

CONTINUING COMPETENCE FRAMEWORK

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Introduction
Continuing Competence Framework
Components
Glossary of Terms

ANMC Continuing Competence Framework

Component	Requirement
<p>PROFESSIONAL PORTFOLIO</p> <p>Electronic or hard copy format to record evidence of each component (For further explanation of assessment, see page 6)</p>	<p style="text-align: center;">Assessment</p> <ul style="list-style-type: none"> Annual self assessment of performance in current role, against the relevant ANMC competency standards. Annual professional review. Annual self declaration of competence. <p style="text-align: right; font-size: small;">(For further explanation of assessment, see page 6)</p>
	<p style="text-align: center;">Continuing Professional Development (CPD)</p> <ul style="list-style-type: none"> Annual completion of 20 hours. <p style="text-align: right; font-size: small;">(For further explanation of CPD, see page 8)</p>
	<p style="text-align: center;">Recency of Practice</p> <ul style="list-style-type: none"> Nurses and midwives must meet the recency of practice requirements as set out in the respective state/territory legislation <p style="text-align: right; font-size: small;">(For further explanation of recency of practice, see page 9)</p>

Introduction

The Australian Nursing and Midwifery Council (ANMC) leads a national approach with state and territory nursing and midwifery regulatory authorities (NMRAs) in evolving national standards for regulation of the nursing and midwifery professions that are flexible, effective and responsive to the health care requirements of the Australian population. The standards are developed in relation to the current regulatory and legislative environments that govern healthcare in Australia.

The purpose of regulation is the protection of the public. To this end, the ANMC safeguards the interests of the community by promoting high standards of nursing and midwifery practice through the development and maintenance of competency standards and other professional practice standards.

Registered and enrolled nurses and midwives authorised to practise in Australia have a professional responsibility to ensure that they are competent to practise. Increasing consumer expectations, demographic and social changes, changing relationships between health workers, new technology, a greater focus on research and evidence based practice, and new therapeutics allowing a greater capacity to treat a range of health problems underpin the need for nurses and midwives to maintain their competence.

What is Continuing Competence?

Competence is the combination of skills, knowledge, attitudes, values and abilities that underpin effective and/or superior performance in a profession/occupational area and context of practice. Continuing competence is the ability of nurses and midwives to demonstrate that they have maintained their competence to practise in relation to their context of practice, and the relevant ANMC competency standards under which they gain and retain their licence to practise.

What is the ANMC Continuing Competence Framework?

The ANMC Continuing Competence Framework is a structure that assists nurses and midwives to systematically evaluate their practice against the relevant ANMC competency standards, in order to identify practice development and learning needs and to demonstrate their continued competence to practise. The Framework standards act as a benchmark by which NMRAs and employers can measure the nurse or midwife's continued competence to practise.

For the purposes of renewal of registration, enrolment or authorisation to practise, nurses and midwives are expected to demonstrate their continued competence at entry to practice level, in accordance with the relevant ANMC competency standards. Nurses and midwives working at advanced levels or in specialty roles will be required to demonstrate competence in relation to their context of practice.

Why has the Framework been developed?

The ANMC Continuing Competence Framework has been developed to provide nurses, midwives, NMRAs and employers with a national process for the demonstration of ongoing competence to practise. The Framework will facilitate protection of the public by providing a mechanism for nurses and midwives to demonstrate their continuing competence to practice.

The Framework builds on current state and territory continuing competence requirements and will ensure that the process that nurses and midwives undertake to maintain their competence to practise is standardised, systematic and easy to understand. The Framework will also build on continuing competence activities that are already undertaken by nurses and midwives, by recognising participation in existing continuing professional development (CPD) programs offered by professional organisations and employers.

With the move to national regulation in 2010, it is anticipated that the Framework will become part of the national suite of professional standards used by the professions to ensure that nurses and midwives are safe practitioners.

What are the aims of the Framework?

The aims of the Framework are to:

- provide a national, standardised process for nurses and midwives to demonstrate their continued competence to practise;
- set standards for the assessment of competence to practise;
- set standards for participation in continuing professional development and practice; and
- guide nurses and midwives in developing and maintaining a record of their participation in the ANMC Continuing Competence Framework, through the use of a professional portfolio.

The Components of the ANMC Continuing Competence Framework

The Framework consists of four components:

- **Maintaining a professional portfolio;**
- **Assessment of practice;**
- **Continuing Professional Development; and**
- **Recency of practice.**

All components of the Framework will be required in order for nurses and midwives to be eligible for renewal of registration, enrolment, endorsement or authorisation.

Each component of the Framework is detailed in this document in a consistent format for ease of understanding, using the following headings:

- Standard;
- Measurement criteria; and
- Guidelines for providing evidence.

To fully understand the Framework and how it relates to an individual nurse or midwife's practice, it is advisable to refer to the **Framework Glossary** whilst reading this document.

Diagram 1

ANMC Continuing Competence Framework

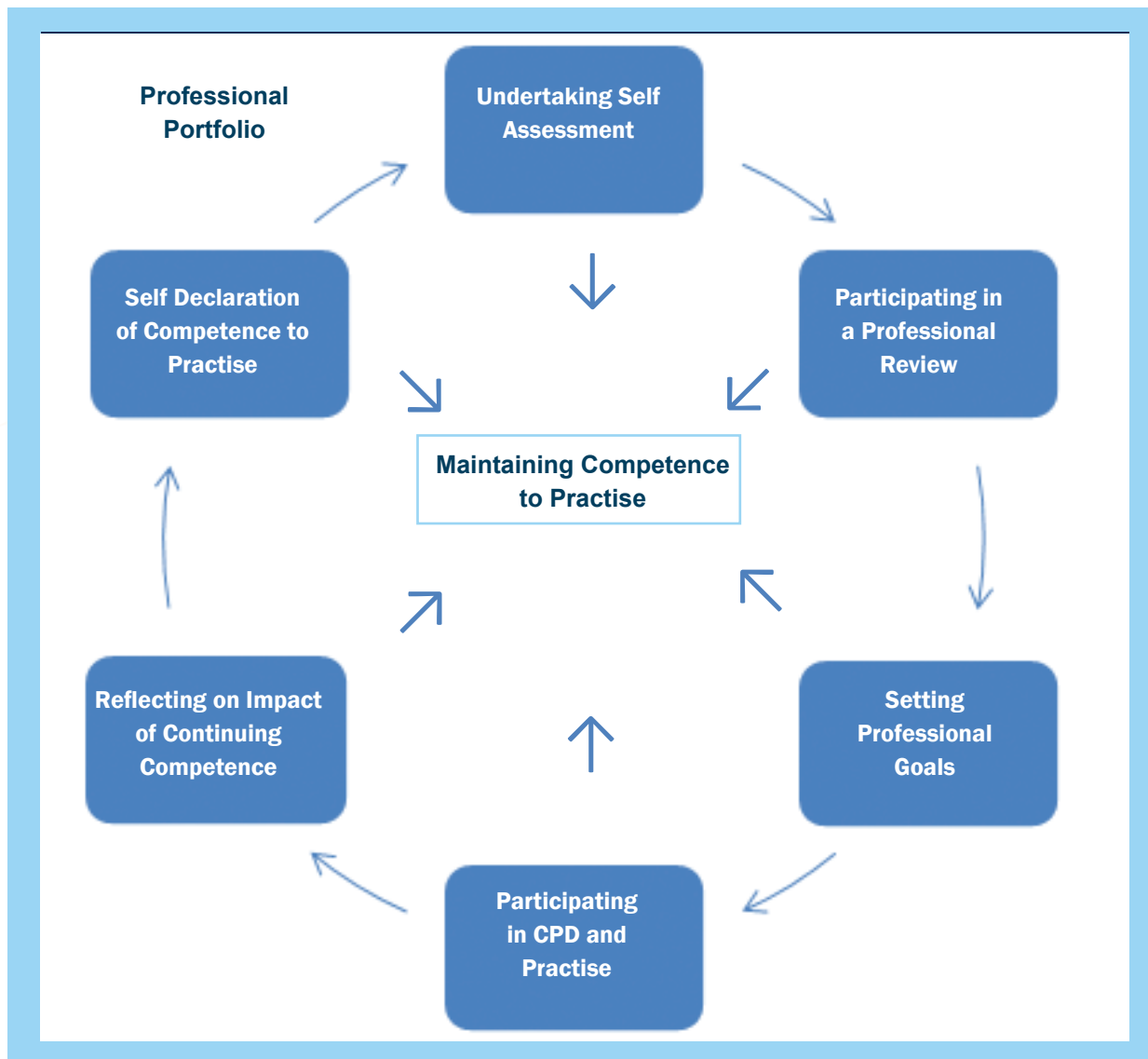
Diagram 1 represents the components of the Framework that nurses and midwives will be required to undertake in order to demonstrate their competence to practise. Evidence of meeting the components should be recorded in a **Professional Portfolio**, which may be in electronic or hard copy format.

Component	Requirement
PROFESSIONAL PORTFOLIO Electronic or hard copy format to record evidence of each component (For further explanation of portfolios, see page 6)	Assessment <ul style="list-style-type: none">• Annual self assessment of performance in current role, against the relevant ANMC competency standards.• Annual professional review.• Annual self declaration of competence. (For further explanation of assessment, see page 6)
	Continuing Professional Development (CPD) <ul style="list-style-type: none">• Annual completion of 20 hours. (For further explanation of CPD, see page 8)
	Recency of Practice <ul style="list-style-type: none">• Nurses and midwives must meet the recency of practice requirements as set out in the respective state/territory legislation (For further explanation of recency of practice, see page 9)

Diagram 2

Maintaining Competence to Practise

Maintaining competence is a continuous process which can be viewed as a cycle of assessment, professional feedback and review, goal setting, participating in continuing professional development (CPD) and reflection. **Diagram 2** below illustrates how these components interlink, and are recorded in a professional portfolio.



Components of the ANMC Continuing Competence Framework

1. PROFESSIONAL PORTFOLIO

Portfolio Standards

Nurses and midwives will maintain a comprehensive, current portfolio which contains sufficient evidence to demonstrate their continuing competence to practise in their current area and context of practice.

Measurement Criteria

As a minimum, the portfolio will demonstrate that the nurse or midwife has:

- undertaken an annual self assessment of their nursing and/or midwifery role against the relevant ANMC competency standards;
- participated in an annual professional review based on their self assessment;
- participated in Continuing Professional Development (CPD) as detailed on pg 8;
- has practiced within the last 5 years (or as detailed in relevant state/territory legislation); and
- signed an annual self declaration of competence.

Documentary evidence that should be used to demonstrate compliance with each component of the Continuing Competence Framework is described under the relevant component section.

Guidelines for Maintaining a Portfolio

The portfolio must include **all** the measurement criteria requirements described above and may also contain a variety of records that document the development of the nurse or midwife's professional career. Documentation that is included in the portfolio will be dependent on the nurse or midwife's history of practice and education, including:

- Professional history – Curriculum Vitae, job descriptions, registration certificates, educational transcripts and awards, employment records.
- Professional activities – presentations and publications, membership and roles in professional organisations, awards and commendations, research activities, and any other documents demonstrating relevant professional achievements.

The portfolio does **not** need to be submitted for annual re-registration. NMRAs may, however, request submission of the portfolio for audit purposes. Documents that will be required at this time will include evidence of participation in a professional review process, practice undertaken and CPD.

Nurses and midwives may develop their own portfolio or may use a portfolio developed by professional organisations for CPD or credentialing programs. It may be an electronic portfolio or kept in hard copy. The principal requirement for the portfolio is that it contains sufficient evidence to demonstrate compliance with the requirements of the ANMC Continuing Competence Framework.

2. ASSESSMENT

Assessment Standard

Nurses and midwives will complete an annual *self assessment* of their competence to practise in their context of practice against the relevant ANMC competency standards, participate in a *professional review* and sign an annual *declaration of competence*.

Measurement Criteria

Self assessment

- a reflection on practice or episode of practice, comparing the individual's practice against the relevant ANMC competency standards; **or**
- completion of a self-assessment tool/questionnaire/competency standards checklist.

Professional Review

- a signed statement or certificate from the reviewer or review panel, or written feedback notes provided by the reviewer/s.

Declaration of competence

- submission of a signed declaration of competence to practise to the NMRA, at the time of renewal of registration.

Guidelines for Assessment

Self assessment – Self assessment tools developed by professional organisations for use in CPD and credentialing programs may be used to compare practice against ANMC competency standards, provided that they encompass all the relevant ANMC competency standards, and that any competency standards that are not included in the program tools are covered separately.

For individuals whose job roles comprise both nursing and midwifery practice, both sets of ANMC competency standards must be addressed, however, as there will be some overlap between each set of competency standards, nurses or midwives need only address overlapping competency standards or cues once.

Components of the ANMC Continuing Competence Framework (continued)

2. ASSESSMENT (continued)

Professional review – Workplace appraisal or other methods of assessment, such as credentialing programs, will be accepted as a professional review, provided they meet the professional review guidelines.

The Professional review:

- should be conducted as an interview;
- may consist of a single reviewer or a panel of reviewers; and
- may include a reviewer who is a professional peer of the individual undergoing the review.

Note: Nurses and midwives who work in rural or remote areas, in isolation or in independent roles may seek a professional review from professional organisations, members of professional interest groups or from nurses or midwives who work in similar roles.

Reviewers:

- should be competent to assess and should either have gained a qualification appropriate for the role and/or undertaken workplace assessment training;
- may include ancillary reviewers. Ancillary reviewers include health professionals without a nursing or midwifery qualification, colleagues, managers or consumers, but must have experience in or an understanding of the service delivery context in which the nurse or midwife works. Professional members of the panel should have a direct managerial or advisory relationship with the nurse or midwife undergoing review; and
- Ancillary reviewers are not permitted to assess the competence of the nurse or midwife but may provide feedback on the quality of service delivery and input into the identification of learning needs. The responsibility for assessing competence rests with the peer reviewer.

The review process should include:

- a review of the nurse or midwife's self assessment;
- an evaluation of the nurse or midwife's practice in relation to the relevant ANMC competency standards and the context in which they practice; and
- an identification of areas for practice improvement and learning needs, which will form the basis of a professional development plan.

Evidence collected by the reviewer/s may include one or more of the following:

- observation/s of performance;
- audit of documents such as clinical records, teaching materials, project material or other relevant documentation;
- reviewer's interview of the nurse or midwife to reveal intentions and attitudes;
- reviewer's interview of colleagues and persons to collect data regarding outcomes of practice;
- testing (for example drug calculations, written assignments, multiple choice questions); and
- examining records of previous achievements.

Declaration of Competence – By signing the declaration of competence, nurses and midwives are confirming that they are competent to practise in their area and context of practice, and have complied with all Continuing Competence requirements. A copy of the declaration should be kept in the professional portfolio.

3. CONTINUING PROFESSIONAL DEVELOPMENT (CPD)

CPD Standard

Nurses and midwives will participate in at least 20 hours (points) of CPD per year, with a minimum of 60 hours (points) every three years. Documentation of participation in CPD must be completed at least once each year.

Measurement Criteria

Evidence of completion of 20 hours (points) of CPD in either a self-directed learning program and/or a formal CPD program, relevant to the nurse or midwife's context of practice.

Guidelines for Participating in CPD

For the purposes of the ANMC Continuing Competence Framework, one hour of active learning will equal one hour (point) of CPD. It is the nurse or midwife's responsibility to calculate how many hours (points) of active learning have taken place. For individuals whose job roles include both nursing and midwifery practice, learning needs from both roles should be considered and included in the 20 hours (points) per year. Documentation must provide details of any CPD activities, including dates, a brief description and hours (points) spent in each activity.

Self directed CPD

Documentation of self-directed CPD must demonstrate that:

- the nurse or midwife has identified and prioritised their learning needs, based on an evaluation of their practice against the relevant ANMC competency standards;
- has developed a learning plan based on identified learning needs;
- has participated in effective learning activities relevant to their learning needs; and
- has reflected on the value or impact on practice of participation in the learning activities.

Formal CPD programs

Formal CPD programs offered through professional organisations or endorsed by professional organisations (eg. Royal College of Nursing, *Australia's* (Life Long Learning Program (3LP) or the Australian College of Midwives (Mid PLUS CPD) should be based on best practice principles in CPD, which means that the program:

- takes a broad approach to CPD and encourages participation in effective learning activities;
- is based on the identification and prioritisation of learning needs by the individual nurse or midwife, and participation in a choice of activities that suit individual learning style;
- allows nurses and midwives to evaluate the quality and value of CPD activities themselves, and
- promotes reflective learning.

Effectiveness in CPD

Effective CPD activities are those in which learning is more likely to lead to a change in practice (see Page 9 for examples). Other activities may also be considered effective if they involve the active learning of new skills or knowledge. It is the responsibility of the nurse or midwife to keep a record of their participation in informal CPD activities and to participate in a variety of CPD activities each year.

Participation in mandatory continuing education, such as Basic Life Support training or manual handling, should not be counted as CPD **unless** active learning of new knowledge or skills has taken place.

3. CONTINUING PROFESSIONAL DEVELOPMENT (Continued)

Examples of Effective CPD Activities

- Reflecting on feedback, keeping a practice journal
- Acting as a preceptor/mentor/tutor
- Participating on accreditation, audit or quality improvement committees
- Undertaking supervised practice for skills development
- Participating in clinical audits, critical incident monitoring, case reviews and clinical meetings
- Participating in a professional reading and discussion group
- Developing skills in IT, numeracy, communications, improving own performance, problem solving and working with others
- Writing or reviewing educational materials, journal articles, books
- Active membership of professional groups and committees
- Reading professional journals or books
- Writing for publication
- Developing policy, protocols or guidelines
- Working with a mentor to improve practice
- Presenting at or attending workplace education, in-service sessions or skills workshops
- Undertaking undergraduate or postgraduate studies which are of relevance to the context of practice
- Presenting at or attending conferences, lectures, seminars or professional meetings
- Conducting or contributing to research
- Undertaking relevant online or distance education

4. RECENCY OF PRACTICE

Practice – Practice is defined as any role in which the individual uses their nursing or midwifery skills and knowledge. It should be noted that for the purposes of the National Continuing Competence Framework, practice is not restricted to the provision of direct clinical care only. Being ‘in practice’ therefore includes using nursing or midwifery knowledge in a direct relationship with clients, and working in nursing or midwifery management, administration, education, research, professional advice, regulatory or policy development roles and any other roles which impact on safe, effective nursing or midwifery service delivery (adapted from NCNZ 2004).

Practice Standard

Nurses and midwives will fulfil the requirements of state/territory legislation relating to recency of practice:

- Nurses and midwives must have practiced in their respective professions within the last 5 years (or as stated in the relevant jurisdictional legislation); or
- Can demonstrate successful completion of a recognised re-entry to practice program; or
- Can demonstrate successful completion of a supervised practice experience.

Measurement Criteria

Evidence will be one of the following:

- a letter or statutory declaration from an employer confirming employment in professional practice as defined above, or pay slips indicating ongoing employment;
- any documentation confirming enrolment in and completion of post-graduate education leading or lead to a nursing or midwifery award or qualification; or
- a statutory declaration by the nurse or midwife indicating the amount of time spent in practice.

Guidelines for Recency of Practice

Practice hours are recognised if:

- the nurse or midwife held an Australian state or territory practising certificate when the hours were worked;
- the role involved the use of nursing and/or midwifery knowledge and skills in some capacity, as defined above; or
- the time spent undertaking post-graduate education leading to an award or qualification are relevant to the practice of nursing and/or midwifery.

Extended time away from practice due to illness or any type of leave may not be counted as practice. Exceptions to this requirement are detailed on Page 10 under exemptions.

ADDITIONAL INFORMATION

Retention of Records

Nurses and midwives are responsible for maintaining their records that demonstrate their achievement of the continuing competence standards. It is recommended that records should be retained for at least six years. Records do not need to be submitted to the NMRA unless required for audit purposes.

Compliance Audit

Each year, the NMRA will conduct a random audit of 2% of nurses and midwives. The audit will involve a review of compliance with the ANMC Continuing Competence Framework requirements.

Nurses and midwives selected for an audit will receive notification that they will be required to undertake an audit. A form will be provided which should be completed accurately and returned to the NMRA within six weeks.

The NMRA will grant, at its discretion, a three-month period to nurses and midwives to allow them to fulfil the Continuing Competence requirements. This will provide these nurses and midwives with further time to either satisfactorily complete all Continuing Competence requirements or to consider relinquishing their practising certificate. Any nurse or midwife who fails to successfully complete the audit process will be sent a letter of notification of impending cancellation of the practising certificate.

Exemptions

Nurses and midwives may request an exemption from one or more of the ANMC Continuing Competence Framework requirements. Exemptions are granted at the discretion of the NMRA and may be granted for situations including parental or bereavement leave, periods of overseas employment or similar. Exemptions may be for a period of time, or for part of a component of the Framework.

Any nurse or midwife who is unable to or unsure if they are able to meet the Continuing Competence requirements should contact the relevant NMRA to discuss their request for an exemption.

Appeals and Grievance Process

Appeals against the cancellation of registration, enrolment, endorsement or authorisation by the NMRA, and requests for a review of the determination should be made in writing within 30 days of the date of issue of the determination document and forwarded to the NMRA. The letter must indicate the grounds for appeal or reason the applicant is seeking a review.

Glossary of Terms

The following glossary has been developed to provide definitions of the terms used in the ANMC Continuing Competence Framework.

Ancillary reviewer – an individual who acts as a reviewer in a formal review process, but is not from the same profession and therefore, does not have the same qualifications and/or experience as the individual undergoing review.

Area of Practice – the general or specialty area in which the nurse or midwife works, e.g. paediatric nursing, management.

Assessment – a comparison of an individual's practice against relevant nursing or midwifery competency standards. Assessment is undertaken to promote improvements in the nurse or midwife's practice, by identifying practice development and learning needs.

Audit – the process undertaken by NMRAs to gather evidence relating to the validity and accuracy of randomly selected nurses' and midwives' compliance with continuing competence requirements. This process is undertaken to protect the health and safety of the recipients of healthcare, by ensuring that nurses and midwives are competent and fit to practise.

Case Study – the presentation of real life cases (or scenarios), through which nurses and midwives can demonstrate the standard of the care they provide, their decision-making and their ability to integrate knowledge and skills.

Competence – the combination of skills, knowledge, attitudes, values and abilities that underpin effective nursing or midwifery performance in the individual's area and context of practice.

Competence assessment – an evaluation of an individual nurse or midwife's ongoing ability to integrate and apply the knowledge, skills, abilities and attitudes necessary for effective performance in their area and context of practice.

Context of Practice – the conditions that define an individual's nursing or midwifery practice. These include the type of practice setting (e.g. healthcare agency, educational organisation, private practice); the location of the practice setting (e.g. urban, rural, remote); the characteristics of patients or clients (e.g. health status, age, learning needs); the focus of nursing or midwifery activities (e.g. health promotion, research, management); the complexity of practice; the degree to which practice is autonomous; and the resources which are available, including access to other healthcare professionals.

Continuing Competence – the ability of nurses and midwives to demonstrate that they have maintained their competence in their current area and context of practice.

Continuing Professional Development – (or CPD) the ongoing, systematic, learning process that nurses and midwives undertake to maintain their competence to practise and to enhance their professional and personal skills and knowledge. The CPD cycle involves reviewing practice, identifying learning needs, planning and participating in relevant learning activities and reflecting on the value of those activities.

Declaration of Competence – a formal declaration made by a nurse or a midwife that they have maintained their competence to practise and have complied with continuing competence requirements.

Evidence – the documents that provide proof of compliance with continuing competence requirements. Evidence must include a professional portfolio, and may include such items as written feedback notes from an assessment process or records of participation in learning activities.

Learning Activity – an interaction between the learner and an educational activity that results in a change in the learner's knowledge, skills, attitudes or abilities.

Learning Need – A gap between the knowledge and skills that an individual already possesses and the knowledge and skills that they need to know.

Learning Plan – a plan for participation in learning activities. The plan is developed following the identification of learning needs and includes documentation of participation in learning activities and a reflection on the value or impact of those activities.

Measurement Criteria – the standards by which participation in the ANMC Continuing Competence Framework will be measured.

NMRAs – Nursing and Midwifery Regulatory Authorities.

Peer – an individual of equal status and qualifications. For the purposes of assessing continuing competence, the peer must be from the same profession, and can be a colleague who has similar nursing or midwifery qualifications and experience, or has a similar role to the individual being assessed. A peer must be suitably qualified as an assessor and/or be experienced in undertaking assessment and providing feedback.

Peer Review – a process by which a nurse or midwife's practice is examined, discussed and critiqued by one or more peers. The purpose of the peer review is to identify areas of excellence or areas for improvement.

Practice – Practice is defined as any role in which the individual uses their nursing or midwifery skills and knowledge. It should be noted that for the purposes of the ANMC Continuing Competence Framework, practice is not restricted to the provision of direct clinical care only. Being 'in practice' therefore includes using nursing or midwifery knowledge in a direct relationship with clients, and working in nursing or midwifery management, administration, education, research, professional advice, regulatory or policy development roles and any other roles which impact on safe, effective nursing or midwifery service delivery (adapted from NCNZ 2004).

Professional Accountability – being responsible for one's professional actions and decisions, and accepting the consequences. Nurses and midwives demonstrate accountability through their decision-making, competency and integrity, which is reflected through their actions and through accurate documentation (adapted from CNO).

Professional Feedback – the process of obtaining feedback on professional practice, through a formal assessment process. This may take the form of performance assessment or peer review.

Professional Portfolio – The portfolio is an organised collection of evidence that contains details of professional nursing or midwifery education and practice experience, including job roles and responsibilities, ongoing learning and development and other related activities. It is both retrospective and prospective, as well as reflecting the current stage of development of the individual (adapted from Andre & Heartfield, 2007). The purpose of a professional portfolio is to record and demonstrate the nurse or midwife's continuing acquisition of skills, knowledge, understanding and achievement.

Reflection – (or reflective practice) is a process of professional learning and development by examining one's practice, including experiences, thoughts, feelings, actions and knowledge.

Role – A distinct area of practice within a profession, e.g. practice nursing, aged care, education.

Self assessment – the process the nurse or midwife undertakes to compare their own performance against the relevant competency standards to identify practice and knowledge gaps, in order to develop learning goals.

Standard – a desired and achievable level of performance against which a nurse or midwife's actual performance can be compared. For the purpose of the ANMC Continuing Competence Framework, a standard sets a minimum level of achievement for each element of the framework.

Andre K, Heartfield M 2007. *Professional Portfolios - Evidence of Competency for Nurses and Midwives*.

Nursing Council of New Zealand 2004, *Annual Practising Certificates*, available at: <http://www.nursingcouncil.org.nz>, accessed: 17 August 2007.