Maternal, Newborn, Child & Youth Network

PARTNERS IN HEALTH CARE EXCELLENCE

Competency Indicator Tool
Level II Nursery Care
Registered Nurse

Employee Name: _____

INTRODUCTION

This Competency Indicator Tool was designed by the Maternal Newborn Child and Youth Network in collaboration with representation from nursing leaders from level II hospitals throughout the region. It is recognized that RNs caring for either preterm or sick term infants requiring level II nursery care must possess the competencies to recognize, communicate and intervene in commonly occurring urgent and emergent situations and to provide emergency care in the absence of the most responsible practitioner (MRP).
Therefore, this tool has been designed to assist nurse orientees to build the knowledge and confidence necessary in these areas. It also offers preceptors and nurse managers a means by which to provide educational support, and constructive feedback while evaluating and monitoring the nurse's progress in skill development.

While the tool is most applicable for nurses orienting to practice in the level II nursery, 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, 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. (College of Nurses of Ontario, 2002, p. 5). Each nurse has the responsibility to ensure on an ongoing basis that his /her competencies are relevant and current.

These core competencies and Clinical Practice Guidelines (CPGs) will provide guidance to the RN for the care of the neonate in the level II nursery within the framework of:

- assessment
- organization, coordination & provision of care
- communication & documentation
- management of urgent and emergent newborn conditions (BC, P. H. 2011, May, p. 1)

This tool requires that both the learner and the preceptor 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 levels of skill:

Stage 1 – Novice: This level 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 centre 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. (The Resource Group for Healthcare Professionals, 2012)

How to Use this Tool:

Nurse Orientee: Educational opportunities for the nurse orientee will be initiated at the nurse's 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 orientee has initiated her skill review using the Competency Indicator Tool at her home hospital. Nurses are encouraged to be self –directed by taking the opportunity for learning new skills whenever possible. The nurse will indicate her level of competence for each skill under the 'Self- Assessment' columns as she completes them. The key for Benner's Stages of Skill Acquisition is listed on the bottom of each page. Nursing leadership will indicate skills that will not be applicable for her learning (N/A) in accordance with the level of care provided at the hospital where she is employed. The nurse should indicate the method she has used to review information / 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.

Preceptor: Prior to mentoring the nurse orientee, preceptors are encouraged to visit the ***Preceptor Education Program for Health Professionals and Students*** (Bossers. A. et al, 2012) and complete the learning modules. The preceptor must also complete the nurse's copy of the Competency Indicator Tool by assessing the orientee using Benner's Stages of Skill Acquisition under the section entitled 'Assessment by Preceptor'. An attempt should be made to provide learning opportunities for each required skill that has not yet been completed successfully. 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 that the preceptor keep a copy of the Competency Indicator Tool for her own reference.

Both the nurse and the preceptor are encouraged to write comments about the learning experience on the last page of the tool.

KEY ASSUMPTIONS

1. Definition of Level II Nursery Care

The core competencies included in this document reflect the care of infants in Level II A, B and C centres as outlined in the "Standardized Maternal and Newborn Levels of Care Definitions" developed by the Provincial Council for Maternal and Child Health (PCMCH).(Provincial Council for Maternal and Child Health, 2011) For the purpose of this document, managing level II nursery care includes providing care, advice and support to the infant and their family guided by current standards and evidence for optimum care. It includes collaborating with other care providers, as appropriate, to each regulated health care professional's scope of practice, and is carried out in the context of informed consent, respecting the family's values and their role in decision making.

Managing an infant in the level II nursery means taking professional responsibility and accountability for:

- the comprehensive and ongoing physical assessment of the infant
- the assessment of growth and development
- clinical decisions and clinical actions based on the above assessments

2. Developmental Care

- will be valued and demonstrated in all the care that we provide

3. Practice Setting

- The core competencies apply to all RNs caring for infants in the Level II nursery.

4. Family Centered Care

- Parent(s) are integral and equal parts of the health care team
- Parent(s) are promoted as the decision makers and build mutually beneficial parent/professional relationships
- Core concepts of Family Centered Care are:
    - dignity and respect
    - information sharing
    - participation
    - collaboration

5. Evidenced Based Practice

- The provision of care, advice and support will be guided by current standards and evidence to optimize care and outcomes.
- Acute Care of at-Risk Newborns (ACoRN), American Academy of Pediatrics (AAP), Canadian Pediatric Society (CPS) and National Association of Neonatal Nurses (NANN) will be used as primary resources on which to base current standards and practice.

6. Certifications

- All regulated health care professionals who provide care to infants are expected to keep current in their Neonatal Resuscitation Program (NRP) certification.
- All regulated health care professional are expected to keep current in Basic Life Support (BLS).
- All regulated health care professionals who provide Level II nursery care will successfully complete an orientation program during which the RN is required to demonstrate the knowledge, skills, judgment and attitudes delineated in this guideline prior to practising independently.
- Annual demonstration of competencies utilizing Benner's framework of Novice to Expert

CORE NURSING PRACTICE COMPETENCIES

Assessment of the Newborn Infant			
KNOWLEDGE of:	SKILL in:	JUDGMENT / REASONING in:	ATTITUDE by:
• Anatomical and physiological adaptation to extra-uterine life • Psychological adaptation of families to birth • Fetal growth and development patterns • Comprehensive assessment of the newborn including gestational age determination and fetal growth assessment • Comprehensive assessment including demographic, obstetrical, medical, surgical, psychosocial, religious, spiritual and cultural factors • Risk factors for maternal / neonatal complications • Social determinants of health and their impact on access to care and neonatal outcomes • Process of initiation of feeding • Assessment for urgent and emergent conditions	• Protecting and supporting the normal adaptation process • Providing evidenced base care • Identifying psychosocial support needs • Performing a comprehensive assessment of the newborn using a variety of sources • Promoting maternal / paternal-newborn interaction and attachment behaviours	• Assessing the appropriateness of admission • Identifying neonatal risk factors • Recognizing the signs and symptoms of the normal adaptation process • Recognizing normal and variances in the newborn period • Recognizing the need for transfer or transport to a higher level of care • Selecting the appropriate method of newborn monitoring (appropriate use of technology)	• Providing Family- Centered Care • Respecting the family's preferences, choice and cultural beliefs • Demonstrating self-awareness of own beliefs and values and their impact on neonatal care

Organization, Coordination & Provision of Care			
KNOWLEDGE of:	SKILL in:	JUDGEMENT / REASONING in:	ATTITUDE by:
• Methods used to promote growth, comfort and development • Physical and psychological needs during admission and discharge • Non-pharmacologic comfort techniques and pharmacologic pain relief options • Neonatal levels of care and transport	• Assessing family's knowledge, expectations of care • Using clinical reasoning and judgment in decision making • Providing a safe physical and therapeutic environment in expected and unplanned situations • Supporting the family using therapeutic support measures and providing evidenced based care / advice • Implementing appropriate comfort measures • Monitoring the neonate's response to pain relief options • Administering appropriate medications / treatment • Collecting specimens and interpreting laboratory results • Initiating intravenous access • Facilitating breastfeeding • Performing neonatal resuscitation	• Advocating for developmentally supportive care • Ensuring parent(s) are involved in directing and providing care • Recognizing indications for and the effects of non-pharmacological pain relief options • Selecting appropriate interventions to neonatal well being • Interpreting laboratory test and imaging results and taking appropriate action	• Promoting developmentally supportive care • Involving parent(s) in care decisions • Promoting skin-to-skin contact • Demonstrating self-awareness of own attitudes and beliefs

Communication & Documentation			
KNOWLEDGE of:	SKILL in:	JUDGMENT / REASONING in:	ATTITUDE by:
• Effective and systematic communication • Documentation and reporting requirements	• Communicating the neonate's assessment and care plans with the MRP in a thorough and timely manner • Utilize a systematic method of communication • Using provincial, regional and institutional documentation records	• Appropriate consultations to MRP, other health care providers, community services • Guiding the family through an informed decision-making process • Providing evidenced based information to the family and their support person(s)	• Demonstrating respect to others • Celebrating birth • Respecting the family's choices • Discussing with the family their wishes, concerns and questions regarding level II nursery admission and discharge
Urgent and Emergent Neonatal Conditions			
• Neonatal urgent and emergent conditions • Guidelines for neonatal urgent and emergent conditions	• Initiating appropriate treatment for urgent and emergent conditions • Communicating effectively and in a timely manner with MRP • Facilitating transfer to another facility • Keeping mother and support person(s) informed of condition • Participating in post event debriefing • Participating in emergency drills	• Recognizing the onset of urgent and emergent complications	• Demonstrating Family Centered Care principles

Modified from the document entitled "Guidelines for Registered Nurses - Core Competencies: Management of Infants Requiring Care in the Special Care Nursery". St. Thomas Elgin General Hospital, St. Thomas, Ontario

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I. SAFETY / INFECTION PREVENTION & CONTROL															
Follows unit protocol for Safety & Security of Newborns: 1. Demonstrates how to apply the infant security system and identifies how it operates 2. Provides family education regarding safety & security 3. Verifies family ID before giving telephone information 4. States actions to be taking in the event of a Code Pink															
Identifies and locates personal protective equipment in the Level II Nursery															
Demonstrates knowledge of Level II Nursery infection control policies & protocols for basic procedures eg. 1. Uses appropriate skin preparation prior to procedures 2. Implements 'scrub the hub' protocol prior to IV medication administration															
Demonstrates correct hand hygiene through: 1. Hand washing or hand rub between infants 2. Removal of jewelry and watches 3. Adherence to fingernail policy															
Instructs parents/visitors about the importance of hand hygiene															

NA – Novice: Not a skill that I have learned or developed; 1 – Advanced Beginner: Familiar but require guidance; 2- Competent: have basic experience, support required; 3-Proficient: Solid experience, recognize deviations, has an ability to respond independently; 4-Expert: vast experience; intuitive knowledge

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Cleans common equipment appropriately between infants															
Performs surveillance of visitors/siblings for illness															
II. TECHNOLOGY															
Utilizes standard unit specific technology and advanced technology as appropriate for (check appropriate boxes)															
☐Incubator															
☐Infant Warmer															
☐Cardiorespiratory Monitor															
☐Portable SpO_2 Monitor															
☐CPAP															
☐SiPAP															
☐Mechanical Ventilator															
☐T-piece Resuscitator															
☐Bag/ Mask Ventilation															

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☐ IV infusion pump															
☐syringe pump															
☐Phototherapy Lights															
☐Bili Blanket															
☐Bili Mattress / Bed															
☐Transcutaneous Bilimeter															
☐Chest Tube Drainage Equipment															
☐Transport Isolette															
☐															
☐															
☐															

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Demonstrates a working knowledge of emergency equipment and documents: 1. Is familiar with location & function of emergency supplies 2. Is able to set up intubation equipment 3. Checks emergency equipment and documents appropriately															
III. DOCUMENTATION / COMMUNICATION															
Documents in a thorough and timely manner as per unit protocol on: (check appropriate boxes)															
☐Admission / Discharge Record															
☐Transfer Record															
☐Progress Notes															
☐Unit Flow Sheet															
☐Neonatal Resuscitation Record															
☐ Medication Administration Record															
☐															
Initiates & documents ongoing family teaching.															

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Documents assessments of parent / infant interactions.															
Communicates an understanding of one's professional duty to report child protection concerns.															
Demonstrates knowledge of when, and by whom informed consent must be obtained.															
IV. PROFESSIONAL ACCOUNTABILITY															
Understands and practises within the scope of service for a Level II (A,B or C) Nursery (circle as appropriate)															
Communicates and documents changes in infant's condition to MRP in a timely manner															
V. PROVISION OF CARE															
Preparation for Birth 1. Prepares radiant warmer & supplies per NRP Guidelines 2. Reviews operation of T- piece resuscitator 3. Ensures appropriate staff are aware of impending birth															
Takes, records and interprets vital signs															
Obtains length, head circumference – records in cm															

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Obtains weight –records in kg.															
Provides cardiorespiratory monitoring appropriately: 1. Selects appropriate sites for lead placement 2. Sets alarm limits as per unit policy 3. Navigates monitor menus to troubleshoot															
Performs non-invasive blood pressure monitoring: 1. Indirect measurement using available device 2. Four limb BP as appropriate 3. Chooses correct cuff size 4. Selects appropriate site 5. Follows procedure for blood pressure monitoring 6. Accurately records & interprets results															
Attends appropriately to infant thermoregulation: 1. Provides humidified environment according to Protocol 2. Intervenes to prevent heat loss by 4 mechanisms 3. Differentiates indications for servo & non-servo control 4. Assesses appropriateness of environment for weight, gestational age and clinical condition 5. Monitors the infant requiring therapeutic hypothermia (passive cooling) appropriately															

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Follows unit specific protocol for use of supplemental oxygen provided via: 1. Incubator 2. Nasal Cannula 3. Free Flow (Blow By) O_2															
Adheres to protocol for nasopharyngeal CPAP / SiPAP in collaboration with Respiratory Therapy re: 1. Prong size & placement 2. Skin care & positioning 3. System assessment & maintenance															
Adheres to protocol for the use of the ventilator in collaboration with Respiratory Therapy: 1. Relates ventilator changes to blood gases and patient condition 2. Correctly interprets blood gas results 3. Assists with intubation 4. Ensures ETT is secure 5. Assesses level of distress 6. Responds appropriately to alarms 7. Responds appropriately to infant condition 8. Identifies actions to be taken if vent malfunctions															

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Demonstrates appropriate knowledge to care for infants with apnea / bradycardia: 1. Identifies infants at risk for apnea / bradycardia 2. Demonstrates appropriate management / documentation															
Follows appropriate procedure for oral/ nasal/ ETT suctioning 1. Correctly sets up and maintains suction equipment to ensure safe suction pressures and effective function 2. Assesses the infant's need for suctioning, tolerance of the procedure and & effectiveness 3. Supports infant physiologically & developmentally															
Assists with the management of pneumothorax: 1. Identifies infants at risk for pneumothorax 2. Identifies the signs of pneumothorax 3. Locates & uses transilluminator / vein viewer 4. Assists with thoracentesis &/or chest tube insertion 5. Sets up and reviews chest drainage system a. Appropriately assesses the infant & documents findings b. Appropriately assesses system function c. Trouble shoots / manages complications PRN 6. Ensures chest tube remains secure															

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Follows the unit specific protocol for the management of newborn hypoglycemia. 1. Correctly identifies infants at risk for hypoglycemia. 2. Describes the signs of hypoglycemia in the newborn. 3. Provides the appropriate treatment to the hypoglycemic infant as per unit protocol															
Adheres to protocols for breastfeeding / pumping: 1. Breast milk verification procedure 2. Instructs mother on pump set up and procedure 3. Provides recommendations to establish and maintain supply 4. Instructs mother on correct methods for storage 5. Correctly adds Human Milk Fortifier as ordered 6. Supports transition from tube/bottle feeding to breast 7. Encourages Kangaroo Care / skin-to-skin 8. Uses the baby weigh scale as a tool for feeding advancement 9. Identifies available resources to support lactation 10. Obtains consent before feeding formula or providing soother 11. Supports Oral Immune Therapy as per unit protocol															
Prepares/labels/stores formula according to unit policy															

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Adheres to unit specific protocol for bottle feeding. .															
Calculates total fluid intake (TFI) correctly.															
Follows unit specific protocol for NG / OG Feeding 1. Selects appropriate size tube for weight 2. Correctly estimates insertion depth using an approved measurement technique 3. Safely places & secures tube 4. Correctly assesses correct tube placement 5. Correctly administers *intermittent* feed via gravity or syringe pump as ordered 6. Correctly administers *continuous* feed via syringe pump as ordered 7. Interacts with infants / provides non-nutritive sucking 8. Identifies signs of feeding intolerance 9. Positions syringe containing breast milk to maximize nutrient delivery 10. Changes feeding tubing at required intervals 11. Facilitates gastric drainage as per unit protocol															

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Adheres to unit specific protocols for IV therapy 1. Appropriately initiates IV therapy. 2. Assesses the IV site for signs of extravasation regularly as per unit protocol Takes corrective action PRN. 3. Operates infusion &/or syringe pump correctly. 4. Documents hourly intake 5. Initiates/maintains saline locks 6. Initiates, assesses and maintains infusion of blood and blood products as per hospital protocol															
Demonstrates ability to appropriately manage central lines: 1. Sets up tray & assists with insertion 2. Maintains asepsis during all aspects of line care 3. Demonstrates ability to draw blood work 4. Ensures that lines are secured 5. Assesses for catheter complications															
Demonstrates ability to initiate, maintain and safely change TPN solutions as per unit protocol															

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Adheres to unit specific protocols for Medication Administration 1. Administers medications following CNO Standards 2. Determines appropriateness of dose for weight 3. Confirms doses, calculations, drug and rates 4. Labels all medication syringes 5. Safely administers enteral medications (PO & NG) 6. IV administration a. Demonstrates aseptic establishment of closed IV system b. Follows procedure for below drip chamber medication administration c. Ensures that IV medications are compatible with IV fluids prior to administration 7. Reconstitutes drips for continuous infusion 8. Initializes the drug library on the infusion pump. 9. Safely administers IM medications 10. Assists with the administration of: a. Surfactant b. Prostaglandin E c. Vasopressors														

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11. Appropriately transcribes and documents medications and administration on MAR 12. Performs 24hr chart checks															
Provides appropriate skin care: 1. Performs umbilical cord assessment and care as per unit protocol 2. Treats diaper dermatitis as per unit protocol 3. Uses topical agents sparingly to minimize absorption 4. Minimizes exposure to adhesives 5. Uses preventative measures to avoid skin injury 6. Minimizes baths & exposure to soap															
Adheres to protocol for circumcision: 1. Attends to pain management before, during and after 2. Monitors for complications post-procedure 3. Enters orders and documents procedure and follow up care															
Assesses, documents and manages pain as per unit protocol															
Adheres to unit protocol for urinary catheterization: 1. Demonstrates correct insertion technique and maintenance 2. Assesses urinary drainage as per unit protocol															

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Follows unit specific guidelines for the collection of all lab specimens. 1. Uses appropriate procedure for capillary blood draws (including NBS) 2. Follows unit accepted protocol for IV starts for the purpose of venous blood draws 3. Assists with arterial blood draws 4. Identifies how to correctly obtain an endotracheal tube(ETT) aspirate for culture 5. Assists with lumbar puncture 6. Obtains surface cultures 7. Labels lab specimens appropriately 8. Interprets lab results and communicates results 9. Demonstrates the appropriate procedure for obtaining a urine sample from a catheter or urine collection system														
Assists with infant x-ray as required 1. Correctly assists with positioning the infant 2. Dons the lead apron 3. Correctly applies the throat protector and the lead protector to cover the infant's reproductive organ														

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Appropriately cares for infants showing evidence of Neonatal Abstinence Syndrome (NAS): 1. Identifies infants at risk of NAS 2. Identifies the signs of NAS 3. Documents using the Finnegan Neonatal Abstinence Score Tool 4. Modifies environment according to infant's needs 5. Educates and supports parents															
Follows unit protocol for hyperbilirubinemia: 1. Identifies infants at risk for hyperbilirubinemia 2. Identifies the signs and adverse effects of hyperbilrubinemia 3. Uses phototherapy sources appropriately 4. Correctly applies eye shields 5. Maximizes skin exposure for most effective treatment 6. Interprets lab values & nomograms 7. Educates and supports parents															

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Adheres to unit procedure for immunizations: 1. Ensures informed consent is documented 2. Employs pain management technique 3. Documents administration including lot number 4. Initiates Vaccine Record and gives to family 5. Follows procedure for enrollment in RSV program a. Has MRP sign paperwork and fax to appropriate number															
Demonstrates an understanding of the principles and practices of developmentally supportive care.															
Provides appropriate parental support: 1. Supports parent's relationship with infant and participation in care 2. Educates families about available supports/resources 3. Encourages mothers to use Parent Room when appropriate															

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Provides relevant family teaching regarding: 1. Family education of the hospitalized infant 2. Breastfeeding / use of breast milk 3. Medication administration 4. Discharge home with oxygen 5. Gastric Reflux 6. Nasogastric tube feeding 7. Formula preparation 8. SIDS 9. Safe sleep environment 10. Shaken Baby Syndrome (using Period of Purple Crying® educational information)															
Adheres to protocol for discharge planning: 1. Implements Car Seat Challenge 2. Ensures that Hearing Screen (including ABAER as indicated) is completed 3. Collaborates with relevant community service providers 4. Assesses family learning needs															

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V. EMPLOYEE COMMENTS:

VI. PRECEPTOR COMMENTS: