MNCYN Regional Paediatric Orientation

Core Paediatric Competency Indicators Registered Nurse



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Core Paediatric Competency Indicator Tool Registered Nurse

Employee Name:	
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This **Core Paediatric Competency Indicator Tool** was designed by the Southwestern Ontario Maternal, Newborn, Child and Youth Network (MNCYN) in collaboration with representation from nursing leaders from hospitals throughout the region. It is recognized that RNs caring for ill or injured infants and children must possess the competencies to recognize, communicate and intervene in commonly occurring urgent and emergent situations and to provide emergency care. This tool has been designed to assist learners to build the knowledge and confidence necessary to safely care for paediatric patients in our region. It also offers preceptors and nurse managers a means by which to provide educational support and constructive feedback while evaluating and monitoring the learner's progress in skill development.

While the tool is most applicable for nurses orienting to practice in the emergency departments or in-patient paediatric units, it may also be of benefit to more experienced nurses who wish to review skills that are infrequently performed. According to the College of Nurses of Ontario (CNO), competency is defined as "the nurse's ability to use his/her knowledge, skill, judgment, attitudes, values and beliefs to perform in a given role, situation and practice setting: (CNO, 2002, p.5). Each nurse has the responsibility to ensure on an ongoing basis that his or her competencies are relevant and current.

These core competencies and clinical practice guidelines will provide guidance to the learner for the care of the paediatric patient within the framework of:

- assessment
- organization, coordination & provision of care
- communication & documentation
- management of urgent and emergent paediatric conditions

This tool requires both the learner and the preceptor to make an assessment of the learner's skill based on Benner's Model of Skill Acquisition in Nursing (1984) which describes the characteristics of performance at five different levels of proficiency. The following is a description of these skill levels:

- **Stage 1 Novice:** This is characterized by rule-governed behaviour, as the novice has no experience of the situation upon which to draw.
- **Stage 2 Advanced Beginner:** The advanced beginner is one who has had sufficient prior experience of a situation to deliver marginally acceptable performance. Advanced beginners need adequate support from mentors, supervisors and colleagues in the practice setting.
- **Stage 3 Competent:** This stage is characterized by conscious, deliberate planning based upon analysis and careful deliberation of situations. The competent practitioner is able to identify priorities and manage their own work and benefit from learning activities that centers on decision making, planning and coordinating patient care.
- **Stage 4 Proficient:** The proficient practitioner is able to perceive situations holistically and can therefore hone in directly on the most relevant aspects of a problem. Proficiency is normally found in practitioners who have worked in a specific area of practice for several years. Inductive teaching strategies such as case studies are most useful at this stage.
- **Stage 5 Expert:** This stage is characterized by a deep understanding and intuitive grasp of the total situation; the expert develops a feel for situations and a vision of the possibilities in a given situation. Critical incident technique is a useful way of attempting to evaluate expert practice, but Benner considers that not all practitioners are capable of becoming experts.

How to Use the Core Paediatric Competency Indicator Tool:

Nurse Learner: Educational opportunities for the nurse learner will be initiated by the hospital of employment, but may be enhanced by clinical opportunities arranged in partnership with other institutions as needed. Prior to clinical placement at a partner hospital, it is expected that the nurse learner has initiated her skill review using the **Core Paediatric Competency Indicator Tool** at the home hospital. Nurses are encouraged to be self-directed learners by taking the opportunity for learning new skills whenever possible. The nurse will indicate his/her level of competence for each skill under the *'Self- Assessment'* columns as he/she completes them. The key for Benner's Stages of Skill Acquisition is listed on the top left of each page. Nursing leadership will indicate skills that will not be applicable for learning (N/A) in accordance with the level of care provided at the hospital where the learner is employed. The nurse should indicate the method used to review information or technique for a specific skill. This learning tool is also intended to be completed by the nurse on clinical placement at the partner institution if this has been arranged as part of the orientation process.

Proceptor: Prior to mentoring the nurse learner, preceptors are encouraged to visit the **Proceptor Education Program for Health Professionals and Students** (Kinsella et al., n.d) and complete the learning modules. The preceptor must also complete the nurse's copy of the **Core Paediatric Competency Indicator Tool** by assessing the learner using Benner's Stages of Skill Acquisition under the section entitled 'Preceptor Evaluation of Competency'. An attempt should be made to provide learning opportunities for each required skill that has not yet been successfully completed. The preceptor can also indicate the method of review and the method of evaluation used for each skill. The preceptor will date and sign off each skill that has been completed. The bottom of each page also requires the preceptor's printed name and signature. It is recommended the preceptor keep a copy of the **Core Paediatric Competency Indicator Tool** for reference.

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Hospital Logo

Core Paediatric Competency Indicator Tool Registered Nurse

Employee Name:

Self-Assessment Key Novice (NA): Not a skill I have learned or developed	Evaluation Key O: Observation in clinical setting	Review Key P = Hospital Protocol or Procedure Review	Se		sessr nploy		by			or Evalua	
1. Advanced Beginner: familiar, require guidance 2. Competent: basic experience, require support 3. Proficient: solid experience, recognize deviations, have ability to respond independently 4. Expert: vast experience, intuitive knowledge	R/D: Return Demo T: Written Test V: Verbal Review	S = Self-Learning Package D = Demonstration C = Clinical Practice or Simulation	NA	1	2	3	4	Method of Review (Use Key on Left)	Date	Initials	Method
Module 2: The Respiratory System	m										
A: Airway Assessment											
Describe unique paediatric airway p	hysiology		Π					S			
Recognize partial versus complete upper & lower airway disease	airway obstruct	ion, including						S/C			
Perform techniques to ensure airwa positioning	y patency inclu	ding patient						P/S/D/C			
Set-up & problem solve suction equ	ipment (i.e.) 80	-100 mm/Hg						P/S/D/C			
Perform oral and nasopharyngeal s	uction techniqu	es						P/S/D/C			
Identify appropriate airway adjuncts sizing of oral & nasal airways and m		including proper						P/S/D/C			

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Module 2: The Respiratory System										
B: Breathing Assessme	nt									
Describe unique respiratory physiolog	gy of the paed	liatric patient					S			
Describe & recognize age appropriate rates which are too fast or too slow	e respiratory r	ates including					S/C			
Determine & recognize respiratory di respiratory arrest, including identifyin							S/C			
Describe, recognize & perform auscu	ultation to iden	tify breath sounds					S/D/C			
Describe & recognize increased work accessory muscle use & influencing to		including					S/C			
 Initiate appropriate use of airway/oxy Assisted respirations via bag/ Nasal cannula Venturi mask / Non-rebreathe Age appropriate use of meter 	valve/mask (E er mask	BVM)					P/S/D/C			

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Module 3: The Cardiovascular Sy	stem										
C: Circulation Assessn	nent										
Describe unique paediatric cardiova	scular physiolo	ogy						S			
Describe & understand congenital h disorders	eart defects &	acquired heart						S			
Describe & recognize age appropria which are too fast or too slow	ate heart rates i	ncluding rates						S/D/C			
Describe, recognize & perform auscheart rate & rhythm; describe heart		tify heart sounds,						S/D/C			
Describe, recognize & perform perform capillary refill time, skin colour & cer								S/D/C			
Describe, recognize & perform non-monitoring with interpretation, include								S/D/C			
Describe thermoregulation & performance pe	implementing	heat conserving						P/S/D/C			
Describe & understand different typ	es of shock							S			
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Module 4: The Nervous System										
D: Disability Assessme	ent									
Describe & perform fontanelle asserabnormal findings (i.e.) bulging vers								S/D/C		
Describe basic primitive reflexes &	understand abr	ormal findings						S		
Describe & perform a neurological a assessing for tone, interactiveness, or gaze								S/D/C		
Recognize neurological concerns in response (i.e.) Glasgow Coma Scal		notor & verbal						S/C		
Describe neurological conditions & deterioration	recognize signs	s of clinical						S		
Describe hypoglycemia & hyperglycof care glucose monitoring	emia including	performing point						S/D/C		

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Module 1: Paediatric Assessment	t Framework										
E: Exposure											
Complete a primary assessment of focused physical examination	an ill or injured	child using a						P/S/D/C			
Complete a secondary assessment & detailed physical examination with child's status & response to treatment	n ongoing reass							P/S/D/C			
Consider the mental health & well-b members involved in the care plan	eing of both the	e child & family						D/C			
Identify & deliver developmentally a anticipatory guidance & coaching baboth child & family		• •						P/S/D/C			
Incorporate principles of Family-Cer delivery of care, including supportinfamily, creating a friendly, safe environmental Please review: 2017 Canadian Page	g & partnering ronment.	with the child &						P/S/D/C			

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Module 4: The Nervous System Pain Assessment											
Perform & document paediatric pair observational scales (i.e.) Faces &		ing self-report &						P/S/C			
Describe & understand paediatric p general knowledge of common med • Complete MNCYN's Proced	lications							P/S/D/C			
Module 1: Paediatric Assessmen Nursing Skills & Simulation Paediatric Skills	t Framework; I	Module 5: Fluid M	anage	emen	t & N	Medic	atio		ion; and	Module 7	7 :
Weight-based medication calcula	tions: Perform	& document						P/S/D/C			
Administration of medications: P Oral, Nasal, Rectal Intravenous Above & below the continuous infusion Syringe pump Intramuscular: Correct local	lrip chamber via large volum	e pump						P/S/D/C			
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Intravascular Access: Perform & document Initiate vascular access with age appropriate techniques, including securing site & maintaining patency Anticipate & assist with intraosseous needle insertion								P/S/D/C			
Fluid Balance: Document input & output, calculate weight-based total fluid intake (TFI), understand principles of dehydration & rehydration therapy in children								P/S/D/C			
Venous Blood Sampling: Perform	& document							P/S/D/C			
Capillary Blood Sampling: Perform	n & document							P/S/D/C			
Cardio/Respiratory Monitor: Apply	monitor & puls	se oximetry						P/S/D/C			
Lumbar Puncture: Assist with & do	cument							P/S/D/C			
Placement of NG/OG Tube: Perform & document, including appropriate sizing								P/S/D/C			
Urine Specimen Collection: Perform & document Culture & Sensitivity (C&S) & Routine & Microscopic (R&M)								P/S/D/C			
Urinary Catheter Insertion: Performance appropriate catheter sizing, sterile to	•	•						P/S/D/C			

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CNO's Practice Guidelines for Consent: Review & practice obtaining consent as per CNO's policy (pg. 6)								Р			

Employee Comments:		
Preceptor Comments:		

Initials	Printed Name/Signature	Initials	Printed Name/Signature	Initials	Printed Name/Signature

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- Kinsella, E. A. et al. (n.d). *Preceptor education program (PEP) for health professionals and students*. Retrieved from http://www.preceptor.ca/register.html
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- College of Nurses of Ontario. (2002). *Practice standard: Professional standards, revised 2002*. Retrieved from http://www.cno.org/Global/docs/prac/41006_ProfStds.pdf