

# Professional Practice Portfolios Guidelines Version 2

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## **Acknowledgments**

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## **Professional Practice Portfolio guidelines**

### **Introduction**

Professional practice portfolios (PPP) have been used widely by nurses around the world for a number of years. Portfolios enable the nurse to provide formal evidence of ongoing professional development (Williams & Jordan, 2007) and are considered to promote accountability and confidence in nursing practice (Meister, Heath, Andrews & Tingen, 2002).

"A portfolio is a collection of work that, when put together, demonstrates that achievement or learning has taken place. This collection of information and examples describe or give a profile of who you are as a professional" (Neades, 2002, p49) and a person.

The portfolio is a tool that enables you to communicate to yourself and to others your learning plans, achievements, professional development, performance capability and competency based on collated evidence.

The portfolio approach has been implemented across nursing at RCH

- 1) to assist nurses to be well placed to meet the future registration procedures being implemented by the Nurses Board of Victoria (NBV),
- 2) to promote a lifelong learning self directed adult approach to learning.
- 3) to support the performance appraisal process.

In establishing and maintaining your portfolio keep in mind there is no one single way of doing this. Each individual will have a distinctly unique portfolio.

### **Rationale**

Under the new Health Professions Registration Act 2005 which replaced the Nurses Act, 1993 the NBV will expect all nurses to maintain evidence of their continuing practice. It is specifically stated in the Health Professions Registration Act 2005 that any nurse may be required to provide information about any continuing professional development undertaken during the existing registration period. (Competence, appendix 1)

It is anticipated the Nurses Board of Victoria will randomly audit up to 5% of the nurses on the register. If selected for audit, the registered nurse will be required to produce evidence of continuing professional development for the previous 2 years prior to the date of the letter. The records are expected to be current and consistent with professional practice. It is anticipated this will be fully implemented by the end of 2009 (Appendix 2).

### **What does evidence look like?**

The purpose of evidence is quite simply to provide something tangible that will demonstrate a specific achievement or outcome of your professional development and learning. There are no fixed rules about what constitutes evidence and previous examples have consisted of: artefacts, reproductions, attestations and documents (appendix 3).

### **Format**

Through work conducted at the RCH (unpublished project 2006), Registered Nurses requested guidance in the establishment of a PPP. These guidelines have been developed to support this request. You are encouraged to utilise your own methods for collecting and maintaining records, however templates have been included for your guidance (appendix 4 & 5).

The format and selection of items for the PPP will be dependent on the capacity and creativity of the individual (McMullan et al., 2003). A PPP is neither an unwieldy compilation of documents thrown together that even the owner has trouble deciphering, nor an overly condensed collection of papers that run the risk of becoming limiting.

Aim to add evidence of your learning each week.

Some of the sections that might be considered in the PPP include

- Front cover
- Curriculum Vitae (CV)
- Position description
- Goals / Objectives/learning objective
- Clinical practice / competencies
- Professional development activities
- Achievements
- Reflection
- Feedback

Many of these are self explanatory

(Appendix 3 has a snap shot of uses and examples of inclusions for the portfolio).

### **A process for developing learning goals**

Developing learning goals with an action plan (see appendix 5) for achieving personal, professional learning forms the basis of the portfolio and should be developed and written down based on your recognised learning need. A suggested process is as follows:

- 1) identify your learning need. A learning need is the gap between where you are now and where you want to be in regard to a particular set of competencies, skills or values. Once you have identified your learning need,
- 2) specify your learning objectives
- 3) the learning resources and strategies necessary to achieve this.
- 4) identify what the evidence of accomplishment will be and
- 5) how the evidence will be validated, it is advisable to review this with a colleague, mentor, facilitator, educator, etc.
- 6) carry out the plan and
- 7) evaluate your learning. Keep the record of the journey/work in your portfolio and pat yourself on the back.

### **Reflection**

Reflection is the act of thinking, contemplation, meditation, or consideration, in order to make sense and change if required (Taylor, 2006).

Evidence of reflection may be provided in many ways. Taylor (2006) offers a "kitbag of strategies" (p. 51) beyond journaling that may be used to engage in reflection. These strategies include; writing, audiotaping, videotaping, creative music, singing, dancing, drawing, painting, poetry, montage, pottery, or quilting.

For many, the easiest way to engage in reflective practice is through the sharing of stories.

If you are new to reflective practice you might find Gibb's reflective cycle cited in Rolfe, G., et. al. (2001). P.32) useful (appendix 6).

### **Feedback**

The section of your PPP for feedback is intended to contain any feedback you may have been given or sought. Feedback may come from many people in many settings including; immediate on the spot feedback, informal conversations away from the job, in formal roles such as mentor, supervisor or manager, as part of an appraisal or from someone you have cared for.

### **Storage**

The portfolio belongs to the owner and as such decisions about where this will be kept are personal. It is recommended the learning goals are shared with the Unit Manager to enable unit learning trends to be identified. The portfolio should be available during the performance appraisal meeting.

## References

- McMullan M. Endacott R. Gray MA. Jasper M. Miller CML. Scholes J. Webb C. Portfolios and assessment of competence: a review of the literature. *Journal of Advanced Nursing*. 2003 Feb; 41(3): 283-94.
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- Nurses Board of Victoria. (2007). Guidelines for Nurses and Midwives for Continuing Professional Development. Retrieved March 12 2008, from <http://www.nbv.org.au/media/48183/continuing%20prof%20development.pdf>.
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- Taylor, B. (2006). Reflective Practice. A guide for nurses and midwives. (2<sup>nd</sup> ed.). Berkshire: Open University Press.
- Williams, M., & Jordan, K. (2007). The Nursing Professional Portfolio: A Pathway to Career Development. *Journal for Nurses in Staff Development*, 23 (3). 125-131.

## **Appendix 1 - What is competence?**

The Australian Nursing and Midwifery Council (ANMC) (2000), define competence as the "combination of skills, knowledge, attitudes, values and abilities that underpin effective and/or superior performance in a profession/occupational area" (p. 31).

The Nurses Board of Victoria (2006) state that:

- Nurses must perform only those clinical procedures for which they have been educationally prepared and in which they have demonstrated competence.
- Maintenance of knowledge and competence in performing clinical procedures is essential and it is the responsibility of the individual to ensure their competence is maintained through regular review.
- Nurses are at all times accountable and responsible for their own actions, and to be aware of the limits of their knowledge and competence, and to act within these limits.
- Nurses must be cognizant of the policies and procedures of their employing organization.

**In line with these recommendations, each nurse at the Royal Children's Hospital (RCH) is responsible for maintaining her or his own competence.**

### **Nurses Board of Victoria Guidelines: Scope of Nursing & Midwifery Practice**

<http://www.nbv.org.au/media/43986/guidelines%20for%20scope%20of%20practice.pdf>

Flow chart 1 – Scope of practice on page 8 of NBV document

Flow chart 2 – Expanding scope of nursing and midwifery practice on page 12 of NBV document

## **Appendix 2 - Nurses Board of Victoria Guidelines for Nurses and Midwives for Continuing Professional Development 15 June 2007**

### **Legislative changes**

In October 2002, the Victorian Department of Human Services commenced a review of the regulatory framework governing the registered health professions in Victoria. As a result new legislation is to be enacted in July 2007 and will replace 11 separate registration Acts and associated Regulations, including relevant provisions within the *Health Act* 1958.

The aim of the new legislation is to promote a more consistent approach to regulation across all health professions, and means that only one piece of legislation will need to be amended in the future.

In relation to Continuing Professional Development (CPD) the new *Health Professions Registration Act* 2005 specifically notes:

s18(3) The responsible Board may require an applicant

(b) to provide information about -

(ii) any continuing professional development undertaken during the existing registration period.

The Nurses Board of Victoria has developed a set of principles and guidance to assist registered nurses and midwives regarding continuing professional development.

### **Definition of Continuing Professional Development:**

Any process or activity, planned or otherwise, that contributes to an increase in or the maintenance of knowledge, skills and personal qualities to learning, teaching [clinical care] and broader academic practice. This includes leadership, management and administration. (Higher Education Academy 2005)

### **Aim**

The aim of continuing professional development is to ensure knowledge and competence acquired during undergraduate and post graduate education remains current and new information is acquired and translated into practice. It is a professional responsibility for all practicing nurses to maintain their competence to practice.

Continuing Professional Development:

- Enhances clinical, academic, leadership and managerial skills in the short term and
- Facilitates longer term professional effectiveness and career development.

Nurses Board of Victoria Guidelines for Nurses and Midwives for Continuing Professional Development 15 June 2007

### **Principles for CPD for Registered Nurses and Midwives in Victoria**

- CPD is a process of lifelong learning for all registered nurses and midwives and enhances professional effectiveness
- CPD assists registered nurses and midwives to maintain and enhance theoretical knowledge, clinical skills, leadership and managerial skills
- CPD should be largely self-directed, incorporate reflective practice and be relevant to the individual nurse's/midwives' professional practice
- CPD can occur in any setting and can be formal structured learning, or experiential learning that includes reflection in and on practice, which is a way of validating day-to-day practice

### **CPD Portfolio**

CPD portfolio should contain a:

- Planning section - to state the individual learning needs identified
- Ways in which the identified learning needs have been fulfilled (record of attendance)
- Evaluation of meeting self identified learning needs or professional development obtained.

A proforma is attached for those nurses and midwives that may not currently be utilising a recording sheet for CPD activities. However, participation in a College/Association program or other organisations would be recognised.

### **Evidence Requirements**

The Nurses Board of Victoria expects all nurses will maintain evidence of their continuing practice. CPD activities should be chosen to coincide with the context of clinical or other professional nursing practice. CPD activities may be within your work environment or within an educational context. They may be undertaken in a variety of different learning activities. For example may include but are not limited to short courses, seminars, conferences or in-house education.

**Do not send original documents, as documents forwarded to the Nurses Board of Victoria as part of the audit will not be returned.**

### **Random Exploratory Audits**

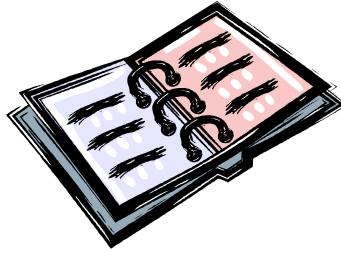
The Nurses Board of Victoria may randomly audit up to 5% of the nurses on the register. If selected for audit, the registered nurse will receive a letter from the Board requesting a **copy** of the individual nurses continuing professional development records for the previous 2 years prior to the date of the letter. These records should be contemporaneous and consistent with professional practice

### **Implementation Period**

It is anticipated that CPD program will be fully implemented by 2009 and that a transition period during this time will allow nurses to develop their portfolios.

Nurses Board of Victoria Guidelines for Nurses and Midwives for Continuing Professional Development 15 June 2007

## Appendix 3 – Examples of possible evidence for inclusion in a PPP



### Clinical Practice & Achievement

- Competencies
- Job description
- Previous roles and main responsibilities in each
- Involvement in preceptorship/mentor relationships/undergraduate student supervision
- Performance appraisal
- Achievement of clinical skills

### Education & Professional Development

- Further study – include certificates
- Conferences – attended or presented
- Inservice education - attended or presented
- Academic papers or publications
- Journal club attendance
- Action Learning Sets
- Involvement in Projects
- Committee involvement
- Personal educational reading

### Professional & Community Activities

- Professional affiliations
- Involvement in community activities
- Volunteer work relevant to nursing
- Letters of recommendation

### Feedback

- Formal or informal
- Awards / Honours
- Letters from children/families
- Thank-you's
- Feedback gained during appraisal

### Reflection

- Can take any format
- Personal and confidential
- NOT a journal

### Appendices

Evidence of your continuing professional development activities

- Certificates of attendance
- University awards – photocopy or original?
- Submitted papers or articles
- Evidence of involvement in projects

Reference: Andree Gamble, (2007)

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**Appendix 5 - RCH RN Professional Development Action Plan**

<b>Professional development goal or objective</b>	<b>Strategies required to achieve objective or potential barriers to achievement</b>	<b>Progress</b>	<b>Outcome &amp; date</b>

RN's sign & date: \_\_\_\_\_

Preceptor / Educator / Supervisor's sign & date: \_\_\_\_\_

**Appendix 6 - Reflection – Gibbs cycle**

(Cited in Rolfe, G., Freshwater, D., & Jasper, M. (2001). P.32)

