

**Mapping of Ohio Nurse Competency Model for GAP Analysis
Constructed by The Central Ohio Team**

| Competency: Patient Centered Care | Colleges | | | | | | | |
|---|----------|-------------|----|------|----|------|------|------|
| | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Knowledge | | | | | | | | |
| K1: Integrate understanding of multiple dimensions of patient-centered care: | | XXXX XXX | X | | XX | XXXX | XXXX | XXXX |
| * patient/family/community preferences, values | | | | | | XX | XXXX | |
| * coordination and integration of care | | | | | | X | XXXX | |
| * information, communication, and education | | | | | | XX | XXXX | |
| * physical comfort and emotional support | | | | | | XX | XXXX | |
| * involvement of family and friends | | | | | | XX | XXXX | |
| * transition and continuity | | | | | | X | XXXX | |
| K2: Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values | X | XXXX XXX | X | | | XXXX | XXXX | X |
| K3: Demonstrate comprehensive understanding of the concepts of pain and suffering, including physiologic models of pain and comfort | | XXX | X | | | XXXX | XXX | X |
| K4a: Examine how the safety, quality, and cost-effectiveness of health care can be improved through the active involvement of patients and families | X | XXX | | X | | XXX | XXX | XXXX |
| K4b: Examine common barriers to active involvement of patients in their own health care processes | | XXX | | | | XXX | XXX | XXXX |
| K4c: Describe strategies to empower patients or families in all aspects of the health care process | | XXXX | X | | | XXXX | XXX | XXXX |
| K5a: Explore ethical and legal implications of patient-centered care | | XXXX X | | XX | | XXXX | XX | XXXX |
| K5b: Describe the limits and boundaries of therapeutic patient-centered care | | XXX | | | | XX | XX | XXXX |
| K6a: Discuss the principles of effective communication | | XXXX X | | XXXX | | XXXX | XXXX | XXXX |
| K6b: Describe basic principles of consensus building and conflict resolution | | XXX | XX | | | X | XXXX | X |
| K6c: Examine nursing roles in assuring coordination, integration, and continuity of care | | XXX | XX | | | XXXX | XXXX | XXXX |

| Competency: Patient Centered Care | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Skills | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Elicit patient values, preferences and expressed needs as part of clinical interview, implementation of care plan, and evaluation of care | | xxx | xx | | | xxxx | xxxx | Xxxx |
| Communicate patient values, preferences, and expressed needs to other members of health care team | | xxxx x | xx | | x | xxxx | xxxx | Xxxx |
| Provide patient-centered care with sensitivity and respect for the diversity of human experience | x | xxxx | xx | x | | xxxx | xxxx | Xxxx |
| Assess presence and extent of pain and suffering | | xx | xx | | | xxxx | xxxx | Xxxx |
| Assess levels of physical and emotional comfort | | xx | xx | | | xxxx | xxxx | Xxxx |
| Elicit expectations of patient & family for relief of pain, discomfort or suffering | | x | xx | | | xxx | xxxx | Xxxx |
| Initiate effective treatments to relieve pain and suffering in light of patient values, preferences, and expressed needs | | xxxx | xx | | | xxx | xxxx | Xxxx |
| Remove barriers to presence of families and other designated surrogates based on patient preferences | | | xx | | | xxx | xxxx | Xxxx |
| Assess level of patient's decisional conflict and provide access to resources | | | xx | | | xx | xxxx | Xxxx |
| Engage patients or designated surrogates in active partnerships that promote health, safety and well-being, and self-care management | | xx | xx | | | xxx | xxxx | Xxxx |
| Recognize the boundaries of therapeutic relationships | | xx | xxxx | x | | xxxx | xxxx | Xxxx |
| Facilitate informed patient consent for care | | xxxx x | xx | | | xxxx | xxxx | Xxxx |
| Assess own level of communication skill in encounters with patients and families | | xx | xx | x | | xxx | xxxx | X |
| Participate in building consensus or resolving conflict in the context of patient care | x | | xxx | x | | xx | xxxx | X |
| Communicate care provided and needed at each transition in care | | xxx | xx | x | | xxx | xxxx | xxxx |

| Competency: Patient Centered Care | | | | | | | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Attitudes | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Value seeing health care situations "through patients' eyes" | | XXXX x | Xx | | | xx x | xxx x | Xx |
| Respect and encourage individual expression of patient values, preferences and expressed needs | x | xx | Xx | | | xxxx | xxxx | xxxx |
| Value the patient's expertise with own health and symptoms | | xx | Xx | | | xxx | xxxx | xx |
| Seek learning opportunities with patients who represent all aspects of human diversity | | xx | Xx | | | xxx | xxxx | xx |
| Recognize personally held attitudes about working with patients from different ethnic, cultural, and social backgrounds | x | xxxx x | Xx | x | | xxxx | xxxx | xxxx |
| Willingly support patient-centered care for individuals and groups whose values differ from own | | x | Xx | | x | xxx | xxxx | xxxx |
| Recognize personally held values and beliefs about the management of pain or suffering | | x | Xx | | | xxxx | xxx | xx |
| Appreciate the role of the nurse in relief of all types and sources of pain or suffering | | xxx | Xx | | | xxx | xxx | xxxx |
| Recognize that patient expectations influence outcomes in management of pain or suffering | | xxxx x | Xx | | | xxxx | xxx | xxx |
| Value active partnership with patients or designated surrogates in planning, implementation, and evaluation of care | | x | Xx | | | xxx | xxx | xxx |
| Respect patient preferences for degree of active engagement in care process | | x | Xx | | | xxxx | xxx | xx |
| Respect patient's right to access to personal health records | | xx | Xx | | | xxxx | xxx | xxx |
| Acknowledge the tension that may exist between patient rights and the organizational responsibility for professional, ethical care | x | xx | Xx | | | xxx | xx | xxxx |
| Appreciate shared decision-making with empowered patients and families, even when conflicts occur | | xx | Xx | | | xxx | xx | xxxx |
| Value continuous improvement of own communication and conflict resolution skills | | x | Xxx | x | | xxxx | xxxx | |

| Competency: Evidence-Based Practice (EBP) | | | | | | | | |
|---|----|-------------|------|----|----|------|------|------|
| Knowledge | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Demonstrate knowledge of basic scientific methods and processes | x | xxxx x | Xxx | x | | xxx | xxxx | Xxxx |
| Describe EBP to include the components of research evidence, clinical expertise and patient/family values | x | xxxx | Xx | | x | xx | xxxx | Xxxx |
| Differentiate clinical opinion from research and evidence summaries | x | xx | X | x | | xxxx | xx | Xxxx |
| Describe reliable sources for locating evidence reports and clinical practice guidelines. | x | xxxx x | X | x | | xxxx | xx | X |
| Explain role of evidence in determining best clinical practice | x | xxxx xxx | Xxx | x | | xxxx | x | Xxxx |
| Describe how the strength and relevance of available evidence influences the choice of interventions in provision of patient-centered care | x | xx | Xxxx | x | | xxx | x | X |
| Discriminate between valid and invalid reasons for modifying evidence-based clinical practice based on clinical expertise or patient/family preferences | x | x | x | x | | | x | X |

| Competency: Evidence-Based Practice (EBP) | | | | | | | | |
|--|----|-----|----|----|----|------|-----|------|
| Skills | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Participate effectively in appropriate data collection and other research activities | | xxx | | xx | x | xx | xxx | X |
| Adhere to Institutional Review Board (IRB) guidelines | | | | | | x | xxx | |
| Base individualized care plan on patient values, clinical expertise and evidence | | xx | Xx | | xx | xxx | xxx | Xxxx |
| Read original research and evidence reports related to area of practice | x | x | X | x | | xxxx | xxx | Xxxx |
| Locate evidence reports related to clinical practice topics and guidelines | x | x | X | x | | xxx | xxx | Xxxx |
| Participate in structuring the work environment to facilitate integration of new evidence into standards of practice | x | x | | x | | x | xx | |
| Question rationale for routine approaches to care that result in less than desired outcomes or adverse events | x | x | xx | | | xx | xx | Xxxx |
| Consult with clinical experts before deciding to deviate from evidence-based protocols | | xx | | | | | x | xxxx |

| Competency: Evidence-Based Practice (EBP) | | | | | | | | |
|---|----|------|----|----|----|------|----|------|
| Attitudes | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Appreciate strengths and weaknesses of scientific bases for practice | x | xxx | x | | | xxx | | |
| Value the need for ethical conduct of research and quality improvement | x | xx | Xx | x | | xx | | X |
| Value the concept of EBP as integral to determining best clinical practice | x | xxxx | xx | | | xxxx | | X |
| Appreciate the importance of regularly reading relevant professional journals | | xx | xx | | | xx | | Xxxx |
| Value the need for continuous improvement in clinical practice based on new knowledge | x | xx | xx | | | xxxx | | Xxxx |
| Acknowledge own limitations in knowledge and clinical expertise before determining when to deviate from evidence-based best practices | | xx | | | | x | | xxxx |

| Competency: Quality Improvement (QI) and Safety (QSEN) | | | | | | | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Knowledge | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Describe strategies for learning about the outcomes of care in the setting in which one is engaged in clinical practice | | xxxx | Xx | | x | xx | xxxx | |
| Recognize that nursing and other health professions students are parts of systems of care and care processes that affect outcomes for patients and families | | xx | Xx | | | xxx | xxxx | Xxxx |
| Give examples of the tension between professional autonomy and system functioning | | | | | | | xxxx | X |
| Explain the importance of variation and measurement in assessing quality of care | | xxxx | xx | | | x | x | Xxxx |
| Describe approaches for changing processes of care | x | x | x | | x | xx | x | Xxxx |
| Examine human factors and other basic safety design principles as well as commonly used unsafe practices (such as work-arounds and dangerous abbreviations) | x | xxxx | Xx | | | xxxx | xxxx | Xxxx |
| Describe the benefits and limitations of selected safety-enhancing technologies (such as bar codes, Computer Provider Order Entry, medications pumps, and automatic alerts/alarms. | | xxxx x | Xx | xxx | | xxxx | xxxx | Xxxx |
| Discuss effective strategies to reduce reliance on memory. | | xxx | | | | xxx | xxxx | Xxxx |
| Delineate general categories of errors and hazards in care. | x | xx | Xx | | | xxxx | xx | Xxxx |
| Describe factors that create a culture of safety (such as open communication strategies and organizational error reporting systems) | x | xxxx | Xx | | | xxx | xx | Xxxx |
| Describe processes used in understanding causes of error and allocation of responsibility and accountability (such as, root cause analysis and failure mode effects analysis) | | | Xx | | | xx | x | X |
| Discuss potential and actual impact of national patient safety resources, initiatives, and regulation. | x | xxxx x | Xx | x | | xxx | xx | Xx |

| Competency: Quality Improvement (QI) and Safety | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Skills | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Seek information about outcomes of care for populations served in care setting | x | x | Xx | x | x | xx | xx | Xxxx |
| Seek information about quality improvement projects in the care setting | x | | | | | x | xx | Xxxx |
| Use tools (such as flow charts, cause-effect diagrams) to make processes of care explicit | | xx | | | | | x | Xxxx |
| Participate in root cause analysis of sentinel event | | | | | | x | x | X |
| Use quality measures to understand performance | | | xx | | | x | xx | |

| | | | | | | | | |
|--|---|------|----|---|---|----|------|------|
| Use tools (such as control charts and run charts) that are helpful for understanding variation | | x | | | | | xx | Xxxx |
| Identify gaps between local and best practice | x | xxx | | | | x | xx | |
| Design a small test of change in daily work (using an experiential learning method such as Plan-Do-Study-Act) | | | | | | | x | |
| Practice aligning the aims, measures and changes involved in improving care | | | | | x | x | x | |
| Use measures to evaluate the effect of change | | | xx | | | | x | x |
| Demonstrate effective use of technology and standardized practices that support safety and quality | x | xxxx | Xx | x | | x | xxxx | Xxxx |
| Demonstrate effective use of strategies to reduce risk of harm to self or others | | xxx | Xx | | | x | xxxx | |
| Use appropriate strategies to reduce reliance on memory (such as. forcing functions, checklists) | | xx | | | | x | xxxx | Xxxx |
| Communicate observations or concerns related to hazards and errors to patients, families and the health care team. | | xxx | Xx | | | xx | xx | Xxxx |
| Use organizational error reporting systems for near miss and error reporting | | x | Xx | | | x | xx | x |
| Participate appropriately in analyzing errors and designing system improvements. | x | | | | | x | x | |
| Engage in root cause analysis rather than blaming when errors or near misses occur | | | | | | x | x | |
| Use national patient safety resources for own professional development and to focus attention on safety in care settings | | xxx | xx | | | x | xx | |

| Competency: Quality Improvement (QI) and Safety | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Attitudes | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Appreciate that continuous quality improvement is an essential part of the daily work of all health professionals | x | xx | Xx | | | xxx | xxxx | Xxxx |
| Value own and others' contributions to outcomes of care in local care settings | | xx | | | | xxx | xxxx | Xxxx |
| Appreciate how unwanted variation affects care | | x | Xx | | | xx | x | X |
| Value measurement and its role in good patient care | | x | | | | xx | x | |
| Value local change (in individual practice or team practice on a unit) and its role in creating joy in work | | | | | | x | xx | |

| | | | | | | | | |
|--|---|------|----|--|--|------|------|--|
| Appreciate the value of what individuals and teams can do to improve care | x | xxx | xx | | | xxx | xx | |
| Value the contributions of standardization/reliability to safety. | x | x | Xx | | | xxx | x | |
| Appreciate the cognitive and physical limits of human performance | x | x | Xx | | | xxx | x | |
| Value own role in preventing errors | | xx | Xx | | | xxxx | xxxx | |
| Value vigilance and monitoring (even of own performance of care activities) by patients, families, and other members of the health care team | | x | Xx | | | xxxx | xxxx | |
| Value relationship between national safety campaigns and implementation in local practices and practice settings | | xxxx | Xx | | | xxx | xx | |

| Competency: Informatics & Technology (QSEN) | | | | | | | | |
|---|-----|------------|-------|------|-------|--------|------|------|
| Knowledge | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Explain why information and technology skills are essential for safe patient care | x | xxxx xx | X | | x | xxxx | x | Xxxx |
| Identify essential information that must be available in a common database to support patient care | x | xx | X | | | xxx | xxx | X |
| Contrast benefits and limitations of different communication technologies and their impact on safety and quality | x | xxxx | X | | | xx | xxx | X |
| Describe examples of how technology and information management are related to the quality and safety of patient care | x | xx | X | | x | xxx | xxx | Xxxx |
| Recognize the time, effort, and skill required for computers, databases, and other technologies to become reliable and effective tools for patient care | x | | x | | | xxxx | xxx | Xxxx |
| Skills | OSU | COTC | Clark | CSCC | Tri-C | Edison | MTC | RSC |
| Seek education about how information is managed in care settings before providing care | | xxx | X | | x | xxx | xxxx | Xxxx |
| Apply technology and information management tools to support safe processes of care | x | xxxx | X | | x | xxx | xxxx | Xxxx |
| Navigate the electronic health record | | xxx | Xx | | | xxx | xxxx | Xxxx |
| Document and plan patient care in an electronic health record | | xxxx | Xx | x | | xxx | xxxx | Xxxx |
| Employ communication technologies to coordinate care for patients | x | xx | Xx | | | xxx | xxxx | xxxx |

| | | | | | | | | |
|--|------------|-------------|--------------|-------------|--------------|---------------|------------|------------|
| Respond appropriately to clinical decision-making supports and alerts | | x | Xx | | | xxx | xxxx | Xxxx |
| Use information management tools to monitor outcomes of care processes | | | Xx | | | xxx | xxxx | Xxxx |
| Use high quality electronic sources of healthcare information | x | x | Xx | | | xxx | xxxx | xxxx |
| Attitudes | OSU | COTC | Clark | CSCC | Tri-C | Edison | MTC | RSC |
| Appreciate the necessity for all health professionals to seek lifelong, continuous learning of information technology skills | x | xx | Xx | | | xxxx | x | Xxxx |
| Value technologies that support clinical decision-making, error prevention, and care coordination | x | xxx | Xx | | | xxx | xxxx | Xxxx |
| Protect confidentiality of protected health information in electronic health records | | xxxx x | | x | | xxxx | xxxx | Xxxx |
| Value nurses' involvement in design, selection, implementation, and evaluation of information technologies to support patient care | | | xx | | | xxx | xxxx | x |

| Competency: Communication, Team Work & Collaboration (NOF-MA & QSEN) | | | | | | | | |
|--|-----------|-------------|-----------|-----------|-----------|-----------|-----------|-----------|
| Knowledge | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Describe own strengths, limitations and values in functioning as a member of a team | x | xxxx | Xxx | | | xxxx | xxxx | Xxxx |
| Describe scopes of practice and roles of health care team members | x | xxxx xxx | Xxx | xx | | xxxx | xxxx | Xxxx |
| Describe strategies for identifying and managing overlaps in team member roles and accountabilities | | xx | Xxxx | | | xx | xxxx | X |
| Recognize contributions of other individuals and groups in helping patient/family achieve health goals | x | x | Xxxx | | | xxxx | xxxx | Xxxx |
| Analyze differences in communication style preferences among patients and families, nurses, and other members of the health team | x | xxx | Xxxx | | | xxx | xxxx | Xxxx |
| Describe impact of own communication style on others | x | xxxx | Xxxx | | | xxxx | xxxx | Xxxx |
| Discuss effective strategies for communicating and resolving conflict | x | xxx | Xxxx | | | xxxx | xxxx | Xxxx |
| Describe examples of the impact of team functioning on safety and quality of care | x | xx | Xxxx | | | xxx | xxxx | Xxxx |
| Explain how authority gradients influence teamwork and patient safety | | | | | | | xxxx | X |
| Identify system barriers and facilitators of effective team functioning | | | | | | x | xxxx | Xxxx |
| Examine strategies for improving systems to support team functioning | | | | | | x | xxxx | Xxxx |
| Applies the principles of teaching | | xxxx | | x | | xxx | xx | Xxxx |
| Uses the influences of different learning styles in the education of patients and families | | xxx | | | | x | xx | xxxx |

| Competency: Communication, Team Work & Collaboration (NOF-MA & QSEN) | | | | | | | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Skills | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Demonstrate awareness of own strengths and limitations as a team member | x | xx | Xx | | x | xxx | xxxx | Xxxx |
| Initiate plan for self-development as a team member | | xx | Xx | | x | xx | xxxx | Xxxx |
| Act with integrity, consistency and respect for differing views | | xx | Xx | | | xxxx | xxxx | Xxxx |
| Function competently within own scope of practice as a member of the health care team. | | xxxx x | Xx | | | xxx | xxxx | Xxxx |
| Assume role of team member or leader based on the situation | | xx | Xx | x | | xx | xxxx | Xxxx |
| Initiate requests for help when appropriate to situation | | xxx | Xx | xxxx | | xxx | xxxx | Xxxx |
| Clarify roles and accountabilities under conditions of potential overlap in team-member functioning | | xxx | Xx | | | xxx | xxxx | Xxxx |
| Integrate the contributions of others who play a role in helping patient/family achieve health goals | | x | xx | | x | xxx | xxxx | Xxxx |
| Communicate with team members, adapting own style of communicating to needs of the team and situation | | xx | | | | xxx | xxxx | Xxxx |
| Use clear, concise, and effective written, electronic and verbal communication. | | xxxx x | | | | xxxx | xxxx | Xxxx |
| Demonstrate commitment to team goals | | | | | | xx | xxxx | Xxxx |
| Solicit input from other team members to improve individual, as well as team, performance | | x | | | | xx | xxxx | Xxxx |
| Initiate actions to resolve conflict | | x | | | x | xx | xxxx | Xxxx |
| Follow communication practices that minimize risks associated with handoffs among providers and across transitions in care | | xxxx | Xx | | | xx | xxxx | Xxxx |
| Assert own position/perspective in discussions about patient care | | x | | | | xx | x | Xxxx |
| Choose communication styles that diminish the risks associated with authority gradients among team members | | | | | | x | x | X |
| Participate in designing systems that support effective teamwork | x | | | | | | x | X |
| Assesses factors that influence the patient's and family's ability to learn, including readiness to learn, preferences for learning style, and levels of health literacy | | x | xx | x | | xxxx | xx | |
| Assists patients and families in accessing and interpreting health information and identifying healthy lifestyle behaviors | | xxxx | xx | | | xxxx | xx | |

| Competency: Communication, Team Work & Collaboration (NOF-MA & QSEN) | | | | | | | | |
|--|-----------|-------------|-----------|-----------|-----------|-----------|-----------|-----------|
| Attitudes | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Acknowledge own potential to contribute to effective team functioning | x | xx | xxxx | | | xxxx | xxxx | xxx |
| Appreciate importance of intra- and inter-professional collaboration | x | xxxx xxx | xxxx | x | | xxx | xxxx | xxxx |
| Value the perspectives and expertise of all health team members | x | xxxx | xxxx | x | | xxxx | xxxx | xxx |
| Respect the centrality of the patient/family as core members of any health care team | | xxx | xxxx | | | xxx | xxxx | xxx |
| Respect the unique attributes that members bring to a team, including variations in professional orientations and accountabilities | | xx | xxxx | | | xxxx | xxxx | xxx |
| Value teamwork and the relationships which it is based | | xxx | xxxx | | | xxxx | xxxx | xxxx |
| Value different styles of communication used by patients, families, and health care providers | | | xxxx | | | xxx | xxxx | xxx |
| Contribute to resolution of conflict and disagreement | x | | xxxx | | | xxx | xxxx | x |
| Appreciates the risks associated with handoffs among providers and across transitions in care. | | xxx | xx | | | xxx | xxxx | xx |
| Value the influence of system solutions in achieving effective team functioning | | | | | | x | x | |
| Accepts the role and responsibility for providing health education to patients and families | | xxxx x | xx | x | | xxxx | xx | xxx x |

| Competency: Leadership & Professionalism (NOF-MA) | | | | | | | | |
|---|-----------|--------------|-----------|-----------|-----------|-----------|-----------|-----------|
| Knowledge | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| Identifies leadership skills essential to the practice of nursing | x | xx | xxxx | | | xx | xx | Xxxx |
| Understands critical thinking and problem-solving processes | x | xxxx x | xx | x | x | xxxx | xxx | Xxxx |
| Understands human behavior, mental processes, and individual and group performance | | x | xx | | | xxx | xxx | Xxxx |
| Identifies the roles and skills of the health care team | | xxx | xx | x | | xxxx | xxx | Xxxx |
| Explains the importance, necessity, and process of change | | xx | xx | | | xxx | x | Xxxx |
| Understands the principles of accountability and delegation | | xxxx x | xx | x | | xxxx | xxxx | X |
| Describes legal and regulatory factors that apply to nursing practice | x | xxxx xxxx | xx | x | | xxxx | xxx | Xxxx |
| Understands the professional standards of practice, the evaluation of that practice, and the responsibility and accountability for the outcome of practice | x | xxxx | xx | xx | | xxx | xxx | Xxxx |
| Describes factors essential to the promotion of professional development | | x | | | | x | x | Xxxx |
| Describes the role of a professional organization shaping the practice of nursing | | x | | x | | x | x | X |
| Understands the importance of reflection to advancing practice and improving outcomes of care | | xx | | | | xxxx | xxx | Xxxx |
| K11a: Understands the concept of autonomy and self-regulation in nursing practice | | xx | Xx | | | xxxx | x | X |
| K11b: Understands the culture of nursing and the health care system | x | | Xx | x | | xxx | x | X |
| Understands role and responsibilities as patient advocate | | xxxx x | Xx | | | xxxx | xxx | Xxxx |
| Understands ethical principles, values, concepts, and decision making that apply to nursing and patient care | x | xxxx xx | Xx | | | xxx | xxx | Xxxx |
| Understands responsibilities inherent in being a member of the nursing profession | | xx | | | | xx | x | X |
| Recognizes the relationship between personal health, self-renewal and the ability to deliver sustained quality care | | | | | | xx | x | X |
| Recognizes the relationship between civic and social responsibility and volunteerism with the advancement of one's own practice and the profession of nursing | | x | | | | | x | X |

| Competency: Leadership and Professionalism (NOF-MA) | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Skills | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| S1a: Integrates leadership skills of systems thinking, communication, and facilitating change in meeting patients' needs | | xx | Xx | | | xx | x | Xx xx |
| Uses systematic approaches in problem solving | | xxxx | Xx | | | x | xxx | Xx xx |
| Demonstrates purposeful, informed, outcome-oriented thinking | | xxxx | Xx | | | x | xxx | Xx xx |
| Demonstrates ability to effectively participate in Interprofessional teams | | xxxx x | Xx | | | xx | xxx x | Xx xx |
| Promotes a productive culture by valuing individuals and their contributions | | x | Xx | | | xx | xxx x | Xx xx |
| Models effective communication and promotes cooperative behaviors | | xxx | Xx | | | xxx | xxx x | |
| S3d: Shows tolerance for different viewpoints | | x | Xx | | | xx | xxx x | |
| Implements change to improve patient care | x | xxx | Xx | | | xx | xx | |
| Anticipates consequences, plans ahead, and changes approaches to get best results | | xxx | Xx | | | x | xx | |
| Participates in the change process to improve patient care, the work environment, and patient and staff satisfaction | | xx | Xx | | | x | xx | |
| S5a: Demonstrates accountability for own nursing practice. | | xxx | Xx | | x | xxx | xxx | Xx xx |
| Exercises critical thinking within standards of practice | x | xxx | Xx | | | xxx | xxx | Xx xx |
| Assigns, directs, and supervises ancillary personnel and support staff in carrying out particular roles/functions aimed at achieving patient care goals | | xxx | Xx | x | | xx | xxx | Xx |
| Uses recognized professional standards of practice | | xxxx | Xx | xx | | xxx | xxx | Xx xx |
| S6b: Implements plan of care within legal, ethical, and regulatory framework of nursing practice | | xxxx | Xx | | x | xxxx | xxx x | Xx xx |
| Complies with safety and regulatory standards and includes mandated reporting regulations | | xx | Xx | | | xx | xxx x | Xx xx |
| Recognizes and acts upon breaches of law relating to nursing practice and professional codes of conduct | | xx | Xx | | | x | xxx | Xx xx |
| Understands limits to one's scope of practice and adheres to licensure law and regulations | x | xxxx | Xx | x | | xxx | xxx | Xx xx |
| Demonstrates professional comportment | | xx | Xx | | | x | xxx x | |
| Provides and receives constructive feedback to/from peers | | xx | Xx | | | xx | xxx x | Xx |
| Participates in life-long learning | x | x | xx | | | xxx | x | |

| Competency: Leadership and Professionalism | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Skill | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| S10a: Seeks appropriate mentors | | | | | | X | X | |
| S10b: Clarifies biases, inclinations, strengths, and self-limitations | | | | | | X | X | |
| S10c: Adapts to stressful situations | X | XX | | | | XX | X | XX XX |
| S10d: Acts as an effective role model and resource for students and support staff | | | | | | X | X | X |
| S10e: Demonstrates ability to stand up for beliefs and does not avoid challenges | | | | | | X | X | X |
| S10f: Demonstrates ability for reflection in action, reflection for action, and reflection on action | | | | | | X | X | XX XX |
| S11a: Seeks ways to advocate for nursing's role, professional autonomy, accountability, and self-regulation | | | | | | XX | XX | X |
| S11b: Promotes and maintains a positive image of nursing | | X | | | | XXX | XX | XX XX |
| S12a: Serves as a patient advocate | | XXX | | | | XXX | XX | XX XX |
| S13a: Applies and incorporates ANA professional nursing code of ethics and professional guidelines into daily clinical practice | | X | XX | XXXX | | XXX | XX | XX XX |
| S13b: Utilizes an ethical decision-making framework in clinical situations | | XX | XX | | | XXX | XX | XX XX |
| S13c: Identifies and responds to ethical concerns, issues, and dilemmas that affect nursing practice | | X | XX | | | XX | XX | XX XX |
| S13d: Enlists system resources and participates in efforts to resolve ethical issues in daily practice | | | XX | | | XX | XX | XX XX |
| S13e: Recognizes moral distress and seeks resources for resolution | | | XX | | | XX | XX | XX XX |
| S14a: Understands the history and philosophy of the nursing profession | X | X | X | X | | XXXX | X | X |
| S14b: Incorporates professional nursing standards and accountability into practice | | X | | | | X | X | XX XX |
| S14c: Advocates for professional standards of practice using organizational and political processes | | | | | | | X | XX XX |
| S14c: Articulates to the public the values of the profession as they relate to patient welfare | | | | | | | X | XX XX |
| S14d: Advocates for the role of the professional nurse as a member of the interdisciplinary health care team | | | | | | X | X | XX XX |
| S14e: Develops personal goals for professional development | | | | | X | XXXX | X | XX XX |
| S14f: Assumes social and civic responsibility through participation in community volunteer activities | | | | | | | X | X |
| S14g: Assumes professional responsibility through participation in professional nursing organizations | | | | | | | X | |

| Competency: Leadership and Professionalism (NOF-MA) | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Attitude | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| A1a: Recognizes the role of nurse as leader | | xxx | Xx | | | xx | xxxx | XXX |
| A2a: Values critical thinking processes in the management of clinical situations | | xxx | Xx | x | | xxxx | xxx | xxx x |
| A2b: Values efficiency, effectiveness, and innovation in the practice environment. | | x | Xx | | | xxx | xxx | Xxx x |
| A3a: Recognizes the centrality of an interprofessional team approach to patient care | | x | Xx | | | xxx | xxx | Xxx |
| A3b: Values the perspectives and expertise of each member of the health care team | | x | Xx | | | xxxx | xxx | Xxx x |
| A4a: Recognizes one's own reaction to change and strives to remain open to new ideas and approaches | | xx | Xx | | | xxxx | xxx | Xxx x |
| A4b: Values new ideas and interventions to improve patient care | | | | | | xx | xxx | Xxx |
| A5a: Accepts accountability and responsibility for one's own professional judgment and actions | | xxx | Xx | | | xxxx | xxxx | Xxx x |
| A5b: Recognizes the value of delegation | | xxx | Xx | x | | xxxx | xxxx | Xxx x |
| A5c: Shows commitment to provision of high quality, safe, and effective patient care | x | xxx | Xx | | | xxxx | xxxx | Xxx x |
| A5d: Accepts accountability for nursing care given by self and delegated to others | | xx | Xx | | | xxx | xxx | Xxx x |
| A6a: Values professional standards of practice | x | xxx | Xx | x | | xxxx | xxx | Xxx x |
| A6b: Values and upholds legal and regulatory principles and standards | xx | xxx | Xx | | | xxxx | xxx | Xxx x |
| A7a: Recognizes personal capabilities, knowledge base, and areas for development | | xx | Xx | | | xxxx | xxx | Xxx x |
| A7b: Values collegiality, openness to critique, and peer review | | xxx | Xx | | | xx | xxx | Xxx |
| A9a: Committed to life-long learning | | x | Xx | | | xxxx | x | Xxx x |
| A10a: Values the mentoring relationship for professional development | | | Xx | | | xx | x | Xxx |
| A10b: Values and is committed to being a reflective practitioner | | | Xx | | | xxx | x | xxx |
| A10c: Recognizes that personal attitudes, beliefs and experiences influence one's leadership style | x | | Xx | | | xxx | x | xxx x |
| A10d: Recognizes the limits of one's own role and competence and, where necessary, consults with other health professionals with the appropriate competencies | | | Xx | | | xxx | x | xxx x |
| A10e: Values fairness and open mindedness | | | Xx | | | xxx | x | xx |
| A10f: Values an environment encouraging creative thinking and innovations | | | Xx | | | xx | x | xx |
| A10g: Values courage as a leadership skill | | | xx | | | xx | x | xx |
| A11a: Recognizes the responsibility to function within acceptable behavioral norms appropriate to the discipline of nursing and the health care organization | | X | Xx | | | xxx | xx | xxx x |

| | | | | | | | | |
|---|---|----|----|---|--|------|----|----------|
| A12a: Values role and responsibilities as a patient advocate | | X | Xx | | | xxx | xx | xxx x |
| A13a: Values the application of ethical principles in daily practice | | X | Xx | | | xxxx | xx | Xxx x |
| A13b: Values acting in accordance with codes of ethics and accepted standards of practice | | Xx | Xx | | | xxx | xx | xxx x |
| A13c: Clarifies personal and professional values and recognizes their impact on decision making and professional behavior | x | | Xx | | | xxxx | xx | xxx x |
| A14a: Recognizes need for personal and professional behaviors that promote the profession of nursing | | | Xx | x | | xxx | xx | xxx x |
| A14b: Values and upholds altruistic and humanistic principles | | | Xx | | | xxx | xx | xx |

| Competency: System-Based Practice (NOF-MA) | | | | | | | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Knowledge | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| K1: Understands the difference between microsystems and macrosystems in health care | x | | | | | | x | X |
| K2a: Understands the impact of macrosystem changes on planning, organizing, and delivering patient care at the work unit level | | | | | | x | xxx | X |
| K2b: Understands interrelationships among nursing, the nursing work unit, and organizational goals | x | xx | xx | | | x | xxx | X |
| K3a: Understands the concept of patient care delivery models | | xx | xx | xx | | xx | xxxx | X |
| K3b: Understands role and responsibilities as a member of the health care team in planning and using work unit resources to achieve quality patient outcomes | | xxx | Xx | | | xx | xxxx | Xxx x |
| K3c: Understands the relationship between the outcomes of one's own nursing care and work unit resources | | x | Xx | | | xx | xxxx | Xxx x |
| K4: Understands role and responsibilities as patient advocate, assisting patient in navigating through the health care system | | xxx | Xx | | | xx | xxx | |
| K5a: Understands that legal, political, regulatory and economic factors influence the delivery of patient care | xxx | xxxx | Xx | | | xx | xx | Xxx x |
| K5b: Is aware that different models of health care financing and regulation can influence patient access to care | xx | xx | Xx | | | xx | xx | X |
| K6: Is aware of global aspects of health care | x | x | xx | | | xx | xx | xxx x |

| Competency: System-Based Practice (NOF-MA) | | | | | | | | | |
|--|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|--|
| Skills | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 | |
| S1a: Identifies inefficiencies and failures on the work unit, such as those involving supplies, medications, equipment and information. | | x | | | | x | xxxx | Xxxx | |
| S1b: Plans, organizes, and delivers patient care in the context of the work unit | | xx | Xx | | | xxxx | xxxx | Xxxx | |
| S2a: Considers the influences of the macrosystem, work unit, and patient/family when making patient care decisions | | xx | | | x | x | xx | X | |
| S2b: Seeks to solve problems encountered at the point of care | | x | Xx | | | xxx | xx | Xxxx | |
| S2c: Makes management aware of clinical and work unit problems encountered in daily practice | | x | Xx | xx | | xx | xx | X | |
| S2d: Identifies inefficiencies and failures on the work unit, such as those involving supplies, medications, equipment, and information | | x | | | | x | xx | Xxxx | |
| S2e: Participates in solving work unit inefficiencies and operational failures that impact patient care, such as those involving supplies, medications, equipment, and information | | x | | x | | x | xx | X | |
| S3a: Considers resources available on the work unit when contributing to the plan of care for a patient or group of patients | | xxx | Xx | | | xx | x | X | |
| S3b: Collaborates with members of the health care team to prioritize resources, including one's own work time and activities delegated to others, for the purposes of achieving quality patient outcomes | x | xxx | Xx | | | xxx | x | Xx | |
| S3c: Evaluates outcomes of one's own nursing care In collaboration with others | | xx | Xx | | | xx | x | | |
| S3d: Uses evidence to facilitate work unit change to achieve desired patient outcomes | | x | Xx | | | xx | x | | |
| S4a: Serves as a patient advocate | | xx | Xx | xxxx | | xxxx | xxx | Xx | |
| S4b: Assists patients and families in dealing with work unit complexities | | | | | | x | xxx | Xxxx | |
| S4c: Uses education and referral to assist the patient and family through transitions across the continuum of care | | | xx | | | xxx | xxx | Xx | |
| S5a: Provides care based on current legal, political, regulatory, and economic requirements | | xx | Xx | | | xxxx | xxxx | Xxxx | |
| S5b: Articulates issues at the work unit level that impact care delivery and facilitate resolution | | | Xx | | | x | xxx | Xxxx | |
| S5c: Brings issues of concern at the work unit level to the attention of others who can facilitate resolution. | | xx | Xx | | | xx | xx | Xxxx | |
| S6a: Engages in self-reflection on one's role and responsibilities related to global health issues | | | Xx | | | x | xx | xxxx | |

| Competency: System-Based Practice (NOF-MA) | | | | | | | | |
|---|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Attitudes | #1 | #2 | #3 | #4 | #5 | #6 | #7 | #8 |
| A1a: Appreciates the role of new staff nurses in the operations of an effective microsystem | x | | Xx | | | | xx | |
| A1b: Appreciates how the elements of the microsystem impact on one's practice | | x | Xx | | | | xx | X |
| A2a: Appreciates the complexity of the work unit environment | | x | Xx | | | xx | xx | X |
| A2b: Recognizes the complexity of individual and group practice on a work unit | | x | Xx | | | x | xx | X |
| A2c: Appreciates the impact of one's decisions on the work unit | | xxx | Xx | | | xxx | xx | Xxxx |
| A2d: Recognizes the importance of work unit systems in providing supplies, medications, equipment, and information in a timely and accurate fashion | | x | Xx | | | xx | xx | X |
| A2e: Appreciates role in identifying work unit inefficiencies and operational failures | | x | Xx | | | x | xx | X |
| A3a: Acknowledges the tension that may exist between a goal-driven and a resource-driven patient care delivery model | | | Xx | | | x | xxxx | X |
| A3b: Values the contributions of each member of the health care team to the work unit | | x | Xx | | | xxxx | xxxx | Xxxx |
| A3c: Values the management of one's own time as a critical work unit resource in delivering patient care | | xx | Xx | | | xxxx | xxxx | Xxxx |
| A3d: Values the partnerships required to coordinate health care activities that can affect work unit performance | | x | Xx | | | xxx | xxxx | Xxxx |
| A4a: Values role and responsibilities as patient advocate | | xx | Xx | | | xxxx | xxxx | Xxxx |
| A4b: Values partnerships in providing high quality patient care | x | x | Xx | | | xxxx | xxxx | X |
| A4c: Values effective communication and information sharing across disciplines and throughout transitions in care | | x | Xx | | | xxxx | xxxx | Xxxx |
| A4d: Appreciates role and responsibilities in using education and referral to assist the patient and family through transitions across the continuum of care. | x | x | Xx | | | xxx | xxxx | Xx |
| A5a: Appreciates that legal, political, regulatory and economic factors influence the delivery of patient care | xx | x | Xx | | | x | xxxx | |
| A5b: Values the need to remain informed of how legal, political, regulatory, and economic factors impact professional nursing practice | | | Xx | | | xxx | xx | Xxxx |
| A6a: Appreciates the potential of the global environment to influence patient health | x | | Xx | | | x | x | X |
| A6b: Appreciates the potential of the global environment to nursing practice | x | | Xx | | | x | x | X |