

CLINICAL SKILLS ASSESSMENT FRAMEWORK PROCEDURE[©]

DOCUMENT SUMMARY/KEY POINTS

- The provision of safe and effective family centred care to the neonate, child, or adolescent and their family requires a nursing workforce that is competent, continually learning, accountable, evidence based, empowered and able to demonstrate mastery of clinical skills.
- The Sydney Children's Hospitals Network (SCHN) utilises the concept of competency based training, as outlined by The National Safety and Quality Health Service Standards¹, therefore specific skills require nurses undertake further training and assessment. Competence can be assessed in many forms, at SCHN one tool utilised for the assessment of competence is the clinical skills assessment (CSA) tool.
- This document outlines the requirements for the development and use of clinical skill assessments (CSA) for the SCHN.
- All registered and enrolled nurses that are employed by SCHN with a clinical role must successfully complete assessment of the following core clinical skills:
 - Personal Protective Equipment*
 - Aseptic Non -Touch Technique
 - Administration of Intravenous Therapy
 - Care of the Patient receiving IV Pain Management Therapies*
 - Care of the Patient with Central Venous Access Device*

* There are several skills associated with this clinical care, please check with local education team which ones are mandatory for your clinical setting

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

Approved by:	SCHN Policy, Procedure and Guideline Committee	
Date Effective:	1 st June 2020	Review Period: 3 years
Team Leader:	Nurse Education Manager	Area/Dept: Nursing Education

- Governance: New CSAs that are proposed will be lodged with the SCHN NEM and be assessed by SCHN Nurse Education Strategic Committee.
- Endorsed CSA's and associated assessor guide are located in resource section of this document on e-policy.

CHANGE SUMMARY

- New document
- **29/7/20**: Minor review. Updated CSA template to include a tick box for re-accreditation

READ ACKNOWLEDGEMENT

All nursing to read and acknowledge

Training/Assessment Required – for nursing staff identified as assessors

Within the SCHN the following criteria are required to be deemed a nominated assessor for CSAs:

- Minimum of 3 years post registration experience and completed the SCHN assessors' course
- OR
- Holds a post graduate education degree
- OR
- Completed a CERT IV in training and assessment
- OR
- Is employed as a CNE/NE and has completed negotiated education

NB: Recognition of Prior Learning Plan can be implemented for staff with other appropriate experience. This is at the discretion of the Nurse Educator team

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

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1 Introduction

- The provision of safe and effective family centred care to the neonate, child, or adolescent and their family requires a nursing workforce that is competent, continually learning, accountable, evidence based, empowered and able to demonstrate mastery of clinical skills.
- The Sydney Children's Hospitals Network (SCHN) utilises the concept of training and assessment for clinical competency, as outlined by The National Safety and Quality Health Service Standards ¹, therefore specific skills require clinical practitioners undertake further training and assessment.
- Nurses within SCHN will be trained and assessed in relation to skills which they are accountable for in their area of practice.
- Through understanding their role in clinical assessment all nurses are supporting the safe and high-quality care that is core to SCHN.
- This policy specifically relates to the assessment of clinical skills for nurses within the SCHN.
- The utilisation of clinical assessment within nursing is an important part of the maintenance of professional standards and subsequently professional regulation ². Competence can be assessed in many forms, at SCHN one tool utilised for the assessment of competence is the clinical skills assessment (CSA) tool.
- For the purpose of this document competence can be described as the combination of training, skills, experience and knowledge that a person has and their ability to apply them to perform a task safely. It is acknowledged that other factors, such as attitude and physical ability, can also affect someone's competence. ³

2 Standard

- On commencement of employment within SCHN nurses will:
 - Read and acknowledge this policy.
 - All nurses working within SCHN will discuss with the unit manager and education team CSAs required within their area of employment.
- The CSA tool will be utilised as the consistent form of clinical skill assessment for nurses within SCHN.
- All nurses will be aware of the core CSAs that are required at SCHN.
- New CSAs that are proposed will be lodged through the SCHN Nurse Education Manager (NEM) to ensure governance of clinical assessment.

3 Core Clinical Skill Assessments

- All registered and enrolled nurses that are employed by SCHN with a clinical role must successfully complete assessment the following core clinical skills:
 - Personal Protective Equipment(PPE)*
 - Aseptic Non-Touch Technique (ANTT)
 - Administration of Intravenous(IV) Therapy
 - Care of the Patient receiving IV Pain Management Therapies*
 - Care of the patient with Central Venous Access Device*

* There are several components associated with this skill, please check with local education team which ones are mandatory for your clinical setting

- Successful completion of ANTT and Administration of Intravenous (IV) Therapy CSAs is expected for all new nursing staff within 3 months of commencement of employment
- Care of patient receiving IV Pain Management Therapies and Care of the patient with Central Venous Access Device is expected within 12 months of commencement of employment in negotiation with the local education teams.

4 Governance

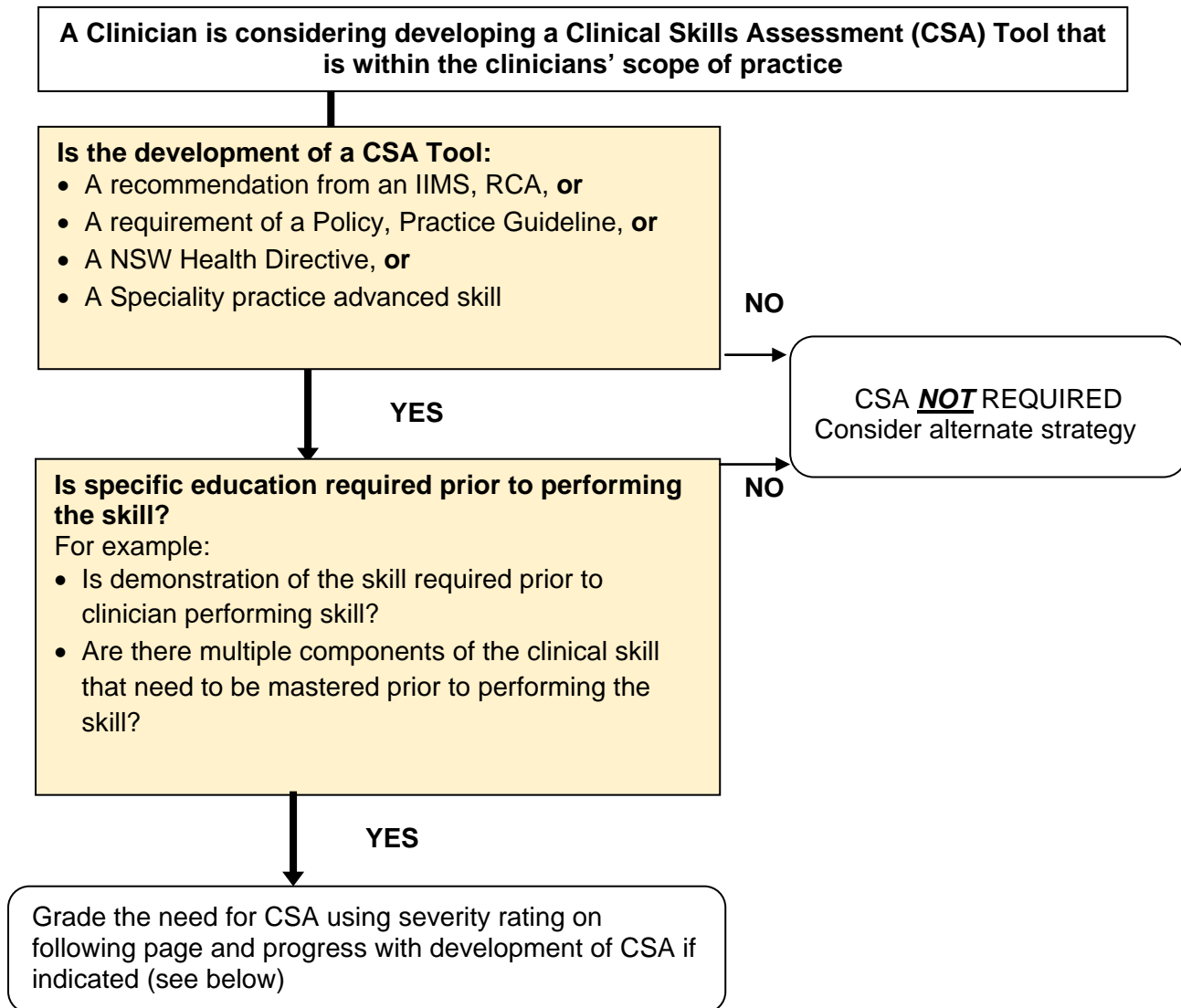
4.1 Development of CSA

- The development of CSAs will occur through the following avenues:
 - Review and development of policy, procedure and guidelines with direction from Policy, Procedure and Guidelines Committee.
 - CSA development application- Clinical Department.
 - CSA development application- Clinical Speciality.

For CSA development application (Department or Speciality) the CSA development application must be supported by the relevant portfolio NE and submitted to the SCHN NEM for review by the Nurse Education Strategic Committee ([Appendix One](#))

- To fulfil the criteria for development of a CSA, demonstration of a clinical skill must be required.
- CSAs must be linked to policies, procedures or guidelines to enable regular review.
- Prior to submitting request for a CSA development, review of the [CSA risk assessment matrix](#) is required.
- The SCHN Nurse Education Strategic Committee will utilise the following flowchart to determine application outcomes:

Clinical Skills Assessment Development Flow Chart



1 – EXTREME RISK
 CSA required, please contact the Nurse Educator for your portfolio

2 – HIGH RISK
 CSA may be required - please contact the Nurse Educator for your portfolio to discuss education strategy to manage risk.

4 – LOW RISK
3 – MEDIUM RISK
 CSA **NOT** REQUIRED
 Consider alternate education strategy

Clinical Skills Risk Assessment Matrix

Severity Rating	Description used to assess the risk	Actions required following risk assessment	Example
1 EXTREME CSA likely required, please contact the Nurse Educator for your portfolio	<ul style="list-style-type: none"> High risk of harm to practitioner & patients New skill introduced as advanced practice at SCHN Unlikely to have received education when obtaining formal qualifications Skill performed by trained staff Specialist education is required Education component requirement to ensure safe practice 	<ul style="list-style-type: none"> Detailed education strategy is required to reduce the risk of harm to patients, families and clinicians. Annual monitoring and reporting of compliance to education interventions required. 	<i>Administration of hazardous drugs</i>
2 HIGH CSA may be required - please contact the Nurse Educator for your portfolio to discuss education strategy to manage risk.	<ul style="list-style-type: none"> Increased risk of harm to practitioner & patients May have received limited and/or adult focused education in undergraduate degree. Skill requires demonstration or additional support i.e. simulation Existing education strategy in place Skill performed by trained staff 	<ul style="list-style-type: none"> Holistic education strategy required to reduce risk rating. Establish education action plan to address level of risk. Completion of additional education required i.e. Learning package Monitor trends i.e. IIMs relating to risk post education to assess effectiveness. 	<i>Cannulation</i>
3 MEDIUM CSA not required – consider additional education intervention	<ul style="list-style-type: none"> Minor increased risk to practitioner & patients Received education in undergraduate degree Skill <u>may</u> require demonstration or additional support i.e. simulation 	<ul style="list-style-type: none"> Additional education intervention in place i.e. elearning package Consider escalating frequency and diversifying the type of education offered to increase knowledge and skills. Monitor trends i.e. IIMs relating to risk post education to assess effectiveness. 	<i>12-lead ECG Nasogastric tube insertion</i>
4 LOW CSA not required	<ul style="list-style-type: none"> Low risk to practitioner and patients Received education in undergraduate degree 	<ul style="list-style-type: none"> Opportunity to receive additional educational support is available Manage by routine education support processes no action required. 	<i>Removal of a cannula</i>

- When a CSA application has been submitted, the applicant will be informed of the outcome within one week following the SCHN Nurse Education Strategic Committee monthly meeting. If CSA application is successful, the applicant should liaise with the relevant portfolio Nurse Educator to commence development.
- The Interprofessional Education Operations Committee will endorse the approved and completed CSA.
- New CSAs require submission of evaluation data after 6 months then at policy review. The CSA evaluation tool can be found in [Appendix 2](#)
- Endorsed CSA's and associated assessor guide are located in resource section of this document on e-policy.
- The Nursing Education Strategic Committee will keep a register of current and developing CSA's to ensure review at a minimum three yearly period.

5 Clinical Skill Assessment (CSA)

- CSA's are used to assess proficiency and knowledge of a specific clinical skill. Assessments may be performed in a simulated environment as deemed applicable by the assessor. When this occurs it is expected that the nurse will seek support from an experienced colleague when performing the skill on a patient for the first time.
- The purpose of the assessment is to establish that the nurse has achieved the necessary theoretical knowledge and can apply to practice in a safe and efficient manner.
- Each CSA requires pre-requisite learning that must be completed prior to attempting formal assessment.
- The staff member requesting assessment must maintain ongoing accountability of this learning and formally acknowledge that required learning has been completed.
- The assessor should also sign the document and record completion of the CSA via My Health Learning (HETI) online. Each CSA has an identified code for recording.
- Templates for CSA and CSA assessor guideline are available in [Appendix 3](#) and in the resource section of this document on e-policy.

5.1 Reassessment of Clinical Skill

- If assessment does not satisfy the expected criteria, candidates can undertake reassessment. The assessor must provide feedback on the assessment and offer strategies for improvement on page 2 of the CSA tool. This original CSA tool is to be utilised for the reassessment of the clinical skill.

- If reassessment is unsuccessful the matter must be referred to local management and relevant Nurse Educator for further development and management strategy implementation.

6 CSA Assessors

Within the SCHN the following criteria are required to be deemed a nominated assessor for CSAs:

- Minimum of 3 years post registration experience and completed the SCHN assessors' course
OR
- Holds a post graduate education degree
OR
- Completed a CERT IV in training and assessment
OR
- Is employed as a CNE/NE and has completed negotiated education

NB: Recognition of Prior Learning Plan can be implemented for staff with other appropriate experience. This is at the discretion of the Nurse Educator group.

7 Documentation

- The assessor and participant are required to sign the CSA
- Completion of the CSA is to be entered into My Health Learning (HETI) in the organisation assessment folder.
- The assessor provides the participant with a copy of the assessment.
- Completed CSAs can be scanned and stored securely as evidence of completion.
- If the CSA is a repeated assessment the most recent documented evidence should be retained and older copies destroyed.

8 Grievances

- Participants may dispute an assessment if the CSA was deemed not achieved.
- Participant provides a written or verbal statement to their line manager outlining the context of their grievance.

- Written feedback should include recommendations to help the participant work towards successful completion of the CSA including referral to relevant policies and learning packages.
- Identify a timeframe where the assessment outcome and grievance will be followed up.
- Identify if there are any immediate restrictions on practice and identify how these will be addressed.
- If grievance is unable to be successfully mediated refer to the document [Professional Practice Management of Nurses and Midwives](#).

9 References

1. Australian Commission on Safety and Quality in Healthcare, Clinical performance and effectiveness 2017. Retrieved 06.01.2020 <https://www.safetyandquality.gov.au/standards/nsqhs-standards/clinical-governance-standard/clinical-performance-and-effectiveness>
2. Vernon, R., Papps, E. & Dignam, D. (2012). Continuing competence for practice. Chang, E. & Daley, J. Transitions in Nursing, 3rd Edition. Transitions in Nursing, 3rd Edition. Elsevier Australia 9780729540827
3. Pijl-Zieber, E.M., Barton, S., Konkin, J., Awosoga, O, & Caine, V. (2014). Competence and competency-based nursing education: Finding our way through the issues. *Nurse Education Today*, 34, pp676-678

10 Appendices

10.1 Appendix 1: Application for CSA development

SCHN Nursing Clinical Skills Assessment Development Application



1. Name of skill identified as requiring a clinical skills assessment document

2. Risk rating for skill assessment (please circle)

1 (low risk) **2** (medium risk) **3** (high risk) **4** (extreme risk)

NB Rating 3-4 complete application
Rating 1-2 CSA not required, may submit application with relevant rationale for consideration

3.

Proposed Clinical Skills Assessment Details

1. Name :
2. Alignment to :
National Safety and Quality Health Service Standard/s: _____
Policy, Procedure or Guideline: _____
3. Key stakeholders:
Speciality service _____

Department: _____

Nurse Educator: _____

Working party members: _____

4. Rationale for CSA development

5. Proposed date of implementation of CSA _____

Name of person submitting application:

Department:

Date submitted:

Nurse Education Strategic Committee use only

Clinical Standard Approved:	YES	NO	(circle as appropriate)
Rationale for decision:			
Approved application: Expected date of completion: Nurse educator allocated:			
Approved on behalf of committee (Name)		[sign and date]	

Completed Clinical Standard Assessment

Document reviewed (date):	
Comments:	

MHL course operational assessment created (date and name of requested):

CSA registered into register:

6 month evaluation due date:

6 month evaluation outcome:

3 year review date:

This section is used when completed document submitted.

10.2 Appendix 2 CSA implementation evaluation



Evaluation form- SCHN Nursing Clinical Skill Assessment (insert name)

To ensure this document meets organizational needs in terms of content assessed, usability and quality please complete this evaluation form. Your constructive feedback would be greatly appreciated and will assist our future planning.

Please indicate your overall feeling of the assessment tool by marking the numerical scale and offering constructive comments.

1.Strongly disagree 2.Disagree 3. Neutral 4. Agree 5. Strongly agree.

Please circle the appropriate response

Easy to use	1	2	3	4	5
Appropriate flow of content	1	2	3	4	5
Content appropriate for assessment	1	2	3	4	5
Assessors guide assisted in performing assessment	1	2	3	4	5
Content of Information for assessors guide was appropriate	1	2	3	4	5
Does the form meet the goal of (insert clinical skill)	1	2	3	4	5

Please offer comment both positive and constructive:

Thank you for your time

10.3 Appendix 3 CSA Templates

10.3.1 (CSA and CSA assessor guide)

CSA Title

Objective: To demonstrate safe management of patients' receiving xxx.

I, _____ have read and understand the following relevant policies & practice guidelines:

- place in relevant guideline that you would expect the participant to have read and understood
- eg Aseptic Technique - SCHN
- insert
- insert
- insert

I have completed the following prerequisite learning for this assessment:

- as applicable (usually a HETI module)

Nurse Name: _____

Signature: _____

Employee No: _____

Demonstrated	Re-assessment	CLINICAL SKILLS STANDARD ELEMENTS FOR ASSESSMENT Demonstrates and/or discusses understanding of:
<input type="checkbox"/>	<input type="checkbox"/>	Dot points for each element to be assessed/observed/discussed
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	

- All elements successfully demonstrated and/or discussed
- Elements *NOT* successfully demonstrated - further assessment required - complete sections overleaf
- Re-assessment:** all elements successfully/unsuccessfully demonstrated
- Re-accreditation:** all elements successfully/unsuccessfully demonstrated

I am satisfied that on this day the above Clinical Skills Standard Elements for Assessment were met:

Assessor Name:

Signature:

Date:

I acknowledge that I am accountable for my ongoing development and maintenance of competency and this will be evidenced in my Professional Practice Portfolio:

Name:

Signature:

Designation:

HETI Code:

Date entered: _____

Clinical Standard Feedback

This section is used for constructive feedback relating to specific elements of the assessment from assessors and/or reflection on your own practice (directly related to feedback, or separately).

Clinical Standard Name:			
Assessor Feedback:			
Self-Reflection:			
Assessor [sign and date]		Nurse [sign and date]	

Clinical Standard Reassessment

This section is used for reassessment of any element(s) where the appropriate level of knowledge/skill had not been demonstrated.

Clinical Standard Name:	
--------------------------------	--

Assessor Feedback:

Self-Reflection:

SCHN Nursing Clinical Skills Standard Assessment

Name of CSA – Assessor Guide

Pre-requisite CSA (complete if required)

Demonstration or Discussion: The Clinical Skills Standard Elements for Assessment should be demonstrated to the assessor wherever possible. If an element is not able to be demonstrated then it must be discussed and knowledge demonstrated.

CLINICAL STANDARD ELEMENTS FOR ASSESSMENT

Expected demonstration/discussion points

Each element of assessment has an associated explanation of expected response or skill to be demonstrated. Each dot point may include any prompts or key questions