Framework for assessing standards for practice\textsuperscript{1} for registered nurses, enrolled nurses and midwives

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About this framework for assessment

The purpose of this framework is to provide a resource for:

- persons assessing the standard of practice of nurses and/or midwives, and
- nurses and/or midwives whose performance is undergoing assessment.

The framework comprises:

- principles for assessing standards for practice
- critical issues in assessing performance, and
- key elements in the assessment model.

The aim is to guide the assessment of competence against the Nursing and Midwifery Board of Australia (National Board or NMBA) standards for practice for registered nurses, enrolled nurses, nurse practitioners and midwives.

Assessment against the NMBA standards for practice is an important measure to ensure initial and continuing competence of nurses and midwives. The assessment process determines the eligibility for registration of nurses and midwives who:

- have undertaken nursing and/or midwifery courses in Australia
- wish to practise in Australia but have undertaken nursing and/or midwifery courses in another country
- wish to return to work after being out of the workforce for a defined period, or
- are qualified but need to demonstrate that they are fit to continue working.

Principles for assessment

The National Board has identified five key principles to be applied when assessing practice standards for registered nurses, enrolled nurses, nurse practitioners and midwives.

The five principles are as follows:

\textbf{1: Principle of accountability}

- Assessors are accountable to the public and to the profession to perform a valid and reliable assessment of nurse and/or midwife candidates.
- Assessors are accountable for assessing nurse and/or midwife candidates as:

\textsuperscript{1} Formally known as national competency standards
– competent against the NMBA standards for practice, and
– suitable for registration.

- Assessors will ensure that nurse and/or midwife candidates are assessed in the practice setting.
- Nurse and/or midwife candidates who have not demonstrated competence in the practice setting should not be recommended for registration.

2: Principle of performance-based assessment

- Clinical competence is performance based. Assessors must therefore carry out the assessment in the context of the nurse and/or midwife/ interaction with the person receiving care.
- Assessment of practice is a valid model of assessing core competencies for licensing nurses and/or midwives. This model is useful as a multipurpose procedure because it enables global assessment of the nurse and/or midwife candidate’s knowledge, skills, values, and attitudes.
- Regulatory authorities have a responsibility to make sure the assessment model focuses on knowledge and performance that is closely related to the demands of the practice situation.
- The National Board recognises that the nature of professional nursing and/or midwifery practice is multifaceted and requires comprehensive knowledge; attempting to assess competence in a single and narrowly prescribed procedural model is a failure to recognise this.
- The context in which competence assessment occurs is an essential component in the competency standards assessment framework.

The practice setting involves many contextual factors including the environment, the relationship with people receiving care and the behaviour of others in the practice setting that cause the nurse and/or midwife candidate to act in a particular way. The assessment process should take these factors into account.

3: Principle of evidence-based assessment

- Evidence-based assessment requires a model of evidenced-based professional judgement.
- The process of assessing competence requires an accumulation of data or evidence about performance over a period of time and in a range of nursing situations.
- The judgement about whether a nurse and/or midwife candidate has reached a satisfactory standard of performance is based on the interaction between the:
  – assessor’s comprehensive knowledge of the expected standard of performance, and
  – interpretation of the assessment data, including the context within which they are collected.
- Assessors can obtain data to provide evidence of performance through:
  – self-assessment by the nurse and/or midwife candidate
  – observation by the assessor of the nurse and/or midwife candidate
  – interviews by the assessor with the other actors in the setting: peers, people receiving nursing care, supervisors, and
  – analysis by the assessor of all relevant documentation.
- Assessors work with, and observe, the nurse and/or midwife candidate being assessed in the practice context. This enables the assessor to gather pieces of evidence about the nurse and/or midwife candidate’s practice in order to draw inferences about competence.
- Assessors use professional judgement, which involves drawing inferences and using tacit knowledge to form a conclusion about a particular nurse and/or midwife’s competence.
Assessors should always check inferences to validate the assessment judgement.

For confident use of tacit knowledge as a basis for assessment, it is essential that assessors have a full understanding of the expected standard of performance.

4. Principle of validity and reliability in assessment

- **Validity** in the assessment process is the extent to which assessment meets the intended outcomes. **Reliability** in the assessment process refers to the consistency or accuracy of outcomes of the assessment process.
- The assessors’ knowledge and skill are the most crucial elements in enhancing the validity and reliability of the assessment process.
- The assessor gathers **evidence**, i.e. pieces of information about the performance of the nurse and/or midwife being assessed. This enables assessors to provide evidence to justify their assessment judgements.
- A variety of sources of data (evidence) about the performance of a nurse and/or midwife candidate enhances the rigour of the assessment process, and gives validity and reliability to the judgement. Sources of evidence may include:
  - observing performance
  - auditing documents, such as care plans and clinical records
  - interviewing the nurse and/or midwife candidate to reveal intention and attitude
  - interviewing colleagues and persons receiving nursing care to collect data regarding outcomes of care
  - testing (for example drug calculations, written assignments, multiple-choice questions), and
  - examining records of previous achievements.
- Reflection and reinterpretation of evidence about the nurse and/or midwife candidate’s performance is an important element in the assessment process and adds to the reliability of the assessment judgement.

5: Principle of participation and collaboration

- Performance assessment should be based on a participative and collaborative relationship between the assessor and the nurse and/or midwife candidate.
- A principle of impartiality, confidentiality and declaration of any conflict of interest will underpin this participative and collaborative relationship. This will help to ensure that participants in the assessment process feel confident in the assessment methods.
- Participation and collaboration in the assessment process involve high levels of communication, reflection and reinterpretation of performance.
- Formalised review processes established by organisations undertaking assessments will address grievances held by nurses and/or midwives who are being assessed, and will assist in ensuring participation and collaboration between others in the assessment process. These processes also provide a mechanism for rigorous scrutiny of the assessment results.

Critical issues in assessing performance

The following section identifies the critical issues in assessing performance against the NMBA practice standards. These issues underpin the principles of assessment within this framework.

**Accountability**

The assessor is accountable to the profession and to an appropriate authority for:

- making a valid assessment of a nurse and/or midwife candidate’s performance, and
• recommending that the nurse and/or midwife candidate being assessed meets the competency standards required.

Validity and reliability in the assessment process are essential to public interest and safe practice.

The assessor has a responsibility to keep confidential the information obtained in the assessment process or, when appropriate, to use proper channels to share information about the assessment. The assessor must declare any existing conflict of interest and, in cases where impartiality cannot be assured, withdraw from the assessment process.

**Performance assessment**

NMBA standards for practice emphasise the assessment of total performance, which includes knowledge, skills and attributes. This differs from assessment procedures biased towards assessment of knowledge and the use of checklists in clinical settings.

Regulatory authorities are responsible for making sure the assessment model focuses on knowledge and clinical performance that relate closely to the demands of the individual’s scope of professional practice and the practice situation. Clinical competence is performance based and assessors must therefore carry out the assessment in the context of the practice setting.

The NMBA standards for practice are categorised into domains of practice relevant to nursing and midwifery practice. This categorisation will assist assessors in the assessment process.

**Context-based assessment**

Given the complex nature of nursing and/or midwifery practice, the NMBA standards for practice have been developed as broad holistic statements, interrelated as determined by the nursing and/or midwifery context.

The context in which assessment of competence occurs is essential to the competency standards assessment framework.

The practice setting involves many contextual factors that cause the nurse and/or midwife candidate being assessed to respond in a particular way. The relationship with the person receiving nursing and/or midwifery care and the behaviour of others in the practice setting can influence the performance of the nurse and/or midwife candidate.

It is important that assessors take contexts into account during the assessment processes.

**Evidence-based assessment**

The role of assessment is to arrive at a conclusion about satisfactory levels of performance; it must therefore be evidenced based.

Assessment of professional competence using standards for practice involves assessors using their professional judgement in deciding the competence of nurse and/or midwife candidates. This method of evidenced-based assessment is based on a model of evidence-based professional judgement.

The method involves recognising and using significant cues, which imply that a nurse and/or midwife is competent in a particular competency or a number of competencies. The process of assessing competence requires an accumulation of data or evidence about performance over a period of time and in a range of nursing and/or midwifery situations.
During assessment, the assessor makes inferences about performance and related knowledge, attitudes and skills of the nurse and/or midwife candidate. Inference entails judgement about the presence of a competency embedded in practice but not directly observed in specific behaviour. This process of drawing inferences and using tacit knowledge allows the assessor to form conclusions about the practice and subsequent competence of the nurse and/or midwife candidate.

In using tacit knowledge, the assessor is a human assessment instrument. The only ‘tool’ required by the assessor is a method of collecting data, for example using pen and paper for observation, documentation and reference to the competency standards when analysing the assessment data.

Judgement about whether a nurse and/or midwife candidate has reached a satisfactory standard of performance is based on the:

- interaction between the assessor’s comprehensive knowledge of the expected standard of performance, and
- interpretation of the assessment data, including the context within which they are collected.

It is the assessor’s tacit knowledge that enables the judgement of quality.

Assessors of performance must be experienced in the profession and field of practice being assessed and in the assessment of competence. This assessment model relies on assessment judgements made using involving the use of:

- tacit knowledge
- competency elements, and
- cues, which are selected concrete examples of activities illustrative of the competency standard.

Key elements in the assessment model

**Self-assessment** by the nurse and/or midwife candidate provides vital data for the assessor. Self-assessment is a skill that is central to the nurse and/or midwife’s continuing professional development.

**Observation by the assessor** should be of sufficient duration and performed in a reasonable variety of contexts to achieve valid and reliable assessment.

**Interviewing skills of the assessor** should be highly developed. The assessor needs to establish relationships with other individuals in the practice setting in order to source adequate and essential information. This information is essential in validating assessor inferences and judgements about competence.

**Documentation** recording assessors’ observations and other evidence is necessary for analysis and interpretation and ultimately. This ensures a reliable and valid assessment judgement.

**Enhancing the validity and reliability of assessment** – Using the professional judgement of a person with experience in nursing and/or midwifery, and who possesses a comprehensive knowledge base to assess performance, enhances the validity and reliability of the assessment.

**Validity** in the assessment process is the extent to which assessment meets the intended outcomes. The assessment process therefore measures the performance of the nurse and/or midwife candidate against the NMBA practice standards.
**Reliability** in the assessment process refers to the consistency or accuracy of the assessment process outcomes. Assessors’ understanding of the expected standards and their knowledge and skill are the crucial elements that enhance the reliability of the assessment process.

Documented evidence should always support judgements assigned to the nurse and/or midwife candidate’s competence. The model of assessment, involving collection and documentation of data over a period of time and in a range of situations, allows for reflection on the:

- practice of the nurse and/or midwife being assessed, and
- interpretations made by the assessor.

As the assessor gathers new pieces of evidence about the practice of the nurse and/or midwife being assessed, they can reflect on and reinterpret previous data. This process of reflection and reinterpretation adds to the reliability of the assessment judgement.

**Participation and collaboration** – Establishing a participative and collaborative relationship based on confidentiality, accountability and impartiality between the nurse and/or midwife candidate and the assessor builds confidence in the assessment methods.

As an essential part of the assessment process, assessors should conduct interviews with nurse and/or midwife candidates being assessed. It is through this process that the important practice of reflection on and reinterpretation of performance and assessment judgements should occur, enabling judgements made by the assessor to be validated.

Organisations undertaking assessments should institute review procedures to address grievances held by nurse and/or midwife candidates being assessed.