Communicating Clinical Competence

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Objectives:

1. Describe the evidence foundation for competency validation within a nurse internship framework.
2. Evaluate the usage of traditional skills lists vs. clinically-based performance expectations.
Theories and evidence used to establish the VNIP competencies

- COPA model, Novice to Expert continuum, transition shock
- 12 years of implementation experience
- Ongoing data collection
- Lessons learned from VNIP internship
Skills checklists

...... as developed in the past

- Assumptions
- List of tasks, body systems, & procedures
- Medical model for skills development and assessment
- Details, details, details
Learned from internship

- Directions
- Scoring key – terms within scale
- Clearly defined expectations
- KISS principle
Most important

- Identifies limits of capability
- Seeks assistance and/or resources appropriately
COPA model

- COPA model - directions for writing clinical performance expectations
- Categories for competence validation/expected performance
- Focusing on clinical practice
- Shifting Blooms from nouns to action verbs
- Targeting the top of Blooms taxonomy
The revised tools

- Clarified form directions
- Utilize sampling for competence data collection
- Target the way that nurses integrate tasks and procedures within care
- Accommodate clinical experience from across the continuum of care
Detail competencies that:

- Are observable clinical actions
- Written in complete performance based statements
- Reflect aspects unique to nursing practice
- Follow the ‘Nursing model’ rather than the ‘medical education framework’
Nursing unique

- Protects patients, colleagues and self (via hand washing, body mech., lifting tech., etc)
- Administers meds, infusions, treatments – according to agency protocol
- Reports pertinent, concise, accurate info
- Ensures accurate documentation, data processing, and access to electronic files, etc.
- Integrates data from multiple sources when assessing patient or developing plan of care
O Seeks assistance when faced with unfamiliar task, procedure, med, etc.
O Delivers organized care for multi-patient assignment
O Prioritizes care needs and tasks correctly
O Protects patient autonomy, dignity & rights
O Provides holistic care that transcends boundaries or walls of the agency
O Prepares patient for prescribed procedure, treatment, &/or follow-up self care
O Clarifies instructions thru demonstration, visual aides and feedback techniques.
Outcomes

- Evidence from the VNIP Nurse Internship used to evaluate the re-entry process/form and essential changes were recommended for Board approval.

- The new form utilizes both competency statements and explicit directions that were validated via extensive, multi-specialty experience with the Nurse Internship project.
Clearly define expectations

- Target how we utilize tasks and procedures to deliver holistic care
- Can address the details within aspects of care
- Include instructional process and resources for getting there
Core principles

- KISS principle
- Clear, specific, directions on the form
- Utilize sampling
- Target actual activities within daily care
- Focus on aspects of clinical judgment
- Top of Blooms pyramid
- KISS principle
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