Australian College of Neonatal Nurses Incorporated (INC1300211)

Holistic Assessment Tool

Advanced Practitioner/Expert Level (2025)

Australian College of Neonatal Nurses Incorporated (INC1300211) *Holistic Assessment Tool for Advanced practitioner/expert Neonatal Nurses 2025



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Version Control

The ACNN Holistic Assessment Tool – Proficient

The ACNN (INC1300211) Holistic Assessment Tool – Proficient will remain current until 2030 (5 years) or earlier when modifications are required.

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Advanced practitioner/expert level in neonatal nursing

At advanced/expert level, a neonatal nurse has an intuitive grasp of each clinical situation. They demonstrate higher level knowledge and skill based on extensive clinical and theoretical experience. The advanced neonatal nurse can critically analyse clinical and professional situations according to context and use the information to plan thorough and comprehensive care. They display clear leadership skills and are able to produce significant work in research and quality improvement. The advanced neonatal nurse offers sound mentorship and clinical supervision skills to colleagues and students.

Use of the holistic assessment tool – Advanced Practitioner / Expert level

A holistic approach to assessing nurse knowledge and performance involves observing the neonatal nurse's overall role performance. This includes observing and assessing their communication, ethics, technical skills, cultural awareness, attitudes, knowledge, professional behaviors, clinical decision making, and critical thinking.

As an assessment of practice, assessors must, therefore, carry out the observation in the context of the neonatal nurse's interactions with infants and families. This method is useful in determining the nurse's skills, knowledge, values and attributes within their practice.

An holistic assessment of practice is a valid model of measuring core skills and competencies, but should be conducted via a collaborative relationship between neonatal nurse and the assessor. This ensures mutual understanding of the process, and helps the neonatal nurse feel confident in the process and its purpose.

During the assessment, the assessor uses their knowledge and professional judgement, drawing inferences and tacit awareness to form conclusions about the neonatal nurse's practice.

Therefore, use of this tool requires sufficient duration of observation in the nurse's usual clinical context to achieve a reliable assessment.

At the conclusion of the observation period, an essential component of the assessment is the reflection process. Assessor and neonatal nurse discuss the observation, performance, strengths and developing skills/knowledge to provide guidance on further development.

Advanced practitioner / expert level Holistic Assessment (example)

Neonatal nurse's name:_____ Date:_____

General Allocated Patient Information (example)

Sarah was allocated 1 patient in Room 4.

The infant was born at 23 weeks gestation to a 20 yr old Afghani woman, G1 P0, after premature labour and PROM for 1 week. BW 490g. Apgars 1, 3 & 5. The female infant is now 4 days old and is being mechanically ventilated using HFOV and requiring 86% Fi02, following x2 doses of surfactant. She is receiving TPN/lipids via a UVC. Medications are morphine, noradrenaline, caffeine, and probiotics. Her mother speaks limited English, is a patient on the postnatal ward but is being discharged home tomorrow. She has been expressing regularly. The infant's father is a 26 yr old Afghani man who does speak English, and he has indicated that they do not have extended family in Australia. This family live locally, but do not have their own transport.

Standard 1: Thinks critically and analyses nursing practice

1.4 Advanced Practitioner and Expert – 4 or more years

1.4.1 Advocate for best evidence-based practice by engaging with stakeholders to influence and support change/improvement.
1.4.2 Develop, update and review policies and guidelines to include best available evidence and research outcomes
1.4.3 Undertake additional roles that expand scope of practice, influence team growth and role model critical thinking.

Supporting evidence (example)

Sarah discussed the infant's clinical situation in light of research and best-evidence findings, particularly regarding extreme prematurity and significant lung disease. She demonstrated thorough and extensive clinical knowledge on both topics and could identify all potential outcomes.

Sarah demonstrated extensive reading of the literature through her recent work in developing a guideline on intravenous line antisepsis. She discussed her interpretation of the evidence and which findings were integrated into the document.

Regarding her scope of practice, Sarah explained her desire to complete the training package required for independent IV cannulation and blood sampling. She has completed the theoretical components and is now undertaking her supervised procedures in order to become independent.

Standard 2: Engages in therapeutic and professional relationships

2.4 Advanced Practitioner and Expert – 4 or more years

2.4.1 Applies high-level clinical and theoretical knowledge to critically analyse, delegate, supervise, coordinate and negotiate to develop and support professional relationships.
2.4.2 Engages with families, applying high-level communication skills in discussing research/quality projects and potential inclusion of their infant.
2.4.3 Displays expert leadership and supervision skills through active listening and providing effective and constructive feedback in facilitating development of professional performance.

Supporting evidence

Sarah began her shift by introducing herself to the infant's father who was present and established rapport by asking questions and discussing her goals of care for the day. She quickly identified that the father was extremely anxious with regards to the infant's extreme prematurity and size. He was reluctant to touch the infant or divulge his feelings. Sarah calmly acknowledged his fears and explained her immediate care activities. She also discussed how beneficial his presence was for his infant and his wife, and that the sound of his voice was a calming and positive influence for both. She negotiated with him the possibility of him reading a story to the infant later in the afternoon, allowing him time to consider the activity and prepare.

As the infant was enrolled as part of a research study centered around humidity in the first 72 hours, Sarah was able to discuss potential effects for the infant with the family in a transparent and approachable manner, and any progress of the study so far.

Throughout the shift, Sarah worked alongside a more junior nurse caring for an infant in the opposite bedspace. This nurse displayed interest and asked appropriate questions about caring for an extremely preterm infant. Sarah was supportive, reflective and considered in her answers, encouraging the junior nurse's critical thinking skills in identifying the complexities associated with caring for a critically fragile infant. She encouraged the junior nurse to assist her with activities and clinical preparation of medicines, providing clear and sensitive feedback once completed.

Standard 3: Maintains capability for practice

3.4 Expert- Advanced Practitioner – 4 or more years

3.4.1 Actively engages with professional nursing, midwifery and academic bodies that are relevant to the on-going development of nursing practice.
3.4.2 Leads and role-models the ongoing process of developing and revising guidelines, protocols, and standards related to neonatal care.
3.4.3 Provides professional development activities to maintain own capability in practice and support colleagues ongoing skill and knowledge development.

Supporting evidence

Sarah has submitted an abstract to two international conferences this year. One was accepted as a poster presentation, and the other a 15 min presentation. Sarah delivers in-service sessions regularly and devotes time to teaching junior staff and nursing students, encouraging their engagement in learning.

Sarah consistently mentors new staff moving into the intensive care environment. She demonstrates skills in teaching and connecting with her learners and seeks out new methods of teaching both skill and clinical reasoning. Sarah regularly reviews clinical guidelines and is primary author on three separate unit-based policies. She has recently been approached to contribute to a statewide guideline on jaundice management.

Sarah has been engaged with the Developmental Care SIG of ACNN for the last 2 years and has contributed to the development of neonatal nurses around Australia by presenting education sessions at online seminars.

Standard 4: Comprehensively conducts assessments

4.4 Expert – Advanced Practitioner – 4 or more years

4.4.1 When possible, ensures contact with families pre-birth to provide key information in preparation for anticipated admission and discuss care choices.
4.4.2 Comprehensively explores and analyses holistic assessment findings to identify priorities and initiate actions.
4.4.3 Prepares and discusses discharge plan to ensure all specialists and follow up appointments are detailed and organised.

Supporting evidence

Sarah demonstrated expertise in assessing the needs of the family she was caring for. She identified the family's limited emotional support systems, potential cultural and spiritual needs, as well as practical financial pressures. She deftly questioned the father about their life, activities, responsibilities and pressures. She identified the need for referral to the social work team, to interpreter services to allow for clear communication with the mother and Sarah also encouraged the father to engage with his spiritual leader for extra support.

Sarah efficiently documented the family's preferences and other pieces of key information into the medical record to ensure clear communication with subsequent shifts.

While Sarah had only met this family on the day of the assessment, she frequently works as team leader in the NICU. In this role, she assists with pre-birth counselling and support for families expecting a NICU stay for their infant. Sarah works hard to provide as much information for these families as they are ready to receive.

Standard 5: Develops a plan for nursing practice

5.4 Expert – Advanced Practitioner – 4 or more years

5.4.1 Critically analyses care in alignment with current best practice and modifies plan of care as required.
5.4.2 Initiates and actively engages in research, quality improvement and auditing activities to improve care planning and implementation.

Supporting evidence

Sarah considered her assessment findings and used these to plan her care for the shift. She initiated referrals to the social work team, the interpreter service and discussed specifics with the postnatal midwife caring for the mother. Sarah documented her actions thoroughly.

As changes occurred, or further information came to her attention, Sarah modified her plans accordingly. She could describe her rationales for changes in relation to evidence-based practice and research.

Sarah consistently engages with several special interest groups in NICU, namely the e-Prem team and the infection prevention & control committee. As part of her work with these, Sarah actively contributes to QI activities such as quality audits and improvement projects. The recent project "e-prem admission temperatures" required Sarah to take a leadership role in the planning and development which she managed effectively and professionally.

Standard 6: Provides safe, appropriate, and responsive quality nursing practice

6.4 Expert – Advanced Practitioner – 4 or more years

6.4.1 Promotes and co-ordinates safe staffing levels and manages resources for safe and optimal outcomes.
6.4.2 Seeks out, evaluates and incorporates emerging technologies and practices to continuously improve care provision.
6.4.3 Protects the rights of neonates and their families involved in research and/or quality improvement

activities.

Supporting evidence

Sarah frequently assumes the team-leader role in the NICU and displays sound leadership skills and resource management. She demonstrates a clear understanding of the impact of nursing staff levels on neonatal outcomes and can discuss nurse-sensitive indicators.

Sarah attends conferences and seminars regularly to maintain her education and keep abreast of current trends in care. As part of this, Sarah looks for new technologies and equipment development that could potentially benefit neonatal care, linking up with NICU Equipment Committee to advise of findings. She is also involved with practice development education and adopts new techniques in teaching and simulation. Sarah is seen as a leader in this respect offering innovative education methodology, inspiring junior nurses to learn and improve practice.

Sarah demonstrates sound knowledge of research conducted in the unit and can identify the ethics and rights of neonates and families involved in studies and projects.

Standard 7: Evaluates outcomes to inform practice

7.4 Advanced Practitioner and Expert – 4 or more years

7.4.1 Critically analyses evidence-based knowledge and applies clinical reasoning in the evaluation of outcomes and adapting planned care.
7.4.2 Monitors clinical reporting, audit data and adverse incidents to evaluate trends and outcomes to inform care improvement.
7.4.3 Evaluates quality improvement and/or research outcomes, identifying relevance and makes recommendations to incorporate into practice guidelines/policies.
7.4.4 Provides clinical guidance and mentorship/supervision to members of the multidisciplinary team in the evaluation of care outcomes, which may include support and debriefing opportunities.

Supporting evidence

Sarah clearly articulated the importance of the relationship between care delivery and neurodevelopmental outcomes. She discussed the opportunity that nurses have in positively impacting clinical outcomes by following evidence-based guidelines, considering research findings and using sound clinical reasoning in care delivery.

When discussing outcome measures, Sarah identified the critical importance of benchmarking, clinical reporting and monitoring systems to maintain scrutiny of care practices. Sarah understands that interpreting these findings and linking outcomes back to evaluate care practices is critical in devising strategies for improvement. Sarah participates in a variety of groups that integrate outcome findings into QI activities and adjustments to clinical practice guidelines.

As an advanced practitioner, and a leader in the NICU, Sarah is acutely aware of her responsibilities in mentoring other staff and supporting them through emotionally or clinically challenging aspects of care provision. She is an experienced 'AIR' delegate is adept at offering 'hot' debriefing after critical incidents that occur in the NICU or in delivery suite.

Outcome (tick one):

Meets expected standards ☐

Working towards expected standards ☐

Assessor's name:_____ Date:_____

Assessor's signature:_____

Collaborative discussion and feedback / strengths and areas to improve/ development plan:

Sarah delivers safe, effective and highly skilled care to infants in the NICU. She comprehensively assesses clinical information and incorporates it into a thorough and considered care plan that supports both infant and family. Her clinical knowledge is extensive, and she generously shares this with her colleagues in a supportive and encouraging manner. Her time management is excellent, and her prioritisation skills are sound.

Sarah's communication with families is compassionate, sensitive and highly skilled. Feedback from families has indicated she is valued and appreciated for her professional care and sensitive nature in working with families undergoing trauma.

She has sound reflection skills; understands her own strengths and she consistently seeks out opportunities to develop and improve.

Sarah has expressed an interest in expanding her professional development. She is contemplating upcoming opportunities for relief work in the Nurse Educator position and considering her capacity to undertake further academic study at University to support this.