Te Wānanga Māori

![Whitireia NEW ZEALAND]

Ākonga Formative/Summative Self-Assessment of practice aligned to the NCNZ (2025) Standards of Competency

I. This form is an assessment tool based on Nursing Council New Zealand NCNZ (2025) Standards of Competence for Registered Nurses known from here on as Standards of Competence (SoC).

II. This is an ākonga self-assessment of their practice utilizing the SoC assessment tool including examples of clinical reasoning/clinical judgement related to each Pou. **You may have more than on CLN/Preceptor/delegated RN to provide evidence to complete this form. If this is the case, please ensure the ākonga records the full name date, designation & signature on the page of the Pou & the corresponding descriptor/s**

III. In the comments section the CLN/Preceptor/delegated RN provides clear example/s of the ākonga behaviour, that demonstrates how each Pou is met.

IV. If the CLN/Preceptor/Delegated RN identifies any issues/concerns regarding your knowledge, skill base, clinical practice, that may compromise the safety of; the patient, others, themselves, the clinical learning environment, the Nursing profession or Whitireia, the responsible clinician will discuss with you in the first instance. If this does has not get resolved, a discussion will occur with the Clinical Kaiako/ALN and the Manager of the clinical learning environment to review and decided on outcome. (alternative professional conduct avenues may be required depending on the nature of the concern/issue

V. Both Formative and Summative Self-Assessment has to have been discussed with the CLN/Preceptor/Delegated RN

Note: The Clinical kaiako/ALN will sign off the ākonga **Summative Competencies Pass/not past yet** evidenced from the clinical visits+notes, ākonga competencies and CLN/Preceptor/delegated RN feedback.

Ākonga Name:
Clinical Placement:
Date of Placement – Start and **Finish** **No. of Days and Dates of non-attendance at placement**
All Names of CLN/Preceptor/Delegated RN completing the Preceptor Feedback form

Pou One: Māori Health		
Reflecting a commitment to Māori health, registered nurses support, respect and protect Māori rights while advocating for equitable and positive health outcomes. Nurses are also required to demonstrate Kawa Whakaruruhau by addressing power imbalances and working collaboratively with Māori.		
Descriptor	**Met/Not Met**	**Ākonga Evidence of application to Nursing**
Descriptor 1.1 Engages in ongoing professional development related to Māori health and the relevance of Te Tiriti o Waitangi articles and principles.		
Descriptor 1.2 Advocates for health equity for Māori in all situations and contexts.		
Descriptor 1.3 Understands the impact of social determinants, such as colonisation, on health and wellbeing.		
Descriptor 1.4 Uses te reo and incorporates tikanga Māori into practice where appropriate.		
Kaiako Comments		

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Pou Two: Cultural Safety		
Cultural safety in nursing practice ensures that registered nurses provide culturally safe care that is inclusive, responsive and equitable. This requires nurses to reflect on their practice, understand their cultural identity and the power imbalances between the nurse and the recipient of care.		
Descriptor	**Met/Not Met**	**Ākonga Evidence of application to Nursing**
Descriptor 2.1 Practises culturally safe care which is determined by the recipient.		
Descriptor 2.2 Challenges racism and discrimination in the delivery of nursing and health care.		
Descriptor 2.3 Engages in partnership with individuals, whānau and communities for the provision of health care.		
Descriptor 2.4 Advocates for individuals and whānau by including their cultural, spiritual, physical and mental health when providing care.		
Descriptor 2.5 Contributes to a collaborative team culture which respects diversity, including intersectional identities, and protects cultural identity by acknowledging differing worldviews, values and practices.		
Kaiako Comments		

Pou Three: Whanaungatanga and Communication

A commitment to whanaungatanga and communication requires registered nurses to establish relationships through the use of effective communication strategies which are culturally appropriate and reflect concepts such as whānau-centred care and cultural safety. An understanding of different forms of communication enables the nurse to engage with the interprofessional healthcare team, advocate for innovative change where appropriate and influence the direction of the profession.

Descriptor	Met/Not Met	Ākonga Evidence of application to Nursing
Descriptor 3.1 Understands and complies with professional, ethical, legal and organisational policies for obtaining, recording, sharing and retaining information acquired in practice.		
Descriptor 3.2 Determines the language and communication needs (verbal and non-verbal) of people, whānau and communities.		
Descriptor 3.3 Incorporates professional, therapeutic and culturally appropriate communication in all interactions.		
Descriptor 3.4 Communicates professionally to build shared understanding with people, their whānau and communities.		
Descriptor 3.5 Assesses health-related knowledge, provides information and evaluates understanding to promote health literacy.		
Descriptor 3.6 Ensures documentation is legible, relevant, accurate, professional and timely.		
Descriptor 3.7 Uses appropriate digital and online communication.		
Descriptor 3.8 Provides, receives and responds appropriately to constructive feedback.		
Kaiako Comments		

Pou Four: Pūkengatanga and Evidence-Informed Nursing Practice

Pūkengatanga and evidence-informed nursing practice requires registered nurses to use clinical skills, coupled with critical thinking and informed by high quality and current evidence, to provide quality, safe nursing care. Evidence-informed practice prepares the nurse to differentially diagnose, plan care, identify appropriate interventions, lead the implementation, and evaluate care provision and outcomes.

Descriptor	Met/Not Met	Ākonga Evidence of application to Nursing
Descriptor 4.1 Understands the wide range of assessment frameworks and uses the appropriate framework to undertake comprehensive assessments in the practice setting.		
Descriptor 4.2 Develops differential diagnoses based on Comprehensive assessment, clinical expertise and current evidence to inform the plan of care.		
Descriptor 4.3 Implements and evaluates effectiveness of Interventions and determines changes to the plan of care.		

Descriptor 4.4 Coordinates and assigns care, delegates activities and provides support and direction to others.		
Descriptor 4.5 Safely manages medicines based on Pharmacotherapeutic knowledge, including administration in accordance with policies and best practice guidelines.		
Descriptor 4.6 Supports individual and whānau choices of complementary therapies by ensuring they have sufficient information to make informed decisions about treatment options.		
Descriptor 4.7 Understands cultural preferences for Complementary treatment, such as the use of rongoā and supports integration into care.		
Descriptor 4.8 Demonstrates digital capability and online health literacy to support individuals, whānau and communities to use technology for managing health concerns and promoting wellbeing.		
Descriptor 4.9 Applies infection prevention and control principles in accordance with policies and best practice guidelines.		
Descriptor 4.10 Identifies, assesses, and responds to emerging risks and challenging situations by adjusting priorities and escalating to the appropriate person.		
Descriptor 4.11 Understands and works within the limits of expertise and seeks guidance to ensure safe practice.		
Descriptor 4.12 Maintains awareness of trends in national and global nursing to inform change in practice and delivery of care.		

Kaiako Comments

Pou Five Manaakitanga and People-Centred Care

Manaakitanga and people-centred care requires nurses to demonstrate compassion, collaboration and partnership to build trust and shared understanding between the nurse and people, whānau or communities. Compassion, trust and partnership underpin effective decision-making in the provision of care to support the integration of beliefs and preferences of people and their whānau.

Descriptor	Met/Not Met	Ākonga Evidence of application to Nursing
Descriptor 5.1 Ensures integrated relational and whakapapa-centred care to meet the needs of people and whānau		
Descriptor 5.2 Upholds the mana of individuals, whānau and the nursing profession by demonstrating respect, kindness, honesty and transparency of decision-making in practice.		
Descriptor 5.3 Facilitates opportunities for people and whānau to share their views and actively contribute to care planning, decision-making and the choice of interventions.		

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Descriptor 5.4 Establishes, maintains and concludes safe therapeutic relationships		

Kaiako Comments

Pou Six: Rangatiratanga and Leadership.

Rangatiratanga and leadership in nursing practice are demonstrated when nurses proactively provide solutions and lead innovation to improve the provision of care. Leadership requires all nurses to act as change agents and lead change when appropriate. Fundamental to the integration of leadership is the need for nurses to intervene, speak out, and advocate to escalate concerns on behalf of colleagues or recipients of care.

Descriptor	Met/Not Met	Ākonga Evidence of application to Nursing
Descriptor 6.1 Actively contributes to a collaborative team culture of respect, support and trust.		
Descriptor 6.2 Demonstrates professional and ethical accountabilities in practice and adheres to the Nursing Council of New Zealand Code of Conduct, relevant legislation and organisational policies and procedures.		
Descriptor 6.3 Understands continuous learning and proactively seeks opportunities for professional development.		
Descriptor 6.4 Engages in quality improvement activities.		Similar to 2.9. Attend education programmes relevant to development goals, review and update goals regularly.

Descriptor 6.5 Identifies and responds appropriately to risk impacting the health, safety and wellbeing of self and others to practise safely.		
Descriptor 6.6 Understands the impact of healthcare provision on global and local resources, demonstrates and supports the constant assessment and improvement of sustainability practices.		

Kaiako Comments

Feedback Discussed with ākonga by CLN/Preceptor/Delegated RN	Please Circle One Ae/Yes Kao/No	Feedback Discussed with CLN/Preceptor/Delegated RN	Please Circle One Ae/Yes Kao/No
Ākonga Signature & Date			

Framework…the purpose of Lasater Clinical Judgement Rubric is:

1. To support the ākonga to grow their understanding and application of clinical reasoning/clinical judgement into their practice

2. To be used as a guide for ākonga self-assessment of their practice

3. A reference point for CLN/Preceptors/delegated RN working with ākonga as required. The rubric does not replace the knowledge, skills and experience the CLN/Preceptor/delegated RN brings into the learning environment, it contributes to the overall conversations of practice

4. Both as a guide and a reference point to provide feedback that has both quantitative and qualitative evidence.

5. To triangulate the clinical kōrero between ākonga, CLN/Preceptor/delegated RN and Clinical Kaiako for consistency and sustainability purposes.

6. Provide a quick visual of the Performance Scale of each Pou and descriptor at any given time and Lasater Clinical Judgement rubric

7. This framework along with the Performance Scale is part of the ongoing educational support to the CLN/Preceptor/delegated RN working alongside of the future workforce in Nursing.

Note: Sustainability as it is applied to the Standards of Competence used here, aligns with the values of Cultural Safety, Equity and Holistic Health to name a few.

We welcome all feedback you have regarding the structure and content found in the opening page and the Lasater Clinical Judgement rubric. This feedback is invaluable to the ongoing monitoring and development of this Feedback form.

LASATER CLINICAL JUDGMENT RUBRIC - Noticing and Interpreting

Effective NOTICING involves:	Exemplary	Accomplished	Developing	Beginning

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Focused Observation	Focuses observation appropriately; regularly observes and monitors a wide variety of objective and subjective data to uncover any useful information	Regularly observes/monitors a variety of data, including both subjective and objective; most useful information is noticed, may miss the most subtle signs	Attempts to monitor a variety of subjective and objective data, but is overwhelmed by the array of data; focuses on the most obvious data, missing some important information	Confused by the clinical situation and the amount/type of data; observation is not organized and important data is missed, and/or assessment errors are made
Recognizing Deviations from Expected Patterns	Recognizes subtle patterns and deviations from expected patterns in data and uses these to guide the assessment	Recognizes most obvious patterns and deviations in data and uses these to continually assess	Identifies obvious patterns and deviations, missing some important information; unsure how to continue the assessment	Focuses on one thing at a time and misses most patterns/deviations from expectations; misses opportunities to refine the assessment
Information Seeking	Assertively seeks information to plan intervention: carefully collects useful subjective data from observing the client and from interacting with the client and family	Actively seeks subjective information about the client's situation from the client and family to support planning interventions; occasionally does not pursue important leads	Makes limited efforts to seek additional information from the client/family; often seems not to know what information to seek and/or pursues unrelated information	Is ineffective in seeking information; relies mostly on objective data; has difficulty interacting with the client and family and fails to collect important subjective data
Effective INTERPRETING involves:	**Exemplary**	**Accomplished**	**Developing**	**Beginning**
Prioritizing Data	Focuses on the most relevant and important data useful for explaining the client's condition	Generally focuses on the most important data and seeks further relevant information, but also may try to attend to less pertinent data	Makes an effort to prioritize data and focus on the most important, but also attends to less relevant/useful data	Has difficulty focusing and appears not to know which data are most important to the diagnosis; attempts to attend to all available data

Making Sense of Data	Even when facing complex, conflicting or confusing data, is able to (1) note and make sense of patterns in the client's data, (2) compare these with known patterns (from the nursing knowledge base, research, personal experience, and intuition), and (3) develop plans for interventions that can be justified in terms of their likelihood of success	In most situations, interprets the client's data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; the exceptions are rare or complicated cases where it is appropriate to seek the guidance of a specialist or more experienced nurse	In simple or common/familiar situations, is able to compare the client's data patterns with those known and to develop/explain intervention plans; has difficulty, however, with even moderately difficult data/situations that are within the expectations for students, inappropriately requires advice or assistance	Even in simple of familiar/common situations has difficulty interpreting or making sense of data; has trouble distinguishing among competing explanations and appropriate interventions, requiring assistance both in diagnosing the problem and in developing an intervention

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LASATER CLINICAL JUDGMENT RUBRIC - Responding and Reflecting

Effective RESPONDING involves:	Exemplary	Accomplished	Developing	Beginning
Calm, Confident Manner	Assumes responsibility: delegates team assignments, assess the client and reassures them and their families	Generally displays leadership and confidence, and is able to control/calm most situations; may show stress in particularly difficult or complex situations	Is tentative in the leader's role; reassures clients/families in routine and relatively simple situations, but becomes stressed and disorganized easily	Except in simple and routine situations, is stressed and disorganized, lacks control, making clients and families anxious/less able to cooperate
Clear Communication	Communicates effectively; explains interventions; calms/reassures clients and families; directs and involves team members, explaining and giving directions; checks for understanding	Generally communicates well; explains carefully to clients, gives clear directions to team; could be more effective in establishing rapport	Shows some communication ability (e.g., giving directions); communication with clients/families/team members is only partly successful; displays caring but not competence	Has difficulty communicating; explanations are confusing, directions are unclear or contradictory, and clients/families are made confused/anxious, not reassured

Well-Planned Intervention/Flexibility	Interventions are tailored for the individual client; monitors client progress closely and is able to adjust treatment as indicated by the client response	Develops interventions based on relevant patient data; monitors progress regularly but does not expect to have to change treatments	Develops interventions based on the most obvious data; monitors progress, but is unable to make adjustments based on the patient response	Focuses on developing a single intervention addressing a likely solution, but it may be vague, confusing, and/or incomplete; some monitoring may occur
Being Skilful	Shows mastery of necessary nursing skills	Displays proficiency in the use of most nursing skills; could improve speed or accuracy	Is hesitant or ineffective in utilizing nursing skills	Is unable to select and/or perform the nursing skills
Effective REFLECTING involves:	**Exemplary**	**Accomplished**	**Developing**	**Beginning**
Evaluation/Self-Analysis	Independently evaluates/ analyzes personal clinical performance, noting decision points, elaborating alternatives and accurately evaluating choices against alternatives	Evaluates/analyzes personal clinical performance with minimal prompting, primarily major events/decisions; key decision points are identified and alternatives are considered	Even when prompted, briefly verbalizes the most obvious evaluations; has difficulty imagining alternative choices; is self-protective in evaluating personal choices	Even prompted evaluations are brief, cursory, and not used to improve performance; justifies personal decisions/choices without evaluating them
Commitment to Improvement	Demonstrates commitment to ongoing improvement: reflects on and critically evaluates nursing experiences; accurately identifies strengths/weaknesses and develops specific plans to eliminate weaknesses	Demonstrates a desire to improve nursing performance: reflects on and evaluates experiences; identifies strengths/weaknesses; could be more systematic in evaluating weaknesses	Demonstrates awareness of the need for ongoing improvement and makes some effort to learn from experience and improve performance but tends to state the obvious, and needs external evaluation	Appears uninterested in improving performance or unable to do so; rarely reflects; is uncritical of him/herself, or overly critical (given level of development); is unable to see flaws or need for improvement

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