

Competency Title: Collaboration/Communication

Competency Statement: The nurse will function effectively within nursing role and interprofessional teams.

Supporting Standards:

- ANA Code of Ethics
 - Provision 4: The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care.
 - Provision 6: The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work settings and conditions of employment that are conducive to safe, quality health care.
 - Provision 8: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
- ANA Scope and Standards of Practice
 - Standards of Professional Performance
 - Standard 5A: Coordination of Care
The registered nurse coordinates care delivery.
 - Standard 9: Communication
The registered nurse communicates effectively in all areas of practice.
 - Standard 10: Collaboration
The registered nurse collaborates with healthcare consumer, and other key stakeholders in the conduct of nursing practice.
 - Standard 11: Leadership
The registered nurse leads within the professional practice setting and the profession.
- QSEN: Teamwork and Collaboration
- The Joint Commission - National Patient Safety Goals
 - Improve the effectiveness of communication among caregivers
- Related UCDH Policies
 - Patient Handoffs, [UC Davis Health Policy: 2707](#)

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|--|--|---|
| <ul style="list-style-type: none"> Identifies scope and practice of team members Understands principles of effective communications Identifies organizational supports for team communication (EMR tools, SBAR, Policy) | <ul style="list-style-type: none"> Functions within own scope of practice Initiates referrals as appropriate Integrates contributions of team members into plan of care Demonstrates effective oral communication using SBAR format Demonstrates effective written communications through EMR documentation | <ul style="list-style-type: none"> Values contribution of team Evaluates own contributions to effective team functioning Recognizes hand-offs as point of risk for patient and emphasizes effective communications |

| Initial competency: | |
|---|--|
| Education <ul style="list-style-type: none"> Initial orientation to include: <ul style="list-style-type: none"> Didactic information on team members, scope, principles of communication (K) Hand-off Communication (K/S) SBAR format (K/S) EMR documentation (K/S) Interprofessional practice principles (A) | Validation <ul style="list-style-type: none"> Incident Report (K/S) <ul style="list-style-type: none"> Review UC Davis Health Policy 1466: Incident Reports Completed all sections of the incident report form. If incident involved an injury, took steps to restore individual's safety such as stabilizing patient's position after a fall and assessing for further injuries. Notified appropriate personnel for patient, staff or visitor injury. Documented appropriately in-patient record for injury/incident. Nurse Patient Relationship (K/S/A) <ul style="list-style-type: none"> Verified the correct patient using two identifiers per UC Davis Health Policy 2702, Patient Identification and Safety Bands for the Hospitalized Patient Created a climate of warmth and acceptance Used appropriate nonverbal behaviors (e.g., good eye contact, open relaxed position, sitting eye level with patient) |

- Used effective communication skills to discuss discharge and termination issues and to guide discussion related to specific changes in patient's thoughts and behaviors.
 - Summarized and restated with patient what was discussed during interaction, including goal achievement
- Nursing Report (K/S)
 - For each patient included background information; assessment data; nursing diagnoses; interventions, outcomes, and evaluation; family information; discharge plan; and current priorities.
 - Asked the nurse from oncoming shift if they had any questions regarding information provided.
- SBAR Communication (K/S)
 - Contacted the primary practitioner directly responsible for making care decisions for the specific patient or the person receiving the patient communication hand-off.
 - Initiated SBAR communication, introduced self, and provided the name of the patient to the recipient of the information. Included situation, background information, assessment findings and observations of current condition and insights offered recommendations to correct problem.
- Demonstrates consistent performance in precepted experience of professional collaboration and communication (K/S/A)

Competency Title: Cultural Sensitivity/Patient-Centered Care

Competency Statement: The nurse will provide care that recognizes and respects patient preferences, values, and needs. Nurses shall use cross cultural knowledge and culturally sensitive skills in implementing culturally congruent nursing care.

Supporting Standards:

- ANA Code of Ethics
 - Provision 8: The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
- ANA Position Statement – Cultural Diversity in Nursing Practice
- ANA Scope and Standards of Practice
 - Standards of Professional Performance
 - Standard 8: Culturally Congruent Practice
The registered nurse practices in a manner that is congruent with cultural diversity and inclusion principles.
- National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (National CLAS Standards)
- QSEN: Patient-centered care
- The Joint Commission - National Patient Safety Goals
 - Improve the accuracy of patient identification
 - Improve the effectiveness of communication among caregivers
- Transcultural Nursing Standards of Practice
 - Standards of Practice for Culturally Competent Nursing Care
 - Standard 5: Culturally Competent Practice
- Related UCDH Policies:
 - Patient Identification for the Hospitalized Patient, UC Davis Health [Policy: 2702](#)
 - Medical Interpreting Services, UC Davis Health [Policy: 2881](#)
 - [Principles of Community, UC Davis](#)
 - [Diversity and Inclusion Strategic Vision, UC Davis](#)

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|---|--|---|
| <ul style="list-style-type: none"> • Identify resources for patient centered care • Procedure to access translators • Access and utilize patient education materials | <ul style="list-style-type: none"> ▪ Use of translation services ▪ Bedside report ▪ Use of Professional Exchange Report | <ul style="list-style-type: none"> ♦ Respect patient and family values ♦ Support patient and family participation |

| Initial competency: | |
|---|--|
| Education: <ul style="list-style-type: none"> • Initial Orientation to include: <ul style="list-style-type: none"> ▪ Patient-Centered Care – Completed in CPPN General Nursing Orientation (K/S/A) ▪ Population-Specific Care – Completed in CPPN General Nursing Orientation (K/S/A) ▪ Principles of Community – Reviewed in CPPN General Nursing Orientation (K/S/A) ▪ Access patient education resources (K/S) ▪ Access translation services (K/S) ▪ Advance Directives for Healthcare & Physician Order for Life-Sustaining Treatment Online Module (K) ▪ Age Specific Care Online Module (K) | Validation: <ul style="list-style-type: none"> • Utilizes available resources in providing individualized teaching to patient/families (K/S/A) • Creates individualized plan of care (K/S/A) • Demonstrates professional communication with patients/families (K/S/A) • Completion of Age Specific Care Online Module (K) • Consistent performance in precepted experience: provision of care that recognizes and respects patient preferences, values, and needs; use of cross cultural knowledge and culturally sensitive skills in implementing culturally congruent nursing care (K/S/A) |

Competency Title: Evidence-Based Practice

Competency Statement: The nurse will integrate current evidence, including Quality and Safety Data, in planning, delivering, and evaluating patient care.

Supporting Standards:

- ANA Scope and Standards of Practice
 - Standards of Professional Performance
 - Standard 13: Evidence-Based Practice and Research
The registered nurse integrates evidence and research findings into practice.
 - Standard 14: Quality of Practice
The registered nurse contributes to quality nursing practice.
 - Standard 16: Resource Utilization
The registered nurse utilizes appropriate resources to plan, provide, and sustain evidence-based nursing services that are safe, effective, and fiscally responsible.
- [Institute of Medicine – The Future of Nursing: Leading Change, Advancing Health](#)
- QSEN: Evidence-Based Practice, Informatics, Quality Improvement
- Related UCDH Policies:
 - Inpatient Nursing Assessment Documentation Standards, UC Davis Health [Policy: 18001](#)

Evidence-Based Practice

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|--|--|---|
| <ul style="list-style-type: none"> Identifies resources to support evidence-based practice Understands levels of evidence Identifies organizational supports for nursing research Able to interpret dashboard data | <ul style="list-style-type: none"> Relates dashboard data to quality and safety initiatives on unit. Demonstrates effective utilization of online sources of evidence. Identifies resources utilized in development of individualized plan of care. | <ul style="list-style-type: none"> Values evidence based practice as a resource for individual patient care. |

| Initial competency: | |
|--|--|
| <p><u>Education:</u></p> <ul style="list-style-type: none"> Initial orientation to include: <ul style="list-style-type: none"> Resources available at UCDH (K) Ability to access online sources of information (i.e. literature search, Elsevier, Quality and Safety dashboards) (K/S) Nurses' role in EBP (K/A) | <p><u>Validation</u></p> <ul style="list-style-type: none"> Simulated performance in general orientation - utilization of available databases (Elsevier, CRC) to search information on patient issue (K/S); identifies unit level Quality and Safety plan, indicators, and current performance during orientation (K/S) Consistent performance in precepted experience of ability to find EBP and demonstrate use (K/S/A) NGNRP: Completion of evidence-based practice project (K/S/A) |

Competency Title: Infection Prevention

Competency Statement: The nurse will utilize current evidence and standards of care in prevention, recognition, and treatment of patient infection.

Supporting Standards:

- ANA Scope and Standards of Practice
 - Standards of Practice
 - Standard 1: Assessment
The registered nurse collects pertinent data and information relative to the healthcare consumer's health or situation.
 - Standard 2: Diagnosis
The registered nurse analyses the assessment data to determine actual or potential diagnoses, problems, and issues.
 - Standard 3: Outcomes Identification
The registered nurse identifies expected outcomes for a plan individualized to the healthcare consumer or the situation.
 - Standard 4: Planning
The registered nurse develops a plan that prescribes strategies to attain expected, measurable outcomes.
 - Standard 5: Implementation
The registered nurse implements the identified plan.
 - Standard 6: Evaluation
The registered nurse evaluates progress toward attainment of goals and outcomes.
 - Standards of Professional Performance
 - Standard 13: Evidence-based Practice and Research
The registered nurse integrates evidence and research findings into practice.
 - Standard 14: Quality of Practice
The registered nurse contributes to quality nursing practice.
- QSEN: Quality Improvement, Safety, Evidence-Based Practice
- The Joint Commission - National Patient Safety Goals
 - Reduce the risk of health care–associated infections
- Related UCDH Policies:
 - Process for Infection Prevention and Control and Patient Safety Plan, UC Davis Health [Policy: 2000](#)

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|--|--|---|
| <ul style="list-style-type: none"> • Quality and Safety plan • QI related to infection • Interpretation and utilization of data | <ul style="list-style-type: none"> ▪ Able to access policy and procedure ▪ Able to access online resources ▪ Access quality and safety data ▪ Document in EMR according to standards | <ul style="list-style-type: none"> ♦ Utilization of data to improve patient outcomes |

Initial competency:

Education:

- Initial education:
 - Infection prevention (K/S/A)
 - Quality and safety (K/A)
 - QI related to infection – organization and unit targets (K/S/A)
 - Utilization of dashboards (K/S)
 - Skills lab (K/S)

➤ **Validation**

- Review Policy (K)
 - Drawing Blood Culture, [Policy: 13015](#)
 - Non-Tunneled Central Venous Catheter Care and Maintenance, [Policy: 13004](#)
 - Hand Hygiene, [Policy: 11023](#)
 - Standard and Transmission Based Isolation Precautions for Infection Prevention, [Policy: 11025](#)
 - Urethral Catheter Insertion, Maintenance, and Removal [Policy: 9010](#)
- UC Learning Module (K)
 - Central Line Maintenance Bundle
 - Blood Culture Collection
 - Blood Culture Collection for Neonates and Peds
- Simulated performance in general orientation/skills lab (K/S)
- Consistent performance in precepted experience of using infection prevention standards of care (K/S/A)

Competency Title: Informatics

Competency Statement: The nurse will effectively utilize information and technology to communicate, improve safety, and support decision making.

Supporting Standards:

- [Institute of Medicine – The Future of Nursing: Leading Change, Advancing Health](#)
- [Epic and IT Education](#)
- QSEN: Informatics
- [The Joint Commission – National Patient Safety Goals](#), 2021
 - Improve the accuracy of patient identification
 - Improve the effectiveness of communication among caregivers
 - Improve the safety of using medications
 - Reduce patient harm associated with clinical alarm systems
 - The hospital identifies safety risks inherent in its patient population
- Related UCDH Policies
 - Inpatient Nursing Assessment Documentation Standards, UC Davis Health [Policy: 18001](#)

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|--|--|--|
| <ul style="list-style-type: none"> • Knowledge of basic EMR documentation standards for patient population • Understands the basic process of using networks for electronic communication • Recognizes limitations of computer applications • Recognizes the nature of computer - human interfaces and assesses impact on client care • Accesses and utilizes multiple information sources for gathering evidence for clinical decision making • Upholds ethical standards related to data security, confidentiality, and clients' right to privacy • Coordinate information flow with multidisciplinary team using information systems | <ul style="list-style-type: none"> ▪ Recognizes the basic components of computer systems ▪ Understands basic and complex concepts and processes of various computer systems and how they relate to practice ▪ Evaluates internet-based nursing and health materials for quality, accountability, reliability, and validity ▪ Analyzes patient information needs, accesses technology resources to meet needs and evaluate effectiveness ▪ Demonstrates ability to correctly document patient care information into EMR ▪ Demonstrates ability to correctly document patient medications in MAR | <ul style="list-style-type: none"> ♦ Recognizes nurse's role in appropriate patient documentation ♦ Values nurses role in quality improvement and safety regarding informatics usage ♦ Recognizes need for continual learning in informatics skills, applications, and knowledge ♦ Recognizes the relevance of nursing data for improving practice |

Initial competency:

Education:

- At hire:
 - Sign EMR User Agreement (K/A)
- Initial orientation to include:
 - General assessment of computer knowledge (ability to use a desktop computer) (K/S)
 - Electronic Signature Authentication Confidentiality Agreement (A)
 - UCDH Epic EMR introduction and pump integration (K/S)
 - Introduction to EMR functionality (K/S)
 - Precepting on unit use (K/S)
 - Bar Code Medication Administration (K/S)
 - Use of UCDH Intranet website (K/S/A)

Validation:

- Uses operating systems (K/S)
- Uses computer technology safely (log-in/log-out, protects passwords) (K/S/A)
- Navigates in Windows environment effectively (K/S)
- Demonstrates basic technology skills (load paper, change toner, unjam printers, print) (K/S)
- Chart audits by unit EMR Superusers and preceptor (K/S)
- Documentation Standards according to unit specific charting (K/S)
 - Documentation on Nurses' Progress Notes
 - Use of Professional Exchange Report
- Consistent performance in precepted experience of effectively utilizing information and technology to communicate, improve safety, and support decision making (K/S/A)

Competency Title: Medication Safety

Competency Statement: The nurse will administer patient medications in a consistent safe manner.

Supporting Standards:

- [ANA Scope and Standards of Practice](#)
 - Standards of Practice
 - Standard 5: Implementation
The registered nurse implements the identified plan.
 - Standards of Professional Performance
 - Standard 14: Quality of Practice
The registered nurse contributes to quality nursing practice.
- [American Society of Peri-Anesthesia Nurses](#)
 - Position Statement 4: A Position Statement on Safe Medication Administration
- [Institute for Safe Medication Practices](#)
- [The Joint Commission – National Patient Safety Goals](#)
 - Improving the safety of using medications
- [The National Coordinating Council for Medication Error Reporting and Prevention \(NCC MERP\)](#)
- QSEN: Safety
- Related UCDH Policies
 - Medication Administration, UC Davis Health [Policy: 4055](#)
 - Medication Reconciliation, UC Davis Health [Policy: 2711](#)

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|--|--|--|
| <ul style="list-style-type: none"> • Identifies all rights of medication administration • Relates culture of safety concepts to nurse's role in improved medication safety • Knowledge of basic clinical pharmacology specific to patient population • Describes nurse's role in medication safety • Identifies EMR documentation standards for medications • Identifies organizational supports for safe medication administration (policy, smart pumps, medication references) | <ul style="list-style-type: none"> ▪ Demonstrates ability to safely administer medications to selected patient population ▪ Demonstrates effective documentation of medications ▪ Demonstrates ability to access resources related to safety medication administration ▪ Demonstrates ability to complete IR regarding medication errors | <ul style="list-style-type: none"> ♦ Values concepts of culture of safety ♦ Recognizes nurse's role in medication safety ♦ Values nurses role in quality improvement and safety regarding medications |

Initial competency:

Education:

- At hire:
 - Validation of licensure
- Initial orientation to include:
 - Successful performance on medication/math exam (K)
 - Medication policy and resources (K)
 - Pharmacology principles related to patient population (K)
 - Medication safety processes at UCDH (bar code, EMR) (K/S)
 - Reporting of adverse events/errors (K/S)
 - Self-assessment of skills performance for medication administration to identify skills that require skills completion (K/S/A)

Validation:

- Review Policies (K)
 - Medication Administration, UC Davis Health Policy: 4055
 - Medication Reconciliation, UC Davis Health Policy: 2711
- UC Learning modules (K)
 - Medication Policies and Medication Facts
 - IV pump modules
 - Pyxis module
- Skills will be validated via self-assessment and identified skills checklists per work area.
- Equipment checklists (requires preceptor evaluation) (K/S)
 - IV pump modules
 - IV pump skill checklists
- Performance validated via:
 - Simulated performance in general orientation (K/S)
 - Consistent performance of safe medication practices in precepted experience (K/S/A)

Competency Title: Patient Rescue

Competency Statement: The nurse will effectively manage patient emergencies.

Supporting Standards:

- AHA Advanced Cardiac Life Support Guidelines
- AHA Basic Life Support (BLS) for Healthcare Providers
- AHA Pediatric Advance Life Support Guidelines
- AAP Neonatal Resuscitation Program
- ANA Scope and Standards of Practice
 - Standards of Practice
 - Standard 1: Assessment
The nurse systematically evaluates the quality and effectiveness of nursing practice.
 - Standard 5: Implementation
The nurse implements the identified plan.
- QSEN: Safety
- Related UCDH Policies
 - Responding to Medical Emergency Situations (Including Code Blue), UC Davis Health, [Policy: 6006](#)
 - Automated External Defibrillator (AED-ZOLL), UC Davis Health, [Policy: 6005](#)
 - Oxygen Administration, UC Davis Health, [Policy: 6018](#)
 - Rapid Response Team, UC Davis Health, [Policy: 6013](#)

Patient Rescue

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|--|---|--|
| <ul style="list-style-type: none"> Identifies when to call Rapid Response Team (RRT) for assistance. Relates culture of safety concepts to nurse's role in improved emergency response Knowledge of basic life support Describes nurse's role in patient emergencies Identifies EMR documentation standards for emergencies Identifies organizational supports to prevent avoidable deaths | <ul style="list-style-type: none"> Demonstrates ability to recognize preventable life-threatening injuries Demonstrates effective use of Rapid Response Team Demonstrates effective documentation of critical values Demonstrates ability to access resources related to patient emergencies Demonstrates ability to complete IR regarding code blue | <ul style="list-style-type: none"> Values concepts of culture of safety Recognizes nurse's role in patient emergencies Values nurses role in quality improvement and safety regarding patient emergencies |

Initial competency:

Education:

- At hire:
 - Validation of current certifications as required by position: ACLS, BLS/CPR, PALS, NRP (K/S)
- Initial orientation to include:
 - Emergency Response policy and resources (K)
 - Possible complications and patient emergencies related to patient population (K)
 - Responding to medical emergency processes at UCDH (RRT, Code Blue) (K/S)
 - Reporting of adverse events/errors (K/S)
 - Self-assessment of skills performance (K/S)

Validation:

- Review UCDH Policies (K)
 - Oxygen Administration, [Policy: 6018](#)
 - Responding to Medical Emergency Situations (Including Code Blue), [Policy: 6006](#)
 - Automated External Defibrillator (AED-ZOLL M) [Policy: 6005](#)
 - Rapid Response Team, Patient Care Standards, [Policy: 6013](#)
 - Care of the Patient with Uncontrolled Seizure Disorder, [Policy: 15003](#)
- Completed Zoll Defibrillator modules, assigned per department
- Skills Checklists (K/S)
 - Nasal Cannula or Oxygen Mask Application
 - Nasopharyngeal Airway Insertion
 - Oral Airway Insertion
 - Oxygen Therapy and Oxygen Delivery Principles
 - Seizure Precautions
 - Suctioning: Nasopharyngeal and Oropharyngeal
- Simulated performance in general orientation (K/S)
- Consistent performance in precepted experience of appropriate management of patient emergencies (K/S/A)

Competency Title: Patient Safety

Competency Statement: The nurse will provide safe nursing care.

Supporting Standards:

- ANA Code of Ethics
 - **Provision 3:** The nurse promotes, advocates for, and protects the rights, health, and safety of the patient.
- ANA Scope and Standards of Practice
 - Standards of Practice
 - Standard 1: Assessment
The nurse systematically evaluates the quality and effectiveness of nursing practice.
 - Standard 2: Diagnosis
The registered nurse analyzes assessment data to determine actual or potential diagnoses, problems, and issues.
 - Standard 3: Outcomes Identification
The registered nurse identified expected outcomes for a plan individualized to the healthcare consumer or the situation.
 - Standard 4: Planning
The registered nurse develops a plan that prescribes strategies to attain expected, measurable outcomes.
 - Standard 5: Implementation
The registered nurse implements the identified plan.
 - Standard 6: Evaluation
The registered nurse evaluates progress toward attainment of goals and outcomes.
- QSEN: Safety
- The Joint Commission - National Patient Safety Goals
 - Eliminate transfusion errors related to misidentification
 - Reduce the risk of patient harm resulting from falls
 - Prevent health care- associated pressure ulcers
 - Patient safety risk
- Related UCDH Policies:
 - Administration of Blood and Blood Components, UC Davis Health, [Policy: 13012](#)
 - Restraints, UC Davis Health, [Policy: 4069](#)
 - Use of Restraints Protocol for Specific Patient Conditions, UC Davis Health, [Policy: 4070](#)
 - Patient at Risk for Falling, UC Davis Health, [Policy: 4005](#)
 - Observation of the Suicidal, Agitated, Behaviorally Difficult, and High Safety Risk Hospitalized Patient, UC Davis Health, [Policy: 4072](#)

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|---|---|---|
| <ul style="list-style-type: none"> • Braden scale • National Patient Safety Goals • Staff development opportunities • Unit, department, and organizational plan for patient quality and safety • Understand the inherent risks in blood product administration • Safe use of restraints | <ul style="list-style-type: none"> ▪ Able to access policy and procedure ▪ Able to access online resources ▪ Access clinical resources ▪ Access quality and safety data ▪ Safe use of restraints ▪ Safely administer Blood Products | <ul style="list-style-type: none"> ♦ Utilization of data to improve patient outcomes |

| Initial competency: | |
|--|---|
| Education: <ul style="list-style-type: none"> • Initial orientation to include: <ul style="list-style-type: none"> ▪ Pressure ulcer assessment and prevention (K/S) ▪ Falls risk assessment and prevention (K) ▪ Restraints: module, test, skills assessment (K/S) ▪ Suicide Risk (K) | Validation: <ul style="list-style-type: none"> • Completion of IV Verification (K/S) • Completion of Arterial Puncture Verification, as required by department (K/S) • UC Learning modules: (K) <ul style="list-style-type: none"> ▪ Restraints ▪ Fall prevention ▪ Pediatric Falls Assessment using the Cummings Scale (if working with pediatric population) ▪ Blood Product Administration • Simulated performance in general orientation (K/S) • Consistent performance in precepted experience of provision of patient safety (K/S/A) |

Competency Title: Professional Practice

Competency Statement: The nurse will provide professional nursing care consistent with organization and department philosophy, values, mission, and goals.

Supporting Standards:

- [ANA Code of Ethics](#)
- [ANA Scope and Standards of Practice](#)
 - Standards of Professional Performance
 - Standard 7: Ethics
The registered nurse practices ethically.
 - Standard 10: Collaboration
The registered nurse collaborates with the healthcare consumer and other key stakeholders in the conduct of nursing practice.
 - Standard 11: Leadership
The registered nurse leads within the professional practice setting and the profession.
 - Standard 12: Education
The registered nurse seeks knowledge and competence that reflects current nursing practice and promotes futuristic thinking.
 - Standard 14: Quality of Practice
The registered nurse contributes to quality nursing practice.
 - Standard 15: Professional Practice Evaluation
The registered nurse evaluates one's own and other's nursing practice
- [Institute of Medicine – The Future of Nursing: Leading Change, Advancing Health](#)
- QSEN: Teamwork and Collaboration, Patient-Centered Care, Quality Improvement
- [UC Davis Health Professional Practice Model and Relationship-Based Culture](#)
- Related UCDH [22001 Patient Care Services Structure Standards:](#)
 - Nursing Professional Practice-pg. 3
 - Nursing Strategic Plan-pg.10
 - Maintenance of Professional Practice- pg.29

| Knowledge (Cognitive) | Skills (Psychomotor) | Attitudes (Affective) |
|--|--|--|
| <ul style="list-style-type: none"> • UCDH Professional Practice Model of Nursing • UCDH/PCS philosophy, mission, and goals • Nursing job description/ performance criteria • ANA Code of Ethics • Professional Governance Structure • Performance Evaluation • Professional Development opportunities | <ul style="list-style-type: none"> ▪ Access web-based resources for professional nursing development ▪ Access job description/performance evaluation/policy/tools ▪ Uses Peer Review skills | <ul style="list-style-type: none"> ♦ Values professional development ♦ Supports ANA Code of ethics |

| Initial competency: | |
|---|--|
| Education: <ul style="list-style-type: none"> • Initial orientation to include: <ul style="list-style-type: none"> ▪ UCDH Nursing Professional Practice Model (K/A) ▪ Organization values, mission, goals, and philosophy (K/A) ▪ Organizational structure (K) ▪ Personnel policy/resources (K) ▪ Professional development opportunities and support (K) ▪ Ethics committee (K) ▪ Primary nursing structure (K) | Validation: <ul style="list-style-type: none"> • Demonstrates consistent performance in precepted experience of professional nursing care (K/S/A) • Completion of Professional Development Plan (K/S/A) |