



Expert RN Portfolio

Please replace the details below with your Name, Workplace and Month/Year of submission.

NAME

Workplace

Month Year





Expert RN Portfolio Contents

- a) Application Letter signed
- b) Copy of current CV or resume
- c) Copy of entry on online NCNZ register showing current APC
- d) Current Performance Appraisal eg. Mo Tatou (within the last 12 months) signed
- e) Self Assessment Expert level against the NCNZ competencies signed
- f) Senior Nurse Assessment Expert level against the NCNZ competencies signed
- g) Manager Support Letter completed supporting Expert and signed
- h) Professional Development Plan OR Career plan
- i) Evidence of 450 practice hours over last 3 years validated & signed by manager
- j) Evidence of 60 Professional Development Hours over past 3 years including evidence of Code of Conduct training since 2012 validated & **signed** by manager
- k) Reflections on three Professional Development activities

Expert Requirements

- a) Evidence of contribution to specialty knowledge **OR** innovation in practice and the change process in quality improvement activities.
- b) Evidence demonstrating responsibility for the learning and/or development of colleagues.
- Evidence demonstrating engagement and influence in wider service, professional or organisations activities.
- d) Evidence demonstrating expert knowledge and application of expert practice in care of complex patients and clinical leadership in care coordination.

Expert RN's should demonstrate the integration of acquired nursing knowledge into nursing practice throughout their Portfolio. Expert portfolios should therefore include integration of current literature and evidence based practice, using APA referencing.





Application Letter

		Please	e complete all secti	ons below			
	(please note,	vith the exception of Graduate Nu	rses, certificates are iss	ued to Proficie	nt, Expert a	and Accomplished I	level only)
Nam	e:						
as you	want it to appe	on your certificate (please print clea	rly in this box):				
APC	Number			Expiry Dat	e:		
Worl	(place:						
Mana	ager Name:			Managers Title:			
This	portfolio is f	or (please circle or delete):	Enrolled Nurse	l	Registere	d Nurse	
This	portfolio is f	or (please circle or delete):	Competent Prof	icient Ex	opert A	Accomplished	DSN
		Declaratio	on <i>(Please tick d</i>	all applica	able)		
		at the documents in this po iately referenced				om papers, jour	nals or books,
	I declare that where I have submitted joint work, I have fairly and accurately described my personal contribution						
		eclare that the enclosed work (related to practice situations) has occurred in the previous three years and lates to the current competencies of my scope of practice					
	I am prepared to provide authentication data confidentially to the moderator or assessment panel of required						
	I understand this material remains confidential to the assessor(s) unless covered under the Health Practitioners Competence Assurance Act 2003						
	I am aware that my portfolio may be subject for use in the moderation process, internal, external or as directed by the New Zealand Nursing Council and I will make my portfolio available within 2 weeks if required for moderation						
	I understand than none of my work will be used for any other purpose unless it has my specific consent						
	I declare th	at this portfolio represents a	consistent demon	stration of n	ny practic	e	
Signo	Signature: Date:						





Please remove this page and insert a copy of your CV/resume.





Please remove this page and insert a print out of your Nursing Council of New Zealand registrations entry from:

www.nursingcouncil.org.nz

Click the link above to visit the NCNZ website, enter your APC number into the *Search the Register* box, click on your name and print the page.





Please remove this page and insert a signed copy of your Annual Performance Appraisal.

For example:

- Wairarapa DHB's Mo Tatou Performance Review
- Your organisations performance review document

This must be less than 12 months old at the time of submission.





Self and Competency Assessment of NCNZ Competencies for Expert Registered Nurse

For use when applying for progression on the Expert Registered Nurse PDRP Level **or** when completing the three yearly performance reviews for maintenance of Expert Registered Nurse PDRP level and to meet NCNZ Continuing Competency Requirements

Self and Senior Nurse Assessment Process:

- a) Applicant must complete the self-assessment prior to competency assessment
- b) Self-assessment must reflect the national PDRP framework for Expert level of Competence (see your DHB's PDRP Handbook for details)
- c) Individual examples of practice must be verified by a Registered Nurse or the senior nurse assessor
- d) Examples of practice must be within the previous 12 months
- e) The Senior Nurse Assessor must:
 - Have a current APC
 - Hold a senior nurse title (e.g CNM, ACNM, CNE) or the Manager can delegate to a senior RN
 who is a Proficient, Expert or Designated Senior nurse on the PDRP Pathway or in the case of
 primary care a delegate senior nurse
 - Have 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

Details of Applicant
Name:
APC number:
APC Expiry:
Workplace:
PDRP Level:
Role:

Details of Senior Nurse Assessor	Details of Senior Nurse Assessor		
Name:	Name:		
APC number:	APC number:		
APC Expiry:	APC Expiry:		
Workplace:	Workplace:		
PDRP Level: :	PDRP Level: :		
Role:	Role:		





	NCNZ Competency and Expert Performance Indicator DOMAIN 1: Professional Responsibility							
	Self-Assessment – you	ı must include a practice example	of how you meet this competency					
1.1 Accepts responsibility for ensuring that his/her nursing practice and conduct meet the standards of the professional, ethical and relevant legislated requirements.								
Indiante:								
Indicator e.g. Describe strategies you use to ensure professional, ethical and legislated requirements are upheld by your colleagues in your								
area of practice.		ent - you MUST include a practice	example of how nurse meets					
	competency							
Competency Met	Competency Not Met	Name of Competence Assessor:	Verifying RN if different from Competence Assessor:					
	IVIEC [A33C33UI.	Competence Assessor.					





NCNZ Competency and Expert Performance Indicator DOMAIN 1: Professional Responsibility							
1.2 Demonstrates the ability to apply the principles of the Treaty of Waitangi/Te Tiriti o Waitangi to nursing practice Indicator e.g. Using an example from practice, describe your involvement in addressing the socio- economic/health disparities for Maori.	DOMAIN 1: Professional Responsibility Self-Assessment – you must include a practice example of how you meet this competency Senior Nurse Assessment - you MUST include a practice example of how nurse meets						
Competency Met	Competency Not Met	Name of Competence Assessor:	Verifying RN if different from Competence Assessor:				





NCNZ Competency and Expert Performance Indicator DOMAIN 1: Professional Responsibility Self-Assessment – you must include a practice example of how you meet this competency 1.3 Demonstrates accountability for directing, monitoring and evaluating nursing care that is provided by Registered **Nurses, Enrolled** nurses and others. e.g. Using an example from practice, describe how you address challenges in your service/area with the decision making process for delegation by an RN. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency Competency Met Competency Not Met Name of Competence Verifying RN if Assessor: different from Competence Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 1: Professional Responsibility Self-Assessment – you must include a practice example of how you meet this competency 1.4 Promotes an environment that enables patient/client safety, independence, quality of life, and health. e.g. using an example from practice describe an environmental safety risk issue in your area of practice that you identified and how you were involved in a process to minimise this risk. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency Competency Met Competency Name of Competence Assessor: Verifying RN if different from Not Competence Assessor: Met 🗌





NCNZ Competency and Expert Performance Indicator DOMAIN 1: Professional Responsibility Self-Assessment – you must include a practice example of how you meet this competency 1.5 Practices nursing in a manner that the patient/client determines as being culturally safe. e.g. Using an example from practice, describe barriers to providing culturally safe care and what processes you have implemented to help overcome these. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency Name of Competence Assessor: Verifying RN if different from Competency Met Competency Not Met 🗌 Competence Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing Care Self-Assessment – you must include a practice example of how you meet this competency 2.1 Provides planned nursing care to achieve identified outcomes. e.g. using an example from practice, discuss 3 priorities of patient/client care during a shift and the time management strategy required OR Give examples of the use of evidence in planning your care. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency Competency Met Competency Not Met Name of Competence Verifying RN if different from Assessor: Competence Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing Care Self-Assessment – you must include a practice example of how you meet this competency 2.2 Undertakes a comprehensive and accurate nursing assessment of clients in a variety of settings. e.g. Using an example from practice, describe how you undertake a nursing assessment using a specific assessment tool relevant to your area of practice. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency Competency Met Competency Not Met Name of Competence Verifying RN if different from Assessor: Competence Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing Care Self-Assessment – you must include a practice example of how you meet this competency 2.3 Ensures documentation is accurate and maintains confidentiality of information. e.g. using an example from practice describe how you ensure your documentation meets legal requirements and maintains patient/client confidentiality Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency Competency Met Competency Not Met Name of Competence Verifying RN if different from Competence Assessor: Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing Care Self-Assessment – you must include a practice example of how you meet this competency 2.4 Ensures the client has adequate explanation of the effects, consequences and alternatives of proposed treatment options. e.g. using an example from practice describe how you support clients/patients to resolve ethical dilemmas relating to explanation of the effects, consequences and alternatives of Senior Nurse Assessment - you MUST include a practice example of how nurse meets proposed treatment competency options OR Describe your leadership in helping colleagues resolve ethical issues including references literature/evidence. Name of Competence Verifying RN if different from **Competency Met** Competency Not Met Competence Assessor: Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing Care						
2.5 Acts appropriately to protect oneself and others when faced with unexpected client responses, confrontation, personal threat or other crisis situations.			of how you meet this competency			
e.g. Using an example from practice, describe your management of a challenging or unexpected situation and how you returned the environment to a state of readiness including formal or informal debrief you initiated.	Senior Nurse Assessment competency	nt - you MUST include a practice o	example of how nurse meets			
Competency Met	Competency Not Met	Name of Competence Assessor:	Verifying RN if different from Competence Assessor:			





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing Care							
2.6 Evaluates	Self-Assessment – you	must include a practice example o	of how you meet this competency				
client's progress towards expected outcomes in partnership with clients.							
e.g. Describe your involvement in changing the evaluation of nursing care delivery in your service/area.							
	Senior Nurse Assessme competency	nt - you MUST include a practice	example of how nurse meets				
Competency Met	Competency Not Met	Name of Competence Assessor:	Verifying RN if different from Competence Assessor:				





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing Care Self-Assessment – you must include a practice example of how you meet this competency 2.7 Provides health education appropriate to the needs of the client within a nursing framework. e.g. describe an example of an education tool you have developed or health education for patients/clients you have facilitated Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency Competency Met Verifying RN if different from Competency Not Met Name of Competence Competence Assessor: Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing care Self-Assessment – you must include a practice example of how you meet this competency 2.8 Reflects upon, and evaluates with colleagues and experienced nurses, the effectiveness of nursing care. e.g. describe how you facilitated a debriefing OR Supervision OR Professional assistance for colleagues. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency **Competency Met** Competency Not Met Name of Competence Verifying RN if different from Assessor: Competence Assessor:





	NCNZ Competency and Expert Performance Indicator DOMAIN 2: Management of Nursing care						
	Self-Assessment – you must include a practice example of how you meet this competency						
2.9 Maintains professional development.							
e.g. Ensure Professional Development Record meets NCNZ requirements.							
Organisational Core Competencies must also be current.							
	Senior Nurse Assessme competency	nt - you MUST include a practice	example of how nurse meets				
Competency Met	Competency Not Met	Name of Competence Assessor:	Verifying RN if different from Competence Assessor:				





NCNZ Competency and Expert Performance Indicator DOMAIN 3: Interpersonal Communication Self-Assessment – you must include a practice example of how you meet this competency 3.1 Establishes, maintains and concludes therapeutic interpersonal relationships with patients/clients e.g. using an example from practice, describe how you facilitate others in your team to maintain professional boundaries with patients/clients when this is challenging OR Senior Nurse Assessment - you MUST include a practice example of how nurse meets How you facilitate competency conclusion of therapeutic relationships when this is challenging. **Competency Met** Competency Not Met Name of Competence Verifying RN if different from Assessor: Competence Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 3: Interpersonal Communication Self-Assessment – you must include a practice example of how you meet this competency 3.2 Practices in negotiated partnership with the patient/client where and when possible. e.g. Describe or provide evidence of a new process you initiated in your area to increase patient/client's independence or family/Whanau participation in their care. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency **Competency Met** Competency Not Met Name of Competence Verifying RN if different from Assessor: Competence Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 3: Interpersonal Communication							
2.2 Communicates	Self-Assessment – you must include a practice example of how you meet this competency						
3.3 Communicates effectively with the patient/client's and members of the health care team.							
e.g. using an example from practice, describe barriers to good communication with patients/clients and the MDT and what you do to assist colleagues overcome this OR Describe an occasion when communication							
communication broke down and competency Senior Nurse Assessment - you MUST include a practice example of how nurse recompetency							
what you did to resolve this situation.							
Competency Met	Competency Not Met	Name of Competence Assessor:	Verifying RN if different from Competence Assessor:				





NCNZ Competency and Expert Performance Indicator DOMAIN 4: Interprofessional Health care & Quality Improvement Self-Assessment – you must include a practice example of how you meet this competency 4.1 Collaborates and participates with colleagues and members of the Health Care Team to facilitate and coordinate care. e.g. using an example from practice, describe how you consult with the MDT to develop new policies or procedure or change the way care is delivered OR Provide examples of your strategic collaboration with Senior Nurse Assessment - you MUST include a practice example of how nurse meets other directorates competency and/or health care Providers to deliver care. **Competency Met** Competency Not Met Name of Competence Verifying RN if different from Assessor: Competence Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 4: Interprofessional Health care & Quality Improvement Self-Assessment – you must include a practice example of how you meet this competency 4.2 Recognises and values the roles and skills of all members of the **Health Care** Team in the delivery of care. e.g. describe a range of community support services and resources that you refer patient/client's OR Evidence of your leadership in MDT groups/meetings around the delivery of care. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency **Competency Met** Competency Not Met Name of Competence Verifying RN if different from Competence Assessor: Assessor:





NCNZ Competency and Expert Performance Indicator DOMAIN 4: Interprofessional Health care & Quality Improvement Self-Assessment – you must include a practice example of how you meet this competency 4.3 Participates in quality improvement activities to monitor and improve standards of nursing. e.g. Give an example of two quality initiatives or innovations you have led and describe the changes they made to nursing practice or service delivery. Examples must be included separately in the portfolio. Senior Nurse Assessment - you MUST include a practice example of how nurse meets competency **Competency Met** Competency Not Met Name of Competence Verifying RN if different from Assessor: Competence Assessor:





NCNZ Self & Competence Assessment - Validation of Competence

assessed.						
Competence Assessor's Comments:						
		Date:				
Name:	Signature:	Date.				
Nurse (being assessed) comments:						
		_				
Name:	Signature:	Date:				
Line manager comments if not competence assessor above:						
Name:	Signature:	Date:				
Manager with responsibility for budget t	o endorse progression to, or maintenance or RN Senior l	evel:				
Voc. No.						
Yes No						
Name:	Signature:	Date:				
Line manager must update One-staff wit	h date of performance review or the nurse will be remov	red from the				
PDRP						
One-staff updated by:						
Date:						





Manager Support Letter

Applicants name:		ame:						
Applic date:	ant la	t Appraisal						
Mana	ger na	ne:				Manager's Title:		
	Tick as appropriate							
	I have	e no concerns	s about this nurse applicant's perfor	mance,	orac	ctice, manner, a	attitude or t	eamwork
	This a	pplicant has	<u>not</u> been under review for poor pe	rformand	e or	r conduct in the	e past 12 mo	onths
	This a	pplicant's m	ost recent appraisal accurately refle	cts her/l	nis n	nursing ability		
			consistently practices by demon notivation, collaboration, and effect	_			andards of	knowledge,
	contr	ibution to sp	sulted on and have approved the cialty knowledge or innovation in ying organisations requirements we	n practic	<u>e</u> . <u>T</u>	his meets Wai	-	
			emonstrates a commitment to ir opment and practice initiative active		he	er/his practice	and being	involved in
	I have	read the ap	plicant's portfolio and agree that it	is a true	refle	ection of their	performanc	е
	l sup	ort the appli	cant for progression or maintenanc	e on the	PDF	RP pathway at:	please tick	
		Competen	t Level		Ехр	oert Level		
		RN Expert	Level		RN	Designated Se	nior Nurse	
	I do not support this applicant for progression on the PDRP pathway							
Reaso	Reason/comments:							
					ı			
Signed	d:			Date:				





Please remove this page and use **EITHER** the following professional development plan **or** career plan





Professional Development Plan

Name:			Workplace:	
Date:		APC No.:		Signature:
Goal	Links (what professional, service or DHB imperative does the goal address)	Activities (steps/actions required to achieve goal)	Resources Needed (including personnel, access, time, financial)	Expected Outcome (impact on professional growth, service delivery or consumer)
E.g. (please delete this line before printing)	Improve services to inpatients with mental health issues	Mental Health Study Day Work with mental health nurse	Access to the Mental Health Study day. Time to work with a mental health nurse.	Improve care I give patients with mental health issues within the ward and to support junior colleagues to develop better skills in assessment and management of patient's mental health status.
1				
2				
3				





PROFESSIONAL DEVELOPMENT & CAREER PLAN NURSING

Career planning is a continuous process of self-assessment and goal setting. This plan incorporates your career and professional development aspirations and aligns these with organisational goals as reflected in your role description. The Directors of Nursing manage HWNZ funding for nurses. A requirement for accessing this funding is to attain the appropriate level of the Nursing Professional Development and Recognition Programme (PDRP) and have an agreed Professional Development and Career Plan (PDCP). Professional development activities require a feedback loop (report on outcomes) as part of the follow-up for activities supported by the organisation. This link provides further information on the career planning process. http://www.healthworkforce.govt.nz/health-careers/career-planning. Before starting your career plan, it's important to work through the career planning process, so that your plan is realistic and achievable for you, taking into account your self assessment (Know Yourself) and your career research (Explore Possibilities). Consider what knowledge and skills you need to fulfil the role description (i.e. clinical competences and professional behaviours) and meet objectives and develop in your career.



Career Plan for:					Date:	
	Career &/or Professional Development Goals		Action Plan to Achieve Goals		Timeframe for achievement	
Short Term (within 1 year)						
Longer Term (up to 5 years)						
I have discussed my professional development and career aspirations with my line manager who is in agreement.		ith my line	The plan meets the needs of the service and fits with the strategic direction of workforce development within the organisation. I have discussed this plan and agree to support the achievement of these goals.			
Staff Member Sign Off:		Line Manager Sign	Off:			
Name:			Name:			
Title:	·		Title:			
Signature:			Signature:			
Date:	·		Date:		·	





Please remove this page and insert validated verification of 450 practice hours in the past 3 years. The following can be used:

- TrendCare printout signed by senior nurse/manager
- Printout / Letter from HR/Payroll
- Signed letter from CNM/Manager detailing the total hours you have worked in the past 3 years





Please remove this page and insert validated verification of 60 Professional Development hours in the past 3 years.

This must include evidence of Code of Conduct training since 2012 (as per NCNZ requirements)

The following can be used:

- TrendCare printout signed by senior nurse/manager
- HR/Payroll printout
- Printout from your organisation signed by your manager.
- Professional Development List signed by your manager





Professional Development List

	n by manage	er:	Date:	Sig	nature:
Total hours	<u> </u>				
					·
Training	liouis	reality (Name of coarse, ca	323310117		held)
Date of	Hours	Activity (Name of course/ed			Hosted by (place course
Date:			Workplace:		
Name:			Designation:		
			1		





Professional Development Reflections

Please write 3 short reflections of 3 separate professional development activities you have attended within the last 3 years.

Name:				Date:	
Date of Training	Hours	Activity (Name of course/education session)	Reflection (Explain what you lear affirmed or influenced your practic		is activity – how it





Please remove this page and insert evidence demonstrating contribution to specialty knowledge **OR** innovation in practice and the change process in quality improvement activities.

This could include:

- Quality project or practice improvements (Please use the Quality Improvement Project Plan and include relevant documentation and evaluation).
- Audits/Surveys/Research (Please include relevant data, findings and improvements made)

The following document could be used as a template for this.





Quality Improvement Project Plan

Person Responsible: Team members: Project Title: Issue: Target Group: Aim: Action Plan Results: Evaluation:	
Responsible: Team members: Project Title: Issue: Target Group: Aim: Action Plan Results: Evaluation:	
Project Title: Issue: Target Group: Aim: Action Plan Results: Evaluation:	
Issue: Target Group: Aim: Action Plan Results: Evaluation:	
Target Group: Aim: Action Plan Results: Evaluation:	
Action Plan Results: Evaluation:	
Action Plan Results: Evaluation:	
Results: Evaluation:	
Evaluation:	
Feedback:	
On completion send copy to: Service Manager Quality I	Manage
Unit Manager Signature: Date:	





Please remove this page and insert evidence of responsibility for the learning and/or development of colleagues.

This could include (but is not limited to):

- Teaching sessions (Please include education planning and evaluations from at least 2 attendees)
- Preceptorship (please write a short reflection on your preceptorship experience and include feedback from the preceptee)
- Mentorship (please write a short reflection on your mentorship experience and include feedback from the person mentored)
- Coordination/Presentation on Study days/Conferences (Please include education planning, flyers and/or timetables and evaluations)

Reflections on the learning and development of others **must** use a recognised model of reflection such as Johns Model of Reflection or Gibbs Reflective Cycle. Reflections also **must** adhere to privacy requirements as outlined in the PDRP 2017-2020 Handbook

The following documents could be used for this section.





Education Session Plan

Session						
Topic: Presented						
		angth of				
by:		ength of ession:				
Venue:	36	:351011.				
Presented						
to:						
Overview and purpose of the se	ession:					
Objectives	Main Points	Resources required/delivery method				
Objectives	Ivialii Foliits	Resources required/delivery method				
Self evaluation of session:						
What to change/work on for next time:						





Education Session Evaluation

	Plea	se give the form to p	participant(s) to comple	ete			
This should be completed by a colleague(s)			Please keep any others separately for your personal records					
Sessions sho person.	op to road many se months and many seconds are many seconds and many seconds and many seconds and many seconds are many seconds and many seconds and many seconds are many seconds and many seconds and many seconds are many seconds and many seconds and many seconds are many seconds and many seconds and many seconds are many seconds and many seconds and many seconds are many seconds and many seconds and many seconds are many sec							
Session Topic:								
Presented by:	Presented by: Date:							
The presentation/	session was well	prepared:						
Thoroughly ag		Agree		Neutral	Disa	gree		
Comments:								
		opic clearly and effe						
Thoroughly ago	ree	Agree		Neutral	Disa	agree		
I understand more about the topic because of this session								
Thoroughly ag	ree	Agree		Neutral	Disa	agree		
Comments:								
My questions were		<u> </u>						
Thoroughly ag	ree	Agree		Neutral	Disa	agree		
Comments:								
Overall comments								
Evaluators Name:			Signa	ture:				
APC Number			PURD	Level:				





Feedback to Preceptor

Name of preceptor:	Name of preceptee:				
MY PRECEPTOR: Please tick the description which best describes your experience in each category		Strength	Satisfactory	Needs Improvement	
was expecting me and made me feel welcome					
• identified what previous knowledge and skill I had and set goals with me which reflected this					
• had a wide range of clinical knowledge and skills to meet the patient/client needs					
assisted me with prioritising & time management skills					
• communicated well with patients, family & colleagues					
was confident in dealing with clinical situations which assisted my learning					
used effective clinical teaching skills					
identified other people who could assist my learning					
role modelled caring nursing practice and patient centred care					
offered regular specific constructive feedback					
facilitates mutual trust & respect among colleagues					
 extended my learning through creating practice opportunities 					
challenged my knowledge base					
created a safe learning environment					
Any other comments:			Signed by pr	receptee:	
TO BE COMPLETED BY THE PRECEPTOR: What will you do differently as a result of this feedback and how?				receptor:	





Please remove this page and insert evidence demonstrating engagement and influence in wider service, professional or organisational activities.

This could include (but is not limited to):

- Group participation (e.g. Falls committee, local community healthcare groups, regional or national speciality groups)
- Union or Organisational Representative (E.g. H&S rep, NZNO rep)
- Work produced in Collaboration with other Health Care professionals, groups or specialities

The following documents could be used for this section.





Evidence of involvement in wider service, professional or organisational groups / forums

		omments	
Name of Professional Gr	roup/Forum		
Group purpose / focus			
Personal specific activities / role within the group			
Outcomes Activity			
Impact on Clinical practi	ce		
Impact on Nursing/Midwifery profession			
Recommendations for P Setting	ractice		
Personal reflections on participating in the group.			
SIGNED:		DATE:	
SIGNED BY MANAGER:		DATE:	





Please remove this page and insert evidence demonstrating expert knowledge and application of expert practice in the care of complex patients and clinical leadership in care coordination.

Reflections on the learning and development of others **must** use a recognised model of reflection such as Johns Model of Reflection or Gibbs Reflective Cycle.

Reflections also **must** adhere to privacy requirements as outlined in the PDRP 2017-2020 Handbook.

Failure to meet Privacy requirements will mean the portfolio is returned and could lead to further action.