Master of Nursing
Nurse Practitioner
SNNP02

Charles Darwin University

Information for Prospective Students

Contents

Introduction

The Master of Nursing (Nurse Practitioner) (SNNP02), offered by the Faculty of Health at Charles Darwin University, is accredited by the Australian Nursing and Midwifery Accreditation Council (ANMAC) and includes the additional clinical entry requirements outlined below. The program is also approved by the Nursing and Midwifery Board (NMBA) of Australia, enabling graduates to apply for endorsement as a Nurse Practitioner (NP). The NMBA operates under the Australian Health Practitioner Regulation Agency (AHPRA). Applicants for the course must have support from their healthcare organisation while undertaking Nurse Practitioner studies.

Eligibility

To demonstrate your eligibility for the Master of Nursing (Nurse Practitioner) SNNP02, you must provide the following information
Hold current general registration as a Registered Nurse with unrestricted registration to practice as a Registered nurse in Australia, with no condition on registration related to unsatisfactory professional performance or unprofessional conduct.
Have completed a postgraduate qualification(degree) at AQF level 8, i.e. postgraduate certificate or higher in a clinical field.
A current CV demonstrating evidence of: Completion of a minimum of 3600 hours of clinical practice as a Registered Nurse in a specified clinical field and a minimum of additional 1800 hours of current*, clinically based advanced nursing practice relevant to your postgraduate study. *Current means within the previous 6 years
Completion of the Australian Advanced Practice Self Appraisal Tool & Peer Review to demonstrating evidence of clinically based advanced nursing practice.
Evidence of health service organisational support where integrated professional practice is undertaken (Form 1)

Applicant Checklist

Documents to be submitted	**Completed**
1. Current AHPRA registration	
2. Qualifications - AQF level 8 (or above). 3. Clinically focused post graduate qualification related to your chosen specialty	
4. A current detailed CV (Recommended CV format below)	
5. Completion of the Australian Advanced Practice Self Appraisal Tool & Peer Review (Appendix 3)	
6. Detailed statements of service including roles, dates, total hours worked	

7. Organisation Support Letter (Form 1) • A letter of support from nominated healthcare organisation confirming its commitment to provide placement opportunities for a minimum of 300 hours of supernumerary Integrated Professional Practice (IPP)	
8. Clinical Support Team Form (Form 2) • Nurse Practitioner • Medical Practitioner • Pharmacist	

Recommended Curriculum Vitae Format

Applicants must submit a comprehensive curriculum vitae (CV) as part of their application. In addition to outlining their nursing experience, the CV should demonstrate alignment with the Nurse Practitioner Standards for Practice as defined by the Nursing and Midwifery Board of Australia (2021).

The CV should include the following information:

Full name and contact details
Qualifications
Employment and/or practice history (in chronological order), including: • dates of employment (including total hours worked) • position title • workplace/health facility • key responsibilities
Evidence of capability in the following areas: • clinical practice • education • research and quality improvement • leadership • systems support
Declaration: The CV must include the following statement, signed and dated by the applicant: "This curriculum vitae is true and correct as at (insert date)."

Clinical Support Requirement

Applicants must provide the following documentation:
1. A letter of support from their nominated healthcare organisation confirming its commitment to provide placement opportunities for a minimum of 300 hours of supernumerary Integrated Professional Practice (IPP)
2. Applicants must submit a completed and signed Clinical Support Team (CST) form that includes one medical practitioner, one nurse practitioner, and one pharmacist

Your Clinical Support Team will support you throughout your enrolment in the course. CST members must be readily accessible to ensure ongoing direct and indirect supervision, guidance, and mentoring during your studies.

Conditions for Registered Nurses enrolled in the course

1. Students who change their supporting healthcare organisation after submitting their application, either before or after commencing the course, must provide all required documentation from the new organisation to the faculty via NursePractitioner@cdu.edu.au for assessment and approval. Failure to comply with this requirement may result in withdrawal from the course.

2. Students must comply with the National Law by notifying AHPRA of any impairment that may place the public at risk during participation in Integrated Professional Practice.

3. Students must meet all health service entry requirements for Integrated Professional Practice placements. These include evidence of immunisation status, Working with Children Clearance, and an Australian Federal Police (AFP) National Police Check.

4. Students must also comply with the requirements outlined in the Nursing and Midwifery Board of Australia's (NMBA) Endorsement as a Nurse Practitioner Registration Standard. Applicants should refer to the NMBA website for the most current information and guidance.

Role of the Clinical Support Team

The Clinical Support Team (CST) plays a critical role in supporting the development of the Nurse Practitioner (NP) student's advanced clinical practice throughout the course. Working collaboratively with the student, the CST provides guidance and supervision to enhance clinical skills, critical thinking, diagnostic reasoning, clinical decision-making, patient management, and professional practice. As Nurse Practitioners work closely within multidisciplinary healthcare teams, ongoing collaboration with the CST is essential in preparing students for the NP role.

The CST provides both direct and indirect supervision throughout the duration of the program. Direct supervision occurs when the clinical mentor or support team member is physically present in the same clinical space as the student. Indirect supervision occurs when the mentor or support team member is nearby and readily accessible for consultation, support, and mentoring, such as within the same ward, outpatient department, or hospital campus.

Clinical Support Team (CST) Composition

The Clinical Support Team (CST) must comprise three members:
1. One Nurse Practitioner
2. One Medical Practitioner; and
3. One Pharmacist

To ensure accessibility and continuity of supervision, all CST members must be employed at a minimum of 0.5 full-time equivalent (FTE). Casual staff members are not eligible for CST roles, as consistent supervision and mentoring are essential. It is also desirable that CST members hold postgraduate qualifications in education and/or have experience supervising NP students, registrars, or medical students.

Clinical Mentor Requirements and Responsibilities

The Clinical Mentor (CM) role may be undertaken by either the Nurse Practitioner or Medical Practitioner. The CM is responsible for providing clinical supervision, professional guidance, and support to the NP student throughout the course. The Clinical Mentor must have relevant clinical expertise, with Nurse Practitioners requiring a minimum of one year of full-time experience in their specialty area.

While the CM oversees the student's clinical learning, they are not required to supervise all Integrated Professional Practice (IPP) hours completed by the student.

The responsibilities of the Clinical Mentor include:

- providing clinical guidance relevant to the student's area of practice;
- supporting the development of the student's clinical goals and expanded practice competencies;
- assessing and reporting on the student's ability to practice safely and competently in an advanced role; and
- participating in clinical assessments as required by individual course units

CST Member Requirements and Responsibilities

In addition to the Clinical Mentor, the CST must include two additional members:

- either a Nurse Practitioner or Medical Practitioner (whichever role is not fulfilled by the Clinical Mentor); and
- a Pharmacist

The CST supports the NP student by:

- remaining accessible for clinical support and mentoring;
- participating in regular case reviews and discussions;
- assisting with clinical decision-making and patient management;
- providing recommendations for ongoing patient care;
- supporting the student's development within the NP role;
- encouraging reflective practice;
- identifying learning needs and appropriate educational resources;
- contributing to clinical teaching and supervision;
- collaborating in patient assessment and management; and
- providing ongoing formative feedback and assessment in partnership with the University.

The SNNP02 course uses the Subjective, Objective, Assessment and Plan (SOAP) framework for all patient documentation, case studies, and VIVA Voce presentations. Students are therefore expected to become proficient in presenting and discussing patient cases using the SOAP format.

Role of the Education Provider

The Course Coordinator for the Master of Nursing (Nurse Practitioner) (SNNP02) is responsible for monitoring each NP student's academic progress. In collaboration with the Unit Coordinator, they support the Clinical Mentor (CM) and Clinical Support Team (CST) by

maintaining regular contact with the student and clinical team in the workplace. This includes assisting the student in developing effective learning strategies as they transition into an expanded scope of practice, identifying individual learning needs, and planning appropriate learning activities. The coordinators also work with the CM and CST to identify students who may be "at risk" and to support the planning and implementation of student assessments.

Integrated Professional Practice (IPP) Requirements

Most NP students continue to work within their clinical specialty while completing the program. The course requires each student to complete a minimum of 300 hours of supernumerary **(Appendix 1)** Integrated Professional Practice (IPP), providing structured opportunities to develop advanced clinical skills and professional capabilities under the guidance of the Clinical Mentor (CM) and Clinical Support Team (CST). These hours are distributed across the duration of the course to support progressive professional development, as outlined below:

Year 1		**Year 2**	
Semester 1	50 hours	**Semester 1**	20 hours
Semester 2	100 hours	**Semester 2**	130 hours
Total 300 hours			

Most students undertake part-time study alongside ongoing clinical employment and the unit requirements in which they are enrolled. Given their diverse professional backgrounds, students will enter the course with varying levels of experience across different content areas. As a result, some units may align closely with their current practice, while others may present new challenges where the content differs from their usual clinical role. The CST and Unit Coordinator are available to provide support, and students are encouraged to promptly identify and communicate any difficulties related to academic content, clinical application, or time management.

If a student experiences difficulty meeting the clinical requirements of the course, it is their responsibility to notify the Course Coordinator as early as possible so that appropriate support and solutions can be implemented in collaboration with the relevant clinical area.

Student Placement Agreement (SPA) and Integrated Professional Practice (IPP)

Students are required to complete their Integrated Professional Practice (IPP) hours within their approved workplace during the teaching semester. Before any IPP hours can commence, a Student Placement Agreement (SPA) must be in place. The SPA is a formal agreement between the University and the workplace that provides the necessary legal and insurance arrangements, including student indemnity, for the duration of the placement.

Students **must not commence IPP hours until the SPA has been fully executed**. Hours completed before the SPA is in place, or outside the designated teaching semester, cannot be counted towards the course requirements.

Mandatory Intensive Teaching Week

The course includes two compulsory intensive teaching weeks. In the first year, the intensive will be held at the CDU Melbourne Campus during Week 2 of the semester. Details regarding the second intensive will be provided during the course. Further information, including dates, venue and attendance requirements, will be provided to students after enrolment.

Submitting your Application

Applications are submitted via SATAC. The completed application pack is to be submitted with the SATAC application. For all admission enquiries, please contact CDU Admission's team at admissions@cdu.edu.au.

Form 1 - Organisational Support

This form is to be completed by the Director of Nursing, or a delegated equivalent, authorised to confirm the organisation's commitment to supporting the program requirements

Applicant Details			
Given Name		**Surname**	
AHPRA registration		**Specialty Area**	
Place of employment		**Position held**	

Organisational Support			
Does the applicant hold a current employed position within your organisation?			
Applicants' Current Position (if applicable)			

☐ I confirm that the applicant has the organisation's approval to practise in an advanced practice role throughout the program and will be supported in undertaking the Master of Nursing (Nurse Practitioner).

The organisation will support the applicant by providing:
Opportunities to complete a minimum of 300 hours of supernumerary integrated professional practice and gain the clinical experience required to meet program requirements and achieve the Nursing and Midwifery Board of Australia Nurse Practitioner Standards for Practice

☐ I understand that this declaration confirms support for the applicant's studies only and does not commit the organisation to providing a Nurse Practitioner position on completion of the program

Name			
Position			
Organisation			
Email			
Phone Number			
Signature		**Date**	

Form 2 - Clinical Support Team

Applicant Details			
Given Name		**Surname**	
AHPRA registration		**Specialty Area**	

Declaration of Support: Medical Practitioner			
I confirm that I have read the documentation outlining the role and responsibilities of the Clinical Mentor/support (CM/CS) for a Nurse Practitioner student. I agree to act as the Clinical Mentor/Support for the above-named applicant while they undertake the Master of Nursing (Nurse Practitioner) at Charles Darwin University			
Name & Position			
Organisation			
Phone Number			
Email			
Signature		**Date**	

Declaration of Support: Nurse Practitioner			
I confirm that I have read the documentation outlining the role and responsibilities of the Clinical Mentor/Support (CM/CS) for a Nurse Practitioner student. I agree to act as the Clinical Mentor/Support for the above-named applicant while they undertake the Master of Nursing (Nurse Practitioner) at Charles Darwin University			
Name & Position			
Organisation			
Phone Number			
Email			
Signature		**Date**	

Declaration of Support: Pharmacist			
I confirm that I have read the documentation outlining the role and responsibilities of Clinical Support (CS) for a Nurse Practitioner student. I agree to act as the Clinical Support for the above-named applicant while they undertake the Master of Nursing (Nurse Practitioner) at Charles Darwin University			
Name & Position			
Organisation			
Phone Number			
Email			
Signature		**Date**	

Appendix 1

Australian Nursing & Midwifery Accreditation Council

www.anmac.org.au

EXPLANATORY NOTE

Interpretation and explanation of supernumerary integrated professional practice for nurse practitioner students

This explanatory note has been prepared to help education providers, professional practice providers and students of nurse practitioner programs of study understand the interpretation of supernumerary integrated professional practice in the context of nurse practitioner education. This explanatory note provides clarification relating to the interpretation of supernumerary for integrated professional practice as it must apply in nurse practitioner programs of study.

The *Nurse Practitioner Accreditation Standards* (2015) define supernumerary as:

> Where the student undertakes supervised practice outside their employed position or when they are not counted in the staffing roster.

Integrated professional practice

Integrated professional practice in the context of nurse practitioner students is undertaken:

- by registered nurses who are either employed or self-employed and are required to undertake 300 hours of professional practice to enable learning and demonstrate achievement of the Nursing and Midwifery Board of Australia's *Nurse practitioner standards for practice*
- in preparation and practice for their future role as a nurse practitioner, the students apply advanced levels of knowledge, skills and experience to perform clinical skills or episodes of care considered to be advanced practice
- under supervision of an appropriately qualified and experienced supervisor and for the duration of the integrated professional practice event, the student is supernumerary.

Integrated professional practice should provide a supported learning environment for the development of clinical skills and capability in episodes of care, including but not limited to those described in the *Nurse practitioner standards for practice*:

1. Assesses using diagnostic capability
2. Plans care and engages others
3. Prescribes and implements therapeutic interventions
4. Evaluates outcomes and improves practice

Supernumerary in context of integrated professional practice

Nurse practitioner students can obtain supernumerary integrated professional practice in one, or a combination of three ways:

1. **Undertaking scheduled and supervised integrated professional practice in the clinical setting where they are employed, but not rostered at that time.**

Nurse practitioner students undertaking supernumerary integrated professional practice in the clinical setting where they are employed do so with supervision for the tasks they are undertaking and are in addition to the usual complement of staff in the healthcare setting. The service provided in the healthcare setting could continue to be delivered without the nurse practitioner student's presence.

2. **Undertaking unscheduled, opportunistic and supervised integrated professional practice in the clinical setting where they are employed and counted in the roster of the clinical setting.**

During a rostered shift there may be an opportunity for the nurse practitioner student to become supernumerary. If the clinical workload at the time allows them to undertake the advanced practice under supervision, this can be counted as integrated professional practice time. In this circumstance the normal provision of rostered duty care cannot be compromised.

3. **Undertaking supervised practice in a clinical setting where they are not employed.**

Nurse practitioner students may visit another clinical setting within their own employment setting or health service or visit another clinical facility to undertake supernumerary integrated professional practice.

Management of supernumerary integrated professional practice

In principle, the duration of each block of supernumerary practice can vary and should be organised into periods that are manageable by the student and the health care provider. The sessions should be of sufficient duration to comprehensively develop skills and capabilities required of a nurse practitioner. The full 300 hours of supervised integrated professional practice is documented to provide evidence the student has achieved the *Nurse practitioner standards for practice* as approved by their clinical supervisor(s) and education provider.

The nurse practitioner student is responsible for negotiating a plan to meet their integrated professional practice requirements in a way that minimises disruption to the clinical setting.

Version number	Date	Short description of amendment
V1.0	April 2018	First explanatory note

Accreditation Services
17 April 2018

Appendix 2

Integrated Professional Practice (IPP) Compliance Requirements
If your application is successful, you will need to provide the following documentation before commencing your Integrated Professional Practice hours via InPlace:

Compliance Requirements
An Australian Federal Police Check (no third-party providers) issued within the last 12 months
A valid Working with Children Check (or equivalent for your state or territory)
Evidence of completion of the full immunisation schedule in line with CDU and relevant state or territory requirements
Any additional checks required by specific placement providers or employers

Appendix 3

The Australian Advanced Practice Nursing Self-Appraisal Tool (ADVANCE) is used to assess your practice against advanced practice standards. As part of your application, you are required to complete the ADVANCE tool and submit it with your application.

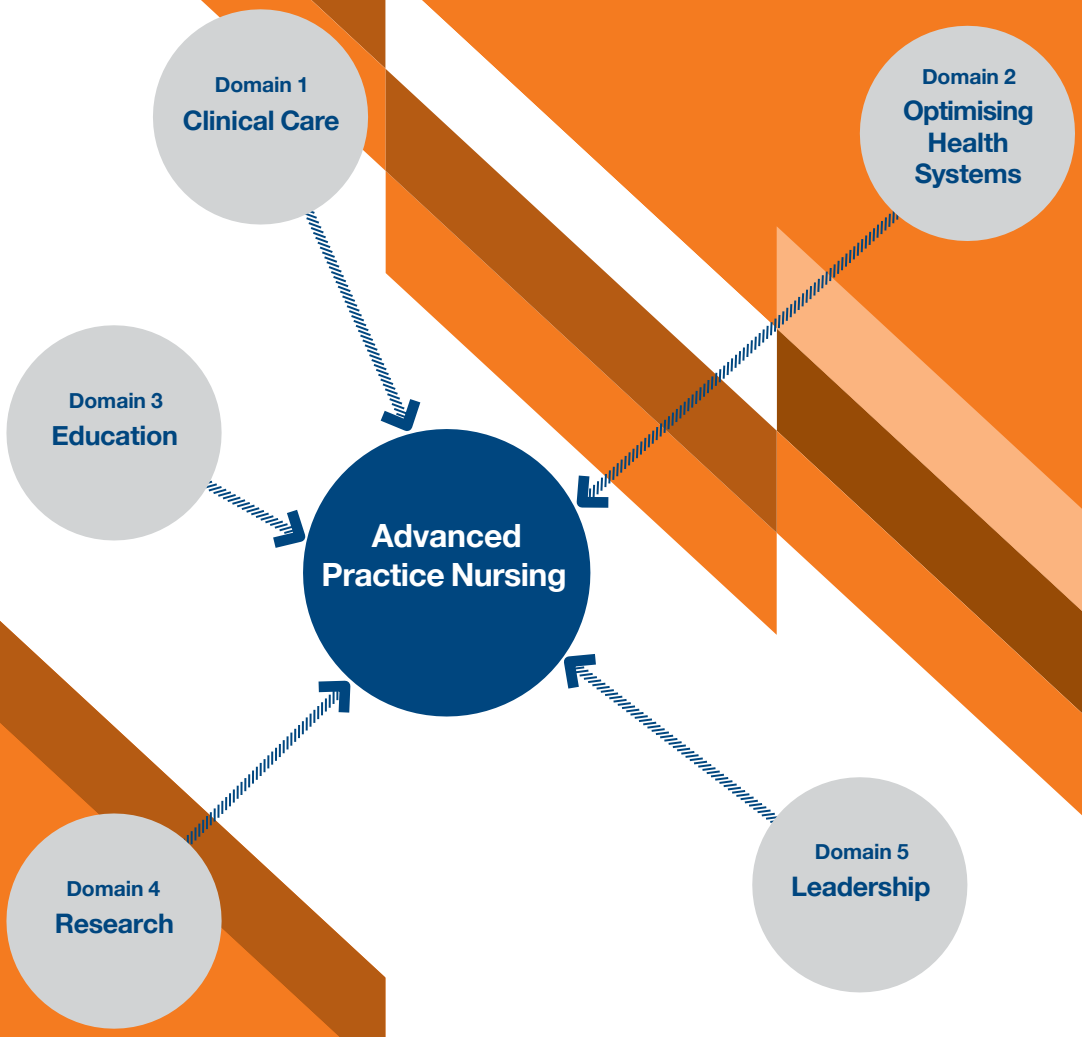
Please ensure the following sections are fully completed:

- Part A: Self-Assessment
- Part B: Justification and Evidence
- Manager/Peer Review Evaluation

Source:
Gardner G., Duffield C., Gardner A., Batch M. (2017). The Australian Advanced Practice Nursing Self-Appraisal Tool. DOI: 10.6084/m9.figshare.4669432

The Australian Advanced Practice Nursing Self-Appraisal Tool

The ADVANCE Tool



Overview

Advanced practice in nursing is a level and type of practice rather than a designation of specific titles and roles. Having the tools to identify advanced practice is important and has implications for the nursing profession and the broader healthcare system.

The Australian Advanced Practice Nursing Self-Appraisal (ADVANCE) tool provides a standardised understanding of advanced practice that will support health service planning and cross-discipline team development. Furthermore, the facility to demonstrate achievement of practice at this level is necessary for nurses' individual career planning, succession planning, and can inform postgraduate nursing education curricula.

This tool will be useful **for nurse clinicians to**:

- Supply evidence of advanced practice experience in application for entry to Nurse Practitioner masters courses
- Support an application for any positions that require advanced practice nursing.

The tool will be useful **for service managers in**:

- Designing advanced practice nursing positions
- Determining the most appropriate use of advanced practice nurses in service planning and delivery
- Measuring cost effectiveness of advanced practice nursing
- Budget planning and resource allocation.

The Advanced Practice Nursing Self-Appraisal Tool is grounded in evidence and is one of the deliverables from a ten-year program of research. Other outcomes of this research program include:

- Identifying a model of advanced practice nursing relevant to the Australian context[1].
- Development/amendment and validation of a survey instrument to measure advanced practice[2, 3].
- Delineating the practice profile of advanced practice nursing from other levels of practice[4].
- Identifying advanced practice nursing in Australia[5].
- Standardisation of Australian nursing titles[6].
- Providing an evidence base for international discussion about advanced practice nursing.

The Tool

The ADVANCE Tool was developed from a survey tool drawn from the Strong Model of Advanced Practice[7, 8]. The Strong Model is an advanced practice nursing framework developed in the USA by a group of advanced practice nurses and academics at Strong Memorial Hospital, University of Rochester Medical Centre[7,8]. With permission from the original authors, the model has been amended and validated to accommodate contemporary nursing practice in Australia and the Australian health service context[2, 3, 9].

The ADVANCE tool includes five domains of nursing practice namely: ***Clinical Care, Optimising Health Systems, Education, Research and Leadership.***

For each domain there is a definition and description of the activities relating to that domain. Our research has shown that nursing practice at an advanced level achieves relatively high scores across all domains. This is practice informed by layers of knowledge underpinned by academic preparation and clinical experience. Nursing activities at this level, whilst seemingly manifest are often structured in complexity.

As a consequence of this complexity some advanced practice nursing activities are clearly observable and others are not. The latter may be practice activities that include higher-order problem solving, advanced planning, critical thinking, ethical decision making and other complex actions. Clinical care activities may be performed in conjunction with related but non-observable activities such as watchful patient response monitoring, reflection on relevant research or planning a potential staff development session. Furthermore, a nurse practising at an advanced level is likely to engage in work-related activities of research, leadership and or education outside of clinical work hours.

Hence, each of the advanced practice domains include observable and non-observable activities which may be practised simultaneously.

How to use this tool

First, take time to carefully read and familiarise yourself with navigating through the tool. Note the five domains and the definition and the activities related to each. The domains are set out consecutively and for each domain there is two parts: Part A – Activity scoring & domain score; Part B – Justification & evidence.

Then complete each domain section as follows:

Part A: Consider each activity. Use the Likert scale (4 to 0) to select the score that indicates the extent to which you engage in that activity. Calculate and enter the average score for that domain *(to obtain the average score add all domain activity scores then divide by the number of activities)*.

Part B: Provide justification of your domain score with descriptions and examples from your current practice. This section is a narrative validation of your own measurement of your level of nursing practice in the domain. Your manager or peer will review and evaluate your domain score justification.

Based on research, the minimum mean scores for all domains to indicate advanced practice are as follows:

DOMAIN 1: CLINICAL CARE	DOMAIN 2: OPTIMISING HEALTH SYSTEMS	DOMAIN 3: EDUCATION	DOMAIN 4: RESEARCH	DOMAIN 5: LEADERSHIP
2	**2**	**2**	**1.7**	**1.7**

Domain 1 mean score:
(Total score ÷ 14)

Domain 1 Clinical Care

Part A: Activity scoring

Definition: Practice in this domain includes activities carried out on behalf of individual patients/clients focusing on specific needs, including procedures, assessments, interpretation of data, provision of physical care and counselling. Clinical Care also includes care coordination, care delivery, and guidance and direction to others relevant to a specific patient population.

Following is a list of activities that are components of Clinical Care. For each of the activities, please indicate the extent of time, in your current position, that you would spend on each one, by recording a number from 4 to 0 against each Activity

Activities

4 = very great extent 3 = great extent 2 = some extent 1 = little extent 0 = not at all

1.1 Conduct and document patient history and physical examination _____

1.2 Assess psychosocial, cultural and religious factors affecting patient needs _____

1.3 Identify and initiate required diagnostic tests and procedures _____

1.4 Gather and interpret assessment data to formulate plan of care _____

1.5 Perform specialty-specific care and procedures _____

1.6 Assess patient/family response to therapy and modify plan of care based on response _____

1.7 Communicate plan of care and response to patient and/or familly _____

1.8 Provide appropriate education (counselling) to patient & familly _____

1.9 Document appropriately on patient record _____

1.10 Serve as a consultant in improving patient care and nursing practice based on expertise in area of specialisation _____

1.11 Facilitate the process of ethical decision making in patient care _____

1.12 Coordinate inter/intra disciplinary plan for care of patients _____

1.13 Collaborate with other services to optimise patient's health status _____

1.14 Facilitate efficient movement of patient through the healthcare system _____

Domain 1 Clinical Care

Part B: Justification and evidence

(attach additional pages if necessary)

Supporting Statements: Provide a rationale for your overall domain 1 score drawing upon examples and descriptions of your current practice with reference to the activities of the domain and the domain definition. Specific activities, projects, portfolios you are involved in may be emphasised.

Justification for domain score:

Manager/Peer Review Evaluation: **Yes** Agree **No** Disagree

Rationale for evaluation outcome:

Domain 2 mean score:
(Total score ÷ 9)

Domain 2 Optimising Health Systems

Part A: Activity scoring

Definition: This domain includes activities that contribute to effective functioning of health systems and the institutional nursing service including role advocacy, promoting innovative patient care and facilitating equitable, patient-centred health systems.

Following is a list of activities that are components of Optimising Health Systems. For each of the activities, please indicate the extent of time, in your current position, that you would spend on each one, by recording a number from 4 to 0 against each Activity.

Activities

4 = very great extent 3 = great extent 2 = some extent 1 = little extent 0 = not at all

2.1 Consult with others regarding conduct of projects or presentations _____

2.2 Contribute to, consult or collaborate with other health care personnel on recruitment and retention activities _____

2.3 Participant in strategic planning for the service, department or hospital _____

2.4 Provide direction for and participate in unit/service quality improvement programs _____

2.5 Actively Participate in assessment, development, implementation and evaluation of quality-improvement programs in collaboration with nursing leadership _____

2.6 Provide leadership in the development, implementation, and evaluation of standards of practice, policies and procedures _____

2.7 Serve as a mentor _____

2.8 Advocate the role of the nurse _____

2.9 Serve as a spokesperson for nursing and the health facility when interacting with other professionals, patients, families and the public _____

Domain 2 Optimising Health Systems

Part B: Justification and evidence

(attach additional pages if necessary)

Supporting Statements: Provide a rationale for your overall domain 2 score drawing upon examples and descriptions of your current practice with reference to the activities of the domain and the domain definition. Specific activities, projects, portfolios you are involved in may be emphasised.

Justification for domain score:

Manager/Peer Review Evaluation: **Yes** Agree **No** Disagree

Rationale for evaluation outcome:

Domain 3 mean score:
(Total score ÷ 6)

Domain 3 Education

Part A: Activity scoring

Definition: These are activities that involve enhancement of caregiver, student and public learning related to health and illness. This also includes aiding patients and families to manage illness and to promote wellness, informal staff development and formal presentations to healthcare professionals

Following is a list of activities that are components of Education. For each of the activities, please indicate the extent of time, in your current position, that you would spend on each one, by recording a number from 4 to 0 against each Activity.

Activities

4 = very great extent 3 = great extent 2 = some extent 1 = little extent 0 = not at all

3.1 Evaluate education programs and recommend revision as needed _____

3.2 Serve as educator and clinical preceptor for nursing, medical students, staff, and/or others _____

3.3 Identify learning needs of various populations and contribute to development of education programs/resources _____

3.4 Serve as informal educator to staff while providing direct care activities _____

3.5 Facilitate professional development of nursing staff through education _____

3.6 Provide appropriate patient and family education _____

Domain 3 Education

Part B: Justification and evidence

(attach additional pages if necessary)

Supporting Statements: Provide a rationale for your overall domain 3 score drawing upon examples and descriptions of your current practice with reference to the activities of the domain and the domain definition. Specific activities, projects, portfolios you are involved in may be emphasised.

Justification for domain score:

Manager/Peer Review Evaluation: **Yes** Agree **No** Disagree

Rationale for evaluation outcome:

Domain 4 mean score:
(Total score ÷ 6)

Domain 4 Research

Part A: Activity scoring

Definition: Activities that support a culture of practice that challenges the norm, that seek better patient care through scientific inquiry and promote innovative problem solving to answer clinical questions. This includes conducting clinical research, identifying funding sources and using evidence to guide practice and policy.

Following is a list of activities that are components of Research. For each of the activities, please indicate the extent of time, in your current position, that you would spend on each one, by recording a number from 4 to 0 against each Activity.

Activities

4 = very great extent 3 = great extent 2 = some extent 1 = little extent 0 = not at all

4.1 Conduct clinical research _____

4.2 Participate in investigations to monitor and improve quality of patient care practices _____

4.3 Identify funding sources for the development and implementation of clinical projects/programs _____

4.4 Uses research and integrates theory into practice and recommends policy changes _____

4.5 Identify clinical data necessary for inclusion in information systems for nursing research and quality assurance projects _____

4.6 Collaborates with Information specialists in the design of data systems for research and quality assurance projects in nursing _____

Domain 4 Research

Part B: Justification and evidence

(attach additional pages if necessary)

Supporting Statements: Provide a rationale for your overall domain 4 score drawing upon examples and descriptions of your current practice with reference to the activities of the domain and the domain definition. Specific activities, projects, portfolios you are involved in may be emphasised.

Justification for domain score:

Manager/Peer Review Evaluation: **Yes** Agree **No** Disagree

Rationale for evaluation outcome:

Domain 5 mean score:
(Total score ÷ 6)

Domain 5 Leadership

Part A: Activity scoring

Definition: Activities and attributes that allow for sharing and dissemination of knowledge beyond the individual's institutional setting. These activities promote nurses, nursing and healthcare and include disseminating nursing knowledge, serving in professional organisations, and acting as a consultant to individuals and groups. Leadership also includes setting directions and modelling standards towards optimising population and patient care outcomes.

Following is a list of activities that are components of professional Leadership. For each of the activities, please indicate the extent of time, in your current position, that you would spend on each one, by recording a number from 4 to 0 against each Activity.

Activities

4 = very great extent 3 = great extent 2 = some extent 1 = little extent 0 = not at all

5.1 Disseminates nursing knowledge through presentation or publication at local, regional, national or international levels _____

5.2 Serve as a resource or committee member in professional organisation _____

5.3 Serve as a consultant to individuals and groups within the professional/lay communities and other hospitals/institutions _____

5.4 Represent nursing in institutional/community forums on the educational needs of populations _____

5.5 Represents a professional nursing image at institutional and community forums _____

5.6 Collaborates with other healthcare professionals to provide leadership in shaping public policy on healthcare _____

Domain 5 Leadership

Part B: Justification and evidence

(attach additional pages if necessary)

Supporting Statements: Provide a rationale for your overall domain 5 score drawing upon examples and descriptions of your current practice with reference to the activities of the domain and the domain definition. Specific activities, projects, portfolios you are involved in may be emphasised.

Justification for domain score:

Manager/Peer Review Evaluation: **Yes** Agree **No** Disagree

Rationale for evaluation outcome:

Definition of terms

Understanding the meaning and usage of *advanced* in the nursing profession has been constrained by the multiple descriptions, roles and titles that are used interchangeably and ambiguously in relation to a type of nursing and a level of practice. There is a vast body of literature reporting confusion internationally about definitions and titles related to advanced *nursing* practice and advanced *practice* nursing.

Some writers[10, 11] have clarified this issue by questioning what is being described or qualified by the term advanced. If it is practice that is advanced (as in *advanced practice*), this signifies the performance or the work of nursing. If it is nursing that is advanced (as in *advanced nursing*), this signifies the discipline of nursing.

Drawing on these insights and in order to inform appropriate application of this tool the following evidence-informed definitions are provided for these commonly used terms.

Advanced Practice Nursing

Advanced practice nursing is the experience, education and knowledge to practice at the full capacity of the registered nurse practice scope. It is a level and type of clinical practice that involves cognitive and practical integration of knowledge and skills from the clinical, health systems, education and research domains of the discipline and positions the advanced practice nurse as a leader in nursing and health care. Practice at this level is enabled through master level education.

Advanced Nursing

Advanced nursing is promotion of the nursing discipline through innovation, generation, and expansion of the knowledge, science, education and service models of nursing. Advanced nursing supports interaction between the Discipline and the Profession of nursing.

Nurse Practitioner

Nurse practitioner is an advanced practice nurse endorsed by the NMBA who has direct clinical contact and practises within their scope under the legislatively protected title 'nurse practitioner' under the National Law. (Nursing and Midwifery Board of Australia. 1 June 2016). http://www.nursingmidwiferyboard.gov.au/Registration-Standards.aspx

Acknowledgements

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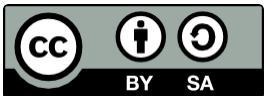
Attribution



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Reference to the Strong Model of Advanced Practice to be attributed to reference # 7 above
Reference to the original advanced practice survey tool to be attributed to reference # 8 above

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