**Framework RN Peer Input Tool for Annual Evaluation: Clinical Skills and Knowledge**

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| **Peer feedback for (RN name):** |  |

**Directions:**

* Evaluatee to send behavior portions to peers who you would like feedback from
* Clinical Skills and Knowledge is to be completed by another RN
* Peers should indicate within the last column the level they feel is appropriate for the Evaluatee on each row
* Peers are encouraged to support their views with concrete examples
* Peers should complete the peer review within 7 Days and return electronically to the Manager/Designee and Evaluatee

| **DOMAIN: Clinical Skills & Knowledge** | | | | |
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| **A** | **C** | **D** | **E** | **Peer should designate appropriate level below** |
| **NURSING PROCESS** | | | | |
| **Assessment** | | | | |
| Performs assessment & identifies appropriate nursing diagnosis and/or patient care standard with assistance. | Independently and completely performs focused assessment to provide most effective patient care for a given patient population. | Independently and consistently performs goal-focused and individualized assessment when caring for all patients, including those with complex pathophysiological and psychosocial needs. | Exhibits highly developed assessment abilities that exemplify a comprehensive understanding of the total patient/family situation. |  |
| **Diagnosis** | | | | |
| Recognizes data and identifies obvious nursing diagnoses. | Prioritizes key nursing diagnoses to address physical and psychosocial/emotional areas. | Individualizes nursing diagnoses based on assessment data. | Individualizes nursing diagnoses based on assessment data and integrates that with the diagnoses & priorities of other disciplines in order to provide holistic care. |  |
| **Planning/Implementation/Evaluation** | | | | |
| Practice is guided primarily by policies, procedures, and standards | Practice is driven by theory and experience. | Practice relies on previous experience for focused analysis of problems and solutions with individual patient modification in order to meet outcomes. | Practice is driven by an intuitive base and is self-directed, flexible, and innovative. |  |
| Identifies expected outcomes and nursing interventions to meet identified diagnoses and maintain standards of clinical practice. | Independently develops, implements, and evaluates plan of care that recognizes subtle changes in patient’s condition and adapts plan as needed. | Accommodates unplanned events and evaluates/ responds appropriately with speed, efficiency, flexibility, and confidence. | Is consistently effective in providing holistic care that ensures positive change even in the most challenging patient care situations. |  |
| **Technology** | | | | |
| Utilizes standard unit technology and with assistance uses advanced technology as appropriate. | Utilizes standard unit technology and uses advanced technology as appropriate. | **Becomes expert and resource for use of standard unit technology and advanced technology as appropriate.** | **Takes a leadership role in evaluating technology and its potential for use.** |  |
| Utilizes computer correctly for basic functions, including: Outlook, MiChart: Labs &Radiology results reporting, Omnicell, Mandatory Program / Competencies, Policies and procedures. | Utilizes computer for basic functions as well as reference on patient conditions and treatment. | **Becomes resource for use of computer.** | **Able to conduct literature search through library functions— CINAHL, Cochrane, Medline, PubMed.** |  |
| **Patient & Family Education** | | | | |
| With assistance, identifies basic patient/family learning needs. | Accurately assesses patient/family’s readiness to learn, organizes and executes individualized teaching plan, evaluates patient’s understanding and modifies approach as necessary. Seeks out additional patient education resources beyond unit. | Identifies learning needs of designated populations. | Anticipates patient/family learning needs and utilizes a variety of teaching strategies appropriate to the patient’s needs. |  |
| Initiates teaching using patient teaching protocols, patient care standards and critical paths. |  | Works collaboratively to develop strategies to meet these learning needs**.** | **Serves as expert resource and facilitates other staff in improving patient education.** |  |
| Utilizes patient education resources on the unit. |  | Seeks out challenging patient/family education opportunities. |  |  |
|  |  | **Revises and develops patient education materials** | **Collaborates with other disciplines to develop and/or implement patient/family teaching programs.** |  |
| **Policy/Procedure/Protocols** | | | | |
| Identifies location of and utilizes hospital policies and unit procedures and protocols. | Demonstrates ease in application of hospital policies and unit procedures and protocols. | **Teaches and functions as a resource in the application of hospital policies, and unit procedures and protocols.** | **\*\*\* Researches, revises, and develops hospital policies and unit procedures and protocols utilizing appropriate channels and resources**. |  |
| **Promoting Culture of Safety** | | | | |
| Adheres to hospital policies related to medication safety: Order writing convention, Correct administration considerations, Double checks and other established policies and practices. | Identifies and intervenes when there are concerns related to medication safety, providing feedback to staff members involved. | **Unit expert and resource on medications applicable to their unit/clinical setting.** | **\*\*\* Advocates for culture of safety through knowledge, problem solving, and system changes.** |  |
| Familiar with and follows standards related to patient and staff safety | Anticipates and intervenes related to patient and staff safety. | **Facilitates others related to patient and staff safety; actively works toward prevention of potential injury.** |  |  |
| **Documentation** | | | | |
| Admission assessment, flow sheets, MARs, and other applicable documentation forms are completed in a timely manner according to policy with minimal guidance. | Consults documentation to identify trends in patient status and enhance continuity of assessment and ongoing nursing care. | **Involved in ongoing quality monitoring of documentation of nursing care and patient outcome.** | **\*\*\* Participates in the development of documentation tools, standards, and/or policy.** |  |

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| **Please describe a time when you saw me at my very best. What qualities did I display in this domain?** | | | |
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| **Please provide your input regarding opportunities for my personal and/or professional growth** | | | |
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| **I have completed the Peer Feedback Class as required by the UMPNC contract, paragraph 28E, for participation in the peer review process.** | | | |
| Name: |  | Date: |  |

Revised 5/1/09 Professional Development Framework RSAM Steering Committee/JIT Approved.