Australian College of Neonatal Nurses Incorporated (INC1300211)

# Holistic Assessment Tool

## Novice - Advanced Beginner Level (2025)

**Australian College of Neonatal Nurses Incorporated (INC1300211) *Holistic Assessment Tool for Novice-Advanced Beginner Neonatal Nurses 2025**



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**Version Control**

The ACNN Holistic Assessment Tool – Novice to Advanced Beginner

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

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# Novice – advanced beginner in neonatal nursing

At novice level, a neonatal nurse has had little experience with situations at hand in the NICU/SCU. They may struggle with deciding which tasks are most relevant and have an inability to use discretionary judgement. As the neonatal novice gains knowledge, they move into an advanced beginner stage where they are able to draw on enough situational experience that they can identify patterns and responses. At this stage, the neonatal nurse is still focused on rules and guidelines that have been taught and is reliant on support from mentors/colleagues.

## Use of the holistic assessment tool – novice to advanced beginner

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.

# Novice to Advanced Beginner Holistic Assessment (example)

Neonatal nurse's name: _____ Date:_____

## General Allocated Patient Information (example)

*Jane was allocated 2 patients in Room 8.*

*Infant 1 was born at 28 weeks gestation to a 26 yr old woman, G3 P2, after threatened premature labor with an APH and suspicious CTG. BW 920g. Apgars 4, 6 & 9. Infant now 9 days old and managed on CPAP of 7cm in 30% Fi02. He is receiving TPN/lipids and 2nd hourly OGT feeds. Medications are caffeine, infloran and nilstat. His mother is staying on site at Ronald McDonald House, is expressing regularly and attends to cares throughout the day. His father has returned to their rural property to work.*

*Infant 2 was born at 31 weeks gestation to a 34 yr old woman, G6 P2 after PROM at 29 weeks gestation, and spontaneous premature labor. BW 1230g. Apgars 6,8 & 8. Infant is now 3 days old and managed on CPAP of 6cm in 21% Fi02. He is receiving increasing OGT feeds of PDHM 2nd hourly. He is receiving caffeine and infloran. His mother is an inpatient in postnatal ward and has elected to formula feed following a period of PDHM.*

## Standard 1: Thinks critically and analyses nursing practice

**1.1 Novice – Advanced Beginner – First patient to 1 year**

1.1.1 Includes families and colleagues in the critical assessment of care across the continuum, acknowledging individual and complex needs.
1.1.2 Engages in the continuous process of self-assessment through critical reflection.
1.1.3 Ensures that nursing practice is ethical, culturally safe, and respectful of the family's values, beliefs and preferences.

**Supporting evidence (example)**

*During handover, Jane was able to critically assess the situation and prioritise her care activities. Jane involved the family in her assessment of the infant, helping her to plan care for her shift.*

*She demonstrated approachability, honesty and transparency in her communication with the families in her care and advocated for the family by asking clinical questions on a father's behalf when he was unable to be present due to work schedule.*

*Jane discussed with one mother her cultural background, asking appropriate questions, and using this information to inform her care choices.*

*At the end of the assessment, Jane was able to reflect on the morning's care and identify aspects of neonatal care she needed more information on and could develop a plan to meet those needs.*

## Standard 2: Engages in therapeutic and professional relationships

**2.1 Novice – Advanced Beginner – First patient to 1 year**

2.1.1 Introduces self to families and fosters an environment of open communication between the family and the multidisciplinary team.
2.1.2 Ensures all forms of communication are complete, unbiased, culturally appropriate and literacy sensitive in consumer-friendly language.
2.1.3 Recognises the need to actively listen to families to identify and document social, emotional, spiritual and cultural needs.
2.1.4. Builds relationships with families from diverse groups including those from Aboriginal and Torres Strait Islander, Culturally and Linguistically Diverse (CALD), and marginalised groups.
2.1.5 Maintains privacy and confidentiality of all information and acts to preserve the dignity and safety of families in difficult situations.
2.1.6 Aware of the Australian Charter of Healthcare Rights and the role of advocating and protecting the rights of the neonate and family.
2.1.7 Utilises verbal and non-verbal communication techniques with families and colleagues in a respectful way that promotes collaboration.
2.1.8 Communicates and collaborates in multidisciplinary teams to facilitate safe and appropriate care for neonates and families.
2.1.9 Maintains professional boundaries during interactions with families and colleagues, including the use of social media, ensuring compliance with health policies, professional codes of ethics and professional codes of conduct.

**Supporting evidence**

*Throughout the assessment, Jane introduced herself and members of the team when they arrived for morning round. She actively participated in the medical round by asking questions, clarifying information and ensured that family present were included. She explained decisions made on the round to the family in 'plain language' and asked questions to determine their understanding.*

*After listening closely to one mother on her cultural background, Jane documented this in the patient record to ensure the information and preferences were recorded for other staff to be aware of. Jane was able to articulate why all of those actions are important, and potential effects for both infant and family.*

*Jane maintained professional boundaries at all times with both families and colleagues. During the assessment, Jane demonstrated her awareness of local policies governing her actions, as well as knowledge of codes of ethics, codes of conduct and the charter of healthcare rights.*

## Standard 3: Maintains capability for practice

**3.1 Novice – Advanced Beginner - First patient to 1 year**

3.1.1 Identifies own knowledge base and acts within own scope of practice.
3.1.2 Reflects on own practice and discusses with colleagues and mentors.
3.1.3 Utilises local governing documents that are relevant to neonatal care, including best available evidence-based clinical guidelines, policies and procedures.

3.1.4 Identifies the need for continuing professional development activities and an awareness of national and international neonatal nursing professional organisations to engage in professional development activities.
3.1.5 Assumes responsibility and accountability for documenting and summarising own continuing professional development activities via paper-based records, web-hosted methods, or app-based recording in line with AHPRA requirements.

**Supporting evidence**

*Throughout the assessment, Jane identified areas of practice she felt needed development in order for her to progress. She could self-reflect and outline her strengths and weaknesses in her neonatal nursing knowledge, but also engaged in seeking out feedback from her senior colleagues. Jane demonstrates her eagerness to learn and is consistently looking for opportunities to build her knowledge and experience. She attends in-service sessions regularly and has enrolled in an upcoming clinical skill workshop on developmental care practices.*

*Jane identified the importance of recording her professional development activities into her portfolio to ensure a complete record and to fulfill AHPRA requirements. She also is a keen user of an app-based system of recording education, and writing reflections that can be printed and added to her portfolio.*

## Standard 4: Comprehensively conducts assessments

**4.1 Novice – Advanced Beginner - First patient to 1 year**

4.1.1 Identifies and uses a range of holistic assessment techniques to collect and document relevant and accurate information to inform practice and decision making.
4.1.2 Describes clinical, cultural, emotional, financial, psychosocial and/or spiritual components of assessment.
4.1.3 Discusses with colleagues local resources available to meet identified needs of neonates and families.
4.1.4 Describes concept of developmental appropriateness of the neonatal environment.

**Supporting evidence**

*Jane used a variety of tools available at the bedside to assess and collect information about her patient to help her decide on a care plan for her shift. These included a top to toe physical assessment, as well as a skin inspection, and a pain assessment.*

*When discussing a family staying on site at Ronald McDonald House, Jane could identify the difficulty in having limited availability of rooms, particularly if the family were to return home for a period of time, then come back. In this, she was assessing local resources for the family in her care.*

*Jane acknowledged she had a basic understanding of neurodevelopmental care factors yet was able to identify the need for protection from strong lighting or loud noise to prevent undue stress or instability.*

## Standard 5: Develops a plan for nursing practice

**5.1 Novice – Advanced Beginner - First patient to 1 year**

5.1.1 Discusses and collaborates with colleagues and family to initiate and implement a plan of care that includes priorities, actions and outcomes.
5.1.2 Identifies the need for individualised care that is based on family centred, cultural and developmentally supportive care principles.
5.1.3 Identifies and discusses with colleagues when modification to plan of care is required and documents appropriately.

**Supporting evidence**

*Jane engaged with her colleagues to discuss her plan of care, outlining what her priorities for the shift would be and how to action them. Approaching care planning in a collaborative manner, Jane was able to consider points of view from others, including other disciplines. Jane comprehensively documented the information received, outcomes of her assessments, discussion with family, and planned care.*
*Jane has a beginning level of knowledge of neuroprotective strategies, appropriate for her level of experience. She demonstrated good knowledge of need for family bonding and attachment and incorporated this into her practice as able.*

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

**6.1 Novice – Advanced Beginner - First patient to 1 year**

6.1.1 Shares relevant information with colleagues, such as families' preferences, values and social situation in order to deliver optimal care.
6.1.5 Ensures safe practices and use of equipment by adhering to workplace guidelines, policies, standard operating procedures, monitoring and reporting procedures.
6.1.2 Practises to mitigate medication and other clinical errors and participates in reporting, monitoring and evaluating to reduce risk for neonates.
6.1.4 Understands and responds to protection and safety issues for neonates and families according to local laws, policies and procedures.

**Supporting evidence**

*Jane ensured she provided clinically relevant information with other health professionals, and conveyed the preferences, choices and values of the infant's family to required health professionals. This was particularly well demonstrated during the morning medical round.*

*When administering medications to the infant, Jane was able to outline safety measures to protect the patient from error and harm. She demonstrated using the 7 rights of medication safety. We discussed error reporting, its importance for system improvement and safety and the critical nature of having a culture of reporting to reduce healthcare acquired harm.*

*Jane demonstrated her ability to access policies and procedures to guide her care activities and showed a basic level of understanding of her legal responsibilities as a registered nurse.*

*Jane showed confident competence when operating pieces of equipment and was aware of the process of reporting malfunctions.*

## Standard 7: Evaluates outcomes to inform practice

**7.1 Novice and Advanced Beginner – First patient to 1 year**

7.1.1 Identifies factors contributing to normal and altered transition in the neonatal period when evaluating outcomes.
7.1.2 Collaborates with team members to discuss and evaluate individualised care delivered and optimal care outcomes.
7.1.3 Reflects on clinical experiences and applies reflective learning to the evaluation and adaptation of goals, priorities, plans and outcomes of the neonate and their family.

**Supporting evidence**

*Jane demonstrated an ability to evaluate her care decisions when considering prospective clinical outcomes. This showed a basic ability to consider her care activities and the impact they may have on clinical outcomes.*

*Through discussion at the bedside, Jane could describe the birth, resuscitation and admission of the infant at a basic level and is starting to identify aspects of this that may have an impact on ongoing development.*

*Throughout the assessment, Jane engaged with team members to consider immediate and potential outcomes of clinical decisions and was able to use this information to adjust plans of care accordingly.*

**Outcome (tick one):**

**Achieved expected standards** ☐

**Working towards expected standards** ☐

Assessor's name:_____ Date:_____

Assessor's signature:_____

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

*Jane is progressing well. Her time management is effective, and she is developing her prioritisation skills. Her engagement with families is competent and compassionate. She has self-identified areas she would like to expand her knowledge on – developmental and neuroprotective aspects of care. Have provided some suggested resources. Jane acknowledged her cultural understanding is basic, and she would like to read some more around this.*