The self-assessment is part of the Annual Competent and Professional Review process and must be completed prior to the review with your Charge Nurse Manager or delegated person.

A comprehensive self-assessment with specific examples of your practice provides the 1st party evidence for your portfolio to fully meet the Nursing Council competencies.

It is recommended that the competent self-assessment is completed in conjunction with the Nursing Council competencies and indicators which can be accessed from the Nursing Council website: www.nursingcouncil.org.nz. The Nursing Council indicators under each competency will provide guidance on the types of examples of practice that are required to meet each competency. However, you do not need to provide an example for each indicator. It is **not** sufficient to make general statements about what you do without providing specific examples of your practice.

Your self-assessment must provide specific examples of your practice to show **how you apply your experience, knowledge and skills at competent level, how you work with RN/RM to make decisions about on-going care, your contribution to provision of care and the outcome of decisions.**.

For example:

1.1 Describe a recent experience where you identified a professional, ethical and/or legal issue that required input from a RN and/or other registered health professional who is not a nurse. Provide a brief overview of the situation: What were your concerns and why? How did you go about explaining this to the RN/RM? What was the outcome from this situation?

* 1. Describe a recent experience where you cared for a Maori client and whanau (under direction and delegation of RN) where you felt you made a positive difference to their health outcomes. How did you go about developing your relationship with client and whanau to put them at ease and build trust? How did you work in partnership with the client and whanau to identify their holistic needs, enable access to services to improve health outcomes and discuss with RN/RM? What was the outcome? How did you assess that the care you had provided for this client and whanau was culturally safe?
	2. Describe a situation that shows appropriate direction and delegation of care to you from RN/RM and reflects understanding of the EN scope of practice. What monitoring and evaluation of delegated care was undertaken by RN/RM?

1.4 Describe an example where you have contributed to discharge planning for a client or involved in an unexpected event which had an impact on a patient’s independence, quality of life or health. What was your involvement and contribution to the situation and what was the outcome? How was RN/RM involved in situation/discussion?

1.5 Describe an example where you have been able to use new knowledge and skills you have gained through on going education and applied this in the provision of nursing care. What new knowledge did you bring to this situation? How did you apply this in the provision of care? What difference did this new knowledge make to care you provided?

1.6 Culture for this competency relates to age, gender, disability, sexual orientation, ethnicity (non-Maori) etc. and therefore needs to be different to example provided for 1.2. Describe a recent experience where you cared for a client and family where you felt you made a positive difference to their health outcomes. How did you go about developing your relationship with the patient and family to put them at ease and build trust? How did you work in partnership with client and family to meet their needs and discuss care with RN/RM? What was the outcome? How did you assess that you cared for this client and family in a culturally safe manner?

**Confidentiality**

As a registered nurse you are obliged to adhere to the Health Information Privacy Code and other legislative and regulatory requirements. In accordance with this, no information contained within portfolios will identify clients / whänau / communities or health team members. Confidentiality requires not only protecting the name of individuals / groups but also their locality / specific unique situation e.g. a high profile media case which could lead to their identify / a particular community that may be identified within the context of the example.

Consider professional implications before disclosing information about your practice or that of others that could be regarded as inappropriate. Please seek guidance if unsure. The portfolio is a personal document and the information it contains is private and confidential. All assessors are required to respect this expectation. However an assessor has an ethical and legal responsibility to refer any identified issue of unsafe practice to the PDRP Coordinator in the first instance who may then refer to the Associate Director of Nursing Practice and Education.

“Although rare, journals, diaries, case studies and exemplars of health practitioners can be requested as evidence in investigations or court proceedings” (NZNO, 2016, p5).

**References:**

Nursing Council of New Zealand. (2007). *Competencies for registered nurses*. Wellington: Author.

Nursing Council of New Zealand. (2010). *Competencies for enrolled nurses*. Wellington: Author.

New Zealand Nurses Organisation. (2015). *Guideline- Reflective writing.* Wellington: Author.

New Zealand Nurses Organisation. (2016). *Guideline- Privacy, Confidentiality and Consent in the Use of Exemplars of Practice, Case Studies and Journaling.* Wellington: Author