**Nurse Practitioner Performance Development Review**

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| **Standard 1:** **Assesses using diagnostic capability**1.1:Comprehensive assessment 1.2:Diagnostic investigations 1.3:Diagnostic reasoning Cues* Note/Case Review
* Peer Review
* Ordering History
 | **Comments: NP/TNP****Comments: Manager** |
| **Standard 2:** **Plans care and engages others**2.1: Uses Evidence for Care 2.2: Educates and supports others 2.3: Quality use of medicines 2.4: Collaborates care Cues* Note/Case Review
* Peer Review
* Teaching/In-service
* Mentorship/clinical supervision
 | **Comments: NP/TNP****Comments: Manager** |
| **Standard 3:** **Prescribes and implements therapeutic interventions**3.1: Prescribes interventions3.2: Person centered care3.3: Practices in accordance with policies & legislationCues* Note/Case Review
* Peer Review
* Ordering History
 | **Comments: NP/TNP****Comments: Manager** |
| **Standard 4:** **Supports health systems**4.1: Evaluates outcomes 4.2: Advocates professional growthCues* Audits/Reports
* Portfolio report
* CPD
* Care provider data
* Consult data
 | **Comments: NP/TNP****Comments: Manager** |

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| **What are the significant achievements, successes or challenges you have experienced in the last year?** |
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| **Please note any issues that you would like to address: position description, scope of practice, clinical support, hours of work, annual/ sick/ long service leave, succession planning or other.** |
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| **Scope of practice reviewed**Formal NP Governance RV at least every 5 years (NP) 2 years (TNP) | Substantive change to scope of practice  | Yes/No  |
| Date ScOP Authorised | (Insert date) |
| **Position Description reviewed**(Aligned with NMBA NP Standards for Practice) | NP/TNP | Yes/ No |
| Manager | Yes/ No |
| **Multi-disciplinary reviews completed** | Yes/ No |
| **Portfolio report on Professional Activities: attached**(Indirect/non-clinical activities: education, research/quality, leadership) | Yes/ No |
| **Mandatory training**: LMS reports attached | Yes/ No |
| **Study / Conference leave**: total days | Insert # |

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| **PROFESSIONAL DEVELOPMENT PLAN**  |
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| **NURSE PRACTITIONER REFLECTION/COMMENTS:** |
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| **NURSE MANAGER / OPERATIONAL or LINE MANAGER:** |
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| **OTHER MANAGER (if applicable):** |
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| **CORE VALUES - please comment on your contribution to NSW Health CORE values** |
| **Collaboration:**  |  |
| **Openness:** |
| **Respect:** |
| **Empowerment:** |

**Nurse Practitioner/TNP (print name) Signature Date**

**Professional Line Manager (print name) Signature Date**

**Other Manager (if applicable) (print name) Signature Date**

**Acknowledgements:**

Children’s Hospital Network, Randwick – Nurse Practitioner Performance Development Template

South Eastern Sydney Local Health District – Nurse Practitioner Performance Development Review

**Appendix**

<http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards/nurse-practitioner-standards-of-practice.aspx>

Insert Policy update