

Competency Review

TOOL

**For Nurse
Administrators
2007**



COLLEGE OF NURSES
OF ONTARIO
ORDRE DES INFIRMIÈRES
ET INFIRMIERS DE L'ONTARIO

THE STANDARD OF CARE.

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Overview of the College's Quality Assurance Program and Practice Review

The College of Nurses of Ontario developed its Quality Assurance (QA) Program to support nurses in their pursuit of life-long learning and continuous improvement. The goal of the program is to help nurses to maintain their competence throughout their careers.

The QA Program also fulfils the College's legislative requirements. The *Regulated Health Professions Act* (RHPA) mandates that health regulatory colleges in Ontario have a quality assurance program to ensure the ongoing competence of its members. This includes providing feedback, identifying opportunities for practice improvement, and randomly assessing practice competence.

The College's QA Program has two components.

Reflective Practice is the annual requirement for all nurses to complete a self-assessment, obtain peer feedback, develop a learning plan, implement the learning plan, and then evaluate their learning. Reflective Practice ensures nurses engage in life-long learning to maintain their competence in today's rapidly changing health care environment.

Practice Review is a three-step process: a written assessment called the Practice Review Written Assessment (PRWA); a behaviour based assessment; and remediation to address any issues identified in the assessment process. Nurse administrators, randomly selected to participate in Practice Review are required to complete Step 1. If successful, they will exit Practice Review. However, if more information is needed, they will be required to complete Step 2. Only if serious practice concerns remain will nurses enter Step 3.

Practice Review for nurse administrators is an objective assessment of a nurse administrator's ongoing practice competence in relation to a set of competencies and administrator behaviours that have been identified as essential for safe, effective, and ethical nursing care.

Each year a number of nurse administrators are randomly chosen to participate in Practice Review.

For more information on the components of the Quality Assurance Program, see the QA fact sheet on the College Web site www.cno.org, use the FastFax service at 1 877 963-7502, or contact the College.

What is the Competency Review Tool?

The Competency Review Tool (CRT) assists nurse administrators to prepare for Practice Review. By completing the tool, nurses will be able to assess their knowledge of the RN competencies essential for safe, effective and ethical nursing practice. The tool helps nurse administrators to reflect on how they demonstrate these basic RN competencies.

Who Can Benefit From Using The Competency Review Tool?

This tool is useful for nurses who:

- 1) have been selected to participate in Practice Review for nurse administrators;
- 2) are using it to help meet their Reflective Practice self-assessment requirements; or
- 3) want to assess their practice according to ongoing practice competencies.

Does my completed Competency Review Tool need to be sent to the College?

No. The tool is a self-assessment device for your use only.

What are competencies?

Competencies are statements describing behaviours that RN nurse administrators believe are important for providing safe, effective, and ethical care. They reflect the practice expectations described in the College's Standards of Practice, and the professional attributes required in a given nursing role, situation or practice setting. Professional attributes include, but are not limited to, knowledge, skill, judgement, values and beliefs.

How were the competencies developed?

The *Regulated Health Professions Act* (1991) stipulates that all health regulatory colleges in Ontario must have a program in place to assess the ongoing competence of its members, in order to assure the public of the same. To do this, the College needed to first determine what specific competencies were essential for ongoing safe, effective and ethical nursing practice.

The RN and RPN competencies are based on the College's practice standards, and were identified by expert groups of nurses, from around the province, as being fundamental for safe, effective, and ethical nursing practice. The RN competencies were then reviewed and rated by nurse administrators as being critical for safe and effective care.

These competencies **do not represent an exhaustive list of all the competencies needed by nurse administrators in their individual practice settings**. However, they are standards-based and general, and are therefore applicable to all nurse administrators regardless of their specialty area, client population, or category of staff reporting to them.

What College standards are the competencies based on?

The competencies are based on the following College practice standards and guidelines:

- Restraints
- Decisions About Procedures and Authority
- Culturally Sensitive Care
- Documentation
- Consent
- Working with Unregulated Care Providers
- Infection Prevention and Control
- Medication

- Professional Standards (Revised 2002)
- Resuscitation (Revised 1999)
- Therapeutic Nurse-Client Relationship
- Disagreeing with the Multidisciplinary Plan of Care
- Ethics
- RHPA: Scope of Practice, Controlled Acts Model
- Utilization of RNs and RPNs

How is the Competency Review Tool structured?

The tool is divided into five broad categories. Each category contains a number of competency statements. The user indicates whether she/he is knowledgeable about and demonstrates the competency, or needs to learn more about the competency.

The RN competency categories are:

1. Professional Behaviour/Ethics

RNs are accountable to the public and responsible for ensuring that their practice and conduct meet legislative requirements and the standards of the profession. This includes promoting client well-being; ensuring and respecting client choice in decision making; assuring privacy and maintaining confidentiality; respecting sanctity and quality of life; and maintaining a commitment to the client, self, profession, and employer.

2. Critical Thinking, Research and Leadership

RNs use critical thinking to problem-solve when assessing and managing client responses to various health conditions. Critical thinking is integral to good decision-making, and includes the activities of organizing and analyzing information, and gathering evidence to support the conclusions drawn. RNs use research to ensure their practice is current and consistent with best-practice evidence. This involves questioning and appraising information, and exercising judgement when integrating new knowledge into practice. Leadership is demonstrated when nurses identify situations that compromise safe, effective, ethical care, and advocate for changes to support the well being of clients.

3. Client and Nurse Safety/Illness and Injury Prevention

RNs are responsible for enabling clients and colleagues to avoid illness and injury by: taking measures to prevent injury; responding to safety risks to clients and health care team members; challenging questionable actions and orders; and intervening appropriately in situations of risk.

4. Relationships/Caring

The therapeutic nurse-client relationship is based on trust, respect, intimacy and the appropriate use of power. A professional therapeutic relationship involves establishing and maintaining appropriate boundaries and recognizing when the relationship crosses therapeutic boundaries. RNs are also required to interact with other health care providers. These relationships must also be professional.

5. Clinical Skills

RNs are accountable for demonstrating competence in their area of practice. For nurse administrators, this requires having the knowledge and skills needed to perform thorough client assessments, perform interventions safely, and document according to College standards. Knowledge and application of basic principles and expectations of medication administration is included as a specific clinical skill on the Competency Review Tool. While not all nurse administrators administer medications as part of their practice, all RNs are expected to have knowledge of medications as it relates to the overall care of their clients.

Competency Statements

The competencies are listed as statements designed to facilitate reflection and self-assessment. Under each statement are **examples** of how the competency **may** be demonstrated in practice. The examples are for clarification. They do not represent all the possible ways the competency can be demonstrated in practice. RN nurse administrators are encouraged to reflect on how each competency is demonstrated in their own day-to-day practice. It may be helpful to discuss with colleagues how the competencies apply to a specific practice setting.

Assessment Checklist

A simple assessment checklist has been included to help nurse administrators identify which RN competency they are confident they demonstrate.

How do I use the Competency Review Tool?

1. Carefully read each competency statement and think of examples of how you demonstrate the competency in your practice. You do not need to write out your examples.
2. If you are unclear about the meaning of the statement, read the examples for clarification. The examples are not exhaustive of all possible ways in which the competency can be demonstrated in practice. Think about examples relevant to your own practice setting and RN administrator role. It may be helpful to discuss this with colleagues.
3. Check the appropriate column beside each competency statement to indicate whether you are knowledgeable about, the RN competency in your practice, or you need to learn more about the RN competency.

While the competencies are broad and applicable to all nurses, some may not be applicable in all practice settings. For example, Competency 1 in category 3 — “I apply knowledge related to the appropriate use of restraints as per the College practice standards and my employers’ policy” — may not be applicable to a public health nurse administrator. However, **all** nurse administrators are expected to have at least general knowledge of College standards, and more comprehensive or specific knowledge as is appropriate for their practice setting.

4. After reflecting on and rating each competency, review your responses and note which competencies you need to learn more about.

Consider incorporating any or all of your learning needs into your annual Reflective Practice self-assessment and learning plan. It is important to note that this tool is designed primarily to help nurse administrators prepare for Practice Review. While it can provide a supplemental method/tool for helping nurse administrators meet their Reflective Practice self-assessment requirements, used alone it will **not** provide a comprehensive assessment of specialty practice or unique role. Nurse administrators should still consider other means against which to assess themselves such as the Self-Assessment Tool (nurse administrator section), role descriptions, specialty area practice standards and guidelines, and the agency performance appraisal tools.

Category 1

Professional Behaviour/Ethics

I am knowledgeable & demonstrate this competency	I need to learn more about this competency	Competency
<input type="radio"/>	<input type="radio"/>	<p>1. I consider and respect client diversity (e.g. race, gender, culture, sexual orientation, age, spirituality, beliefs and values).</p> <p>Examples: I identify client beliefs; I identify client goals and incorporate them into the plan of care; I treat all clients equally; I respect clients' individuality.</p>
<input type="radio"/>	<input type="radio"/>	<p>2. I recognize my values and the influence they may have on client care.</p> <p>Examples: I identify when my values conflict with those of clients or staff; I support clients in their health care choices; I ensure clients receive effective care even when values conflict.</p>
<input type="radio"/>	<input type="radio"/>	<p>3. I use knowledge and skill to advocate for clients' best interests.</p> <p>Examples: Client wishes are included in care planning; I work with the health care team to ensure clients' needs are met; I communicate clients' wishes to the health team; I intervene when discrepancies occur between the plan of care and clients' wishes.</p>
<input type="radio"/>	<input type="radio"/>	<p>4. I advocate for client's decisions regarding supportive and palliative measures.</p> <p>Examples: I respect clients' values; I explore and implement their wishes within the obligations of the law and standards of practice; I communicate their wishes to all members of the team; I document their wishes.</p>
<input type="radio"/>	<input type="radio"/>	<p>5. I provide support and protection for clients who have difficulty protecting themselves from abuse by others and from self.</p> <p>Examples: I identify clients at risk of harm from themselves and/or others; I implement safety measures to protect clients; I intervene to stop abuse; I report sexual abuse as required by law (sexual abuse of children, or by health care providers).</p>
<input type="radio"/>	<input type="radio"/>	<p>6. I promote client's right to informed choice and facilitate the client's responsibility for self-care.</p> <p>Examples: I ensure clients have relevant information to make informed health care decisions; I communicate client choices to all relevant health care team members; I intervene when I believe clients choices have not been fully informed.</p>
<input type="radio"/>	<input type="radio"/>	<p>7. I assess clients'/substitute decision maker's ability to be involved in decision making.</p> <p>Examples: I recognize when clients are unable to make care decisions; I identify the substitute decision-maker by following legislation and standards of practice.</p>

Competency	I am knowledgeable & demonstrate this competency	I need to learn more about this competency
<p>8. I get client's consent for nursing care according to current legislation and standards.</p> <p>Examples: I ensure clients are informed about care options; I assess client's ability to give an informed consent; I follow the College's practice standard <i>Consent</i> when she/he is unable to make an informed consent; I document my clients' consent.</p>	<input type="radio"/>	<input type="radio"/>
<p>9. I ensure my clients rights to privacy and confidentiality.</p> <p>Examples: I discuss clients only with appropriate health team members; I do not collect information that is unnecessary for health care; I obtain the clients' consent before sharing information; I protect the confidentiality of client information; I maintain client privacy while providing nursing care.</p>	<input type="radio"/>	<input type="radio"/>
<p>10. I accept accountability for my actions, decisions.</p> <p>Examples: I practice in accordance with legislation and standards of practice; I can provide rationale for my actions and decisions; I know my responsibilities in relation to working with others; I assume responsibility for my errors and intervene appropriately to ensure client safety; I continually reflect on, and seek to improve, my practice.</p>	<input type="radio"/>	<input type="radio"/>
<p>11. I recognize the limitations of my practice and seek assistance as necessary.</p> <p>Examples: I can identify current knowledge and skills relevant to my scope of practice; I identify knowledge and skills needed to improve my practice; I obtain peer feedback; I meet my identified learning needs; I consult with others when I reach the limits of my knowledge and skill.</p>	<input type="radio"/>	<input type="radio"/>
<p>12. I advocate for, and participate in the development of policies and protocols relating to client care and the health care environment.</p> <p>Examples: I bring forward ideas to improve the quality of care; I advocate for changes to policies and standards to promote quality care; I represent nursing on committees to promote quality client care.</p>	<input type="radio"/>	<input type="radio"/>
<p>13. I exercise professional judgement in decision making.</p> <p>Examples: I determine the actions to be performed; I assess the risks and benefits of the required actions based on the situation; I can provide a rationale for my decisions; I consult others as needed; I advocate for protocols as needed; I base my practice on current accepted research.</p>	<input type="radio"/>	<input type="radio"/>
<p>14. I am familiar with and practice in a manner consistent with my scope of practice, the College's <i>Professional Standards (Revised 2002)</i>, and relevant legislation.</p> <p>Examples: I am aware of how standards and legislation relate to my practice; I know how to access standards; I keep up-to-date regarding standards and legislation; I seek clarification and guidance as needed to interpret standards and legislation.</p>	<input type="radio"/>	<input type="radio"/>

Category 2

Critical Thinking, Research, and Leadership

I am knowledgeable & demonstrate this competency	I need to learn more about this competency	Competency
<input type="radio"/>	<input type="radio"/>	<p>1. I act as a role model, mentor, resource or support person.</p> <p>Examples: I teach and guide students, colleagues, clients and staff; I evaluate the effectiveness of orientation/educational programs and recommend changes if necessary; I direct clients/ colleagues/ students/ Regulated Care Providers and Unregulated Care Providers.</p>
<input type="radio"/>	<input type="radio"/>	<p>2. I share knowledge, skills, and experiences with colleagues, students, clients and staff.</p> <p>Examples: I identify and facilitate relevant learning opportunities; I have an approachable and receptive attitude; I am identified as a preceptor/ mentor.</p>
<input type="radio"/>	<input type="radio"/>	<p>3. I demonstrate knowledge of self-regulation and the role of CNO, and how it differs from that of professional nursing organizations and unions e.g. RPNAO, RNAO, ONA.</p> <p>Examples: I understand the principles of self-regulation and CNO's role in self-regulation; I understand my accountabilities as a member of a self-regulating profession; I know how to access CNO for assistance with nursing practice issues; I understand the mandate of various nursing organizations.</p>
<input type="radio"/>	<input type="radio"/>	<p>4. I assign or delegate aspects of care appropriately.</p> <p>Examples: I understand the difference between assigning and delegating as outlined in the RHPA; I understand my responsibilities when assigning or delegating aspects of care; I ensure work is appropriately distributed; I am aware of the scope of my role and my collaborative role with others; I can give a clear rationale for my decisions in workload distribution/staff assignments.</p>
<input type="radio"/>	<input type="radio"/>	<p>5. I provide direction to Unregulated Care Providers (UCPs) as per the College's guidelines <i>Working with Unregulated Care Providers</i>.</p> <p>Examples: I understand the criteria for assigning care to UCPs; I teach appropriately and determine competence; I provide appropriate supervision based on client conditions, nature of procedures and the degree of competence of the UCP.</p>
<input type="radio"/>	<input type="radio"/>	<p>6. I supervise students, UCPs and others appropriately.</p> <p>Examples: I provide the appropriate degree of either direct or indirect supervision; I am prepared to intervene in a procedure if necessary; I communicate supervision needs clearly; I monitor the clients' condition to ensure appropriateness of assignment and ensure client safety; I know that the student or UCP has been deemed competent (as per agency policy); I ensure the student or UCP knows when to seek assistance.</p>

Competency

I am knowledgeable & demonstrate this competency

I need to learn more about this competency

7. I use principles of effective conflict resolution.

Examples: I can identify conflict and take initiative to resolve it; I discuss and clarify issues around conflict; I collaborate with others to resolve conflict; I identify strategies for conflict resolution; I intervene to ensure a safe environment.

8. I participate effectively in the change process.

Examples: I identify and support change initiatives; I verbalize my concerns and possible solutions appropriately and professionally; I support others through change.

9. I use problem-solving skills when responding to critical and ongoing situations.

Examples: I identify problems based on client condition; I determine if the problem is within my scope of practice; I decide appropriate nursing actions considering possible risks and benefits; I consult and collaborate with appropriate health care providers as necessary.

10. I prioritize appropriately according to the urgency of client problems, workload etc.

Examples: I organize care appropriately; I monitor for changing needs and reprioritize on an ongoing basis; I determine the level of urgency of multiple situations; I manage multiple priorities.

11. I base my practice on current, accepted research.

Examples: I am aware of current research and how it relates to my practice area; I read and critique research articles and reports; I identify nursing practices that are not supported by current research, and advocate for change in practices; I share my knowledge of current research with peers and the health care team; I integrate current research into my practice appropriately.

Category 3

Client and Nurse Safety/Illness and Injury Prevention

I am knowledgeable & demonstrate this competency	I need to learn more about this competency	Competency
<input type="radio"/>	<input type="radio"/>	<p>1. I apply knowledge related to the appropriate use of restraints as per the College’s practice standard and my employers’ policy.</p> <p>Examples: I understand the College’s policy of “least restraint”; I am aware of the complications associated with restraint use; I advocate for least restraint practices in my work setting; I am familiar with the appropriate use of any mechanical, chemical, or environmental restraints used in my setting; I closely monitor and reassess the continued need for restraint.</p>
<input type="radio"/>	<input type="radio"/>	<p>2. I respond appropriately to discrepancies and errors.</p> <p>Examples: I identify and take appropriate action to correct discrepancies and errors; I collaborate with other health care team members regarding discrepancies and errors; I report and document appropriately.</p>
<input type="radio"/>	<input type="radio"/>	<p>3. I challenge and act on questionable actions, orders and decisions made by other health care team members.</p> <p>Examples: I identify and question discrepancies in patient-care orders; I identify and address questionable actions, orders, behaviours and decisions with the appropriate team member; I identify potential and actual situations of client risk; I take action to ensure client safety; I report and document situations and outcomes to the appropriate authority in an objective and timely manner.</p>
<input type="radio"/>	<input type="radio"/>	<p>4. I demonstrate an awareness of health and safety issues as they relate to my workplace and respond to safety issues appropriately.</p> <p>Examples: I can identify unsafe practices or situations in the workplace; I respond effectively to safety issues and advocate for change; I report and document unsafe practices and other safety issues.</p>
<input type="radio"/>	<input type="radio"/>	<p>5. I apply knowledge of <i>Infection Prevention and Control</i> as per the College’s practice standard, employer policies and government directives.</p> <p>Examples: I take appropriate action at all times to minimize the risk of infection or spread of disease; I educate others about infection prevention and control methods.</p>

Category 4

Relationships and Caring

Competency	I am knowledgeable & demonstrate this competency	I need to learn more about this competency
<p>1. I communicate effectively with clients and team members by using a range and variety of communication skills.</p> <p>Examples: I listen to clients and staff without diminishing their feelings or immediately giving advice; I am aware of the non-verbal messages between myself and others; I provide opportunities for others to ask questions; I explore unusual comments, attitudes or behaviour of colleagues to discover the underlying meaning; I demonstrate a caring attitude by expressing warmth, interest, and empathy.</p>	○	○
<p>2. I change my communication strategies in response to the client's situation.</p> <p>Examples: I assess clients' and staff's responses to situations; I use appropriate communication strategies to respond professionally.</p>	○	○
<p>3. I use effective communication skills with other health care team members.</p> <p>Examples: I communicate information in a professional, confidential and concise manner; I take initiative to resolve conflicts; I report information in a timely manner; I clarify information sent and received.</p>	○	○
<p>4. I establish and maintain collaborative relationships with my clients and colleagues.</p> <p>Examples: I am aware of the concepts of trust, respect, intimacy, and appropriate use of power and how these impact therapeutic relationships; I identify and respect client goals, values and expectations; care planning is based on mutually set goals; I ensure clients and colleagues understand the role of the nurse.</p>	○	○
<p>5. I establish and maintain a caring relationship with clients and staff.</p> <p>Examples: I demonstrate warmth, respect, empathy, trust, and honesty with clients, staff and colleagues; I treat clients and staff with dignity and acceptance; I demonstrate commitment and compassion; I ensure the therapeutic boundaries of the relationships are maintained.</p>	○	○
<p>6. I am aware of the effect of a power imbalance on relationships.</p> <p>Examples: I know clients may perceive the nurse as having power or control over them; I am careful not to coerce, manipulate or withhold care from clients; I report incidents of inappropriate behaviour as per the College's standards for the <i>Therapeutic Nurse-Client Relationship</i> and <i>Ethics</i>.</p>	○	○

I am knowledgeable & consistently demonstrate in my practice

I need to learn more and/or enhance in my practice

Competency



7. I maintain a distinction between professional and social interactions.

Examples: All my interactions with clients or staff are for the purpose of meeting their needs; I am aware of and practice effectively within the boundaries of the therapeutic nurse/client relationship; I maintain a professional relationship with all health care team members.



8. I terminate relationships in a way that reflects an understanding of client needs and goals.

Examples: I review the plan of care to decide if client goals have been met; I identify resources needed to reach unmet needs; I terminate client relationships in a way that protects the safety and well being of clients.



9. I develop partnerships with nursing and healthcare team members recognizing the contributions each team member makes.

Examples: I acknowledge the expertise of each member of the health care team; I utilize team members effectively; I encourage and respect the contribution of all health care team members.



10. I collaborate with healthcare team members to reach client outcomes.

Examples: I work with the health care team to ensure optimal outcomes are reached; I collaborate and use resources to address challenging client situations.



11. I maintain a collaborative relationship with individuals and organizations that provide services to clients.

Examples: I can identify the supports required by clients; I am aware of the relevant resources in the community; I facilitate client access to supports and organizations as needed; I teach clients about available resources.

Category 5

Clinical Skills

Competency	I am knowledgeable & consistently demonstrate in my practice	I need to learn more and/or enhance in my practice
<p>1. I use a variety of techniques to collect data pertinent to the client and situation from clients.</p> <p>Examples: I determine the right data collection method based on the client's condition (e.g. interviewing, listening, consulting, auscultating, percussing, observing, palpating, inspecting, monitoring, measuring); I look for, and interpret, patterns and trends in client presentation and information.</p>	○	○
<p>2. I refine and extend my assessment by collecting data from a variety of sources pertinent to the client and situation.</p> <p>Examples: I collect data from the client, family, other health team members and relevant documentation; I identify and incorporate other factors that affect health such as income, social status, education, employment, and work conditions; I use identified patterns/trends to direct further assessment needs; I synthesize and analyze data from a variety of sources to make care decisions.</p>	○	○
<p>3. I assess client's learning needs.</p> <p>Examples: I identify learning needs taking into account readiness and language issues; I implement nursing interventions to meet the learning deficit/need.</p>	○	○
<p>4. I validate the data I collected.</p> <p>Examples: I review and analyze data collected; I ensure the accuracy of data and continually reassess data I collect; I collaborate with other team and family members; I modify the plan of care accordingly.</p>	○	○
<p>5. I consider the relevance of data collected in the context of client priorities and perspective.</p> <p>Examples: I use client data, knowledge of best practices and the situation to determine appropriate actions; I assess clients' perception of their health needs.</p>	○	○
<p>6. I identify and prioritize nursing interventions.</p> <p>Examples: I prioritize client needs from collected data; I create a plan of care based on client priorities; I develop a written plan of care in collaboration with the client and other team members; I identify nursing interventions to meet actual or potential client needs and problems; I modify the plan of care based on actual or potential problems.</p>	○	○
<p>7. I use teaching and learning principles effectively.</p> <p>Examples: I assess client's readiness to learn; I select teaching strategies appropriate to client age, learning style, readiness and comprehension; I collaborate with clients to develop a learning plan by prioritizing time, appropriateness of information, and desired outcomes.</p>	○	○

I am knowledgeable & consistently demonstrate in my practice

I need to learn more and/or enhance in my practice

Competency



8. I plan for discharge where appropriate.

Examples: I assess discharge needs with clients; I refer clients to appropriate resources prior to discharge; I review the discharge plan or needs with the clients.



9. I evaluate outcomes in collaboration with the client and health care team members.

Examples: I evaluate outcomes of nursing interventions; I ensure expected outcomes for clients have been met; I try alternative interventions for outcomes not met by clients.



10. I administer medications as per the College's practice standard *Medication*.

Examples: I am knowledgeable about medications used by clients in my practice setting; I assess the appropriateness of medications I administer or are used by clients; I assess ordered medications for appropriateness, benefits and risks before administering to clients; I hold and question medications as needed based on my knowledge and assessment; I administer and store medications safely; I assess client outcomes related to medications I administer; I document as appropriate; I provide teaching to clients regarding medications.



11. I document according to the College's practice standard *Documentation*.

Examples: I document the event, action or assessment accurately, truthfully and in a timely manner; I document in a non-judgmental fashion; I document the date and time of the entry and date and time care was provided; I document forgotten or late entries at the next available entry space; I document in a factual, organized manner; My documentation reflects my contribution to the care of clients; My documentation communicates a consistent understanding of the clients' health status and needs to all health care team members; I sign my documentation using both my name and professional designation.



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