth understanding of Enrolled Nurse/Nurse Assistant practice
- Utilises broad experiential knowledge and evidence-based knowledge to provide care
- Contributes to the education of Enrolled Nurse/Nurse Assistant students, new graduate Enrolled Nurses/Nurse Assistants, care givers/healthcare assistants, competent and proficient Enrolled Nurses/Nurse Assistants
- Acts as a role model and leader to their peers
- Demonstrates increased knowledge and skills in a specific clinical area
- Is involved in service, professional or organisational activities
- Participates in change

The Accomplished Enrolled Nurse/Nurse Assistant

- Develops partnerships with clients that implement Te Tiriti o Waitangi in a manner which the clients determine is culturally safe
- Demonstrates advancing knowledge and skills in a specific clinical area within the Enrolled Nurse/Nurse Assistant scope
- Contributes to the management of changing workloads
- Gains support and respect of the health care team through sharing of knowledge and making a demonstrated positive contribution
- Undertakes an additional responsibility within a clinical/quality team, e.g.

resource nurse, health and safety representative, etc.

- Actively promotes understanding of legal and ethical issues
- Contributes to quality improvements and change in practice initiative
- Acts as a role model and contributes to leadership activities

FORMS AND ASSESSMENTS

All the following forms and assessment tools are available to download from the Wairarapa and Hutt Valley DHB's intranet sites and the external Wairarapa and Hutt Valley DHB's website.

PDRP Requirements:

- Competent EN portfolio requirements
- Proficient EN portfolio requirements
- Accomplished EN portfolio requirements
- Competent RN portfolio requirements
- Proficient RN portfolio requirements
- Expert RN portfolio requirements
- Senior RN portfolio requirements

Self & competency assessment forms:

- Competent EN self & competency assessment form
- Proficient EN self & competency assessment form
- Accomplished EN self & competency assessment form
- Competent RN self & competency assessment form
- Proficient RN self & competency assessment form
- Expert RN self & competency assessment form
- Senior RN self & competency assessment form

Other forms:

- Application letter
- Professional development plan
- Professional development reflection
- Professional development list
- Education session plan
- Education session evaluation
- Manager support letter
- Transfer letter
- Application for educational equivalence

Portfolio Assessment Tools (PAT):

- Competent EN - PAT
- Proficient EN - PAT
- Accomplished EN - PAT
- Competent RN – PAT
- Proficient RN – PAT
- Expert RN – PAT
- Senior RN - PAT