Australian College of Neonatal Nurses Incorporated (INC1300211)

Behavioural Cues for holistic assessment

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Version Control

The ACNN (INC1300211) Clinical Ladder for Neonatal Nurses 2025 will remain current until 2030 (5 years) or earlier when modifications are required.

Initiated by: ACNN National Executive Committee

Behavioural Cues tool - background

Behavioural cues are self-explanatory statements that, through everyday language, clearly describe acts and practices that indicate whether particular domains of professional nursing standards have been met or not met. The use of behavioural cues in assessment is beneficial to provide clarity and transparency for educators and assessors, who need to determine the level of attainment a nurse has reached, and for nurses themselves, who need to make sense of the holistic assessment feedback, as they describe discrete routine actions and behaviours pertinent to neonatal care delivery.

Of significance is that the behavioural cues are applicable to nursing internationally as nursing practices are largely universal. The utility of the cues, therefore, is because cues guide evidence of application of the standards they are not in themselves standard or competency statements.

Use of the behavioural cues for holistic assessment tool

This tool provides suggested actions, gestures, expressions, behaviours and statements that reveal insight into an individual's skills and knowledge. When referred to as part of a holistic assessment, they assist in identifying a neonatal nurse's skill and ability in the clinical context and highlight their ability to adapt to different situations.

Each level of the behavioural cues tool builds on prior completed levels and provides a framework for assessing behaviours and actions in conjunction with the holistic assessments.

The educator or assessor may use the tool as a way to mentally 'mark-off' expected behaviours and actions throughout the assessment period. It is designed as a support tool to be used in conjunction with the holistic assessment.

References

Christine Ossenberg, Amanda Henderson, Megan Dalton. (2015) Determining attainment of nursing standards: The use of behavioural cues to enhance clarity and transparency in student clinical assessment. *Nurse Education Today* Volume 35, No. 1, P. 12-15,

Australian Nursing Standards Assessment Tool www.ansat.com.au

Standard 1: Thinks critically and analyses nursing practice

1.1 Novice-Advanced Beginner

- *Acknowledges importance of family in assessment process, allows time for discussion with family*
- *Discusses reflective skills and analysing own thoughts/behaviours*
- *Seeks out family choices and aspects of cultural diversity*
- *Seeks assistance to resolve situations involving ethical/cultural conflict*

1.2 Competent- 1-2 years

- *Practices using culturally sensitive language*
- *Discusses location of evidence and practice guidelines, links these to care activities*
- *Discusses ethical principles and reasoning in care activities/situations*
- *Identifies aspects of neonatal environment that negatively affect infants*
- *Identifies mitigating strategies to improve environment*

1.3 Proficient – 2-3 years

- *Identifies cultural practices or support mechanisms available for families and can discuss initiating referrals to these.*
- *Discusses own critical reflection practices*
- *Identifies own learning preferences and methods for adjusting education for best results*
- *Frequently refers to guidelines/protocols/medication policies*

1.4 Advanced Practitioner and Expert - 4 + years

- *Discusses identified gaps in neonatal evidence-based literature and impact on practice*
- *Frequently refers to guidelines and evidence in care planning and provides explanations to family/colleagues*
- *Readily provides rationales for nursing care activities/choices*
- *Incorporates skills & expertise of MDT as appropriate*

Standard 2: Engages in therapeutic and professional relationships

2.1 Novice -Advanced Beginner

- *Greets others appropriately*
- *Listens carefully, and is sensitive, to family views*

Provides clear instructions in appropriate language to families

Asks family for information on cultural needs

Communicates with privacy and confidentiality

Demonstrates consistent standard of professionalism

Can discuss importance of scope of practice, and strategies to maintain professional boundaries

2.2 Competent - 1 – 2 years

Demonstrates use of communication skills that optimise family understanding (hearing impaired, non-English speaking)

Demonstrates empathy and adaptability to social cues when interacting with family

Discusses reporting mechanisms of errors or omissions, highlights need for quality & safety

Interacts with MDT courteously & respectfully, displaying good interpersonal skill

Communicates changes to MDT in timely manner

Motivates colleagues to engage in both informal and formal education

Uses opportunities that present to support and teach junior colleagues at the bedside

Participates in mentoring/precepting activities

Demonstrates awareness and acceptance of cultural differences of neonates and their families.

Identifies and explains practices which may not be in alignment with rights/choices of family

2.3 Proficient – 2-3 years

Discusses and offers available resources to families, and describes opportunities for engagement

Actively engages in debriefing opportunities, encourages colleagues to attend

Engages in clinical supervision and can discuss importance of staff well-being and teamwork

Consistently role models emotional intelligence

Assumes leadership role as required

2.4 Advanced Practitioner and Expert - 4 + years

Identifies & makes referrals in timely manner

Demonstrates skill, ability and sensitivity in informing and discussing referrals/plans with family and colleagues

Displays skilled emotional intelligence in all interactions with colleagues and families

Displays sound self-awareness in relationship-building

Identifies and uses strategies for learner engagement such as goal setting, giving feedback and coaching skills

Standard 3: Maintains capability for practice

3.1 Novice – Advanced Beginner - 1st patient to 1 year

Identifies tools/strategies for maintaining evidence of CPD

Reflects on own practice

Demonstrates interest in skill/knowledge development

3.2 Competent - 1 – 2 years

Shows an awareness and understanding of role of neonatal professional bodies, and benefits available

Demonstrates awareness, understanding and evaluation of clinical guidelines and their relationship to evidence and research

Actively seeks feedback from colleagues on practice

Critically reflects on own practice and identifies areas of strength/improvement

Identifies strategies for continual professional development and importance of learning philosophy

Demonstrates awareness of emerging trends in neonatal care

Keeps clear and accurate documentation

Demonstrates appropriate digital and technological skills

3.3 Proficient – 2-3 years

Actively participates in review of local clinical practice guidelines

Actively participates in unit-based preceptor programs

Consistently encourages engagement with knowledge and skill development education

3.4 Expert- Advanced Practitioner – 4 + years

- *Displays extensive knowledge of professional organisations dedicated to neonatal nursing*
- *Engages with relevant peak bodies to contribute to ongoing development of neonatal nursing profession*
- *Identifies, designs, conducts and actively promotes research or QI activities developed to improve neonatal outcomes*
- *Consistently participates in guideline and protocol development, producing high-quality work*
- *Assists in development and provision of educational programs for staff*
- *Acts as a professional leader and role model*

Standard 4: Comprehensively conducts assessments

4.1 Novice – Advanced Beginner – 1st patient to 1 year

- *Conducts top-to-toe assessment*
- *Uses basic knowledge of developmental care in practice*
- *Confers with colleagues to identify available resources for families*

4.2 Competent – 1-2 years

- *Conducts assessment of family to identify referrals required*
- *Ensures referral pathways are followed, closes loop on communication regarding same*
- *Escalates care promptly when deterioration suspected*
- *Initiates developmentally appropriate strategies of care*

4.3 Proficient – 2-3 years

- *Considers, adjusts and advocates for the importance of environment to provide developmentally supportive care*
- *Actively incorporates assessment findings into long term care plan*
- *Assesses family knowledge and skill in caring for their neonate and implements education to develop and support autonomy*

4.4 Expert-Advanced Practitioner – 4 + years

- *Seeks out information to provide families with knowledge pre-NICU admission as able*
- *Uses assessment skills to explore wide range of neonatal and family needs and initiates actions*
- *Seeks out information to enhance discharge plan and assist family in working towards transition to home or ongoing care*

Standard 5: Develops a plan for nursing practice

5.1 Novice – Advanced Beginner - 1st patient to 1 year

- *Interacts with colleagues and family to plan care using priorities and required actions.*
- *Develops a plan of care for the shift taking family needs into account*
- *Refers to senior colleagues for advice when changes to care may be required*
- *Documents plan of care appropriately*

5.2 Competent - 1 – 2 years

- *Actively analyses and questions aspects of care plan to ensure priorities are appropriate*
- *Monitors progression of individual care plan and makes changes when needed*
- *Organises nursing activities according to plan*

5.3 Proficient – 2 - 3 years

- *Supports colleagues in analysing plans of care and making changes to meet priorities*
- *Actively consults family in care planning*
- *Actively encourages family interaction with neonate as appropriate*

- *Advocates openly for neonate and family in MDT discussions regarding plan of care*
- **Expert – Advanced Practitioner – 4 + years**
- *Compares plan of care to knowledge of research and evidence and offers this information in discussions with MDT as required*
- *Participates in QI projects, unit auditing and/or research activities that aim to improve plans of care*

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

6.1 Novice – Advanced Beginner - 1st patient to 1 year

- *Openly exchanges information with MDT regarding family choices/needs*
- *Consults guidelines/protocols as required*
- *Practices in line with infection control, medication safety, manual handling policies*
- *Identifies risks as they arise*
- *Practices in line with ethical and medico-legal requirements*

6.2 Competent - 1 – 2 years

- *Follows care plan and completes tasks prioritised*
- *Communicates clearly with families, limiting medical language & jargon*
- *Educates families regarding neonatal cues and how to respond*
- *Looks for opportunities to promote and provide skin-to-skin care*
- *Educates families regarding developmentally appropriate activities such as reading or singing*

6.3 Proficient – 2 - 3 years

- *Delegates care activities as required to ensure care priorities are met*
- *Actively supports and encourages family to take leadership role in providing care*
- *Provides care responsively, adapts with changes*
- *Demonstrates emotional intelligence, acknowledging emotional impact of NICU on family*
- *Supports and encourages colleagues to take breaks, practice self-care and debrief if needed*

6.4 Expert – Advanced Practitioner – 4 + years

- *Advocates for safe practice, speaks up when practice is at risk due to workload or other issues*
- *Manages resources to ensure safe care provision*
- *Sound communication skills used, including empathy, active listening, body language*
- *Uses advanced knowledge and skill to prioritise the individual neonate and family's needs, demonstrating understanding of interconnectedness of physical, social, emotional and spiritual aspects.*

Standard 7: Evaluates outcomes to inform nursing practice

7.1 Novice and Advanced Beginner – 1st patient to 1 year

- *Shares information with MDT regarding outcomes to set new priorities of care*
- *Documents results of care*
- *Notes when clinical outcomes are expected/unexpected*
- *Uses reflection when evaluating care provision*

7.2 Competent – 1-2 years

- *Considers alterations to neonatal physiology when comparing outcomes to expected pathway*
- *Comprehensively documents outcomes of care activities*
- *Promptly communicates results of tasks & care activities to MDT as required*
- *Discusses relevant QI activities designed to improve outcomes for neonates & families*

7.3 Proficient 2-3 years

- *Critiques care provision and progress towards expected outcomes*
- *Considers family's progress towards autonomous caregiving and identifies tasks/ activities/ education to further support them in their role*
- *Provides nursing care that ensures a positive end of life experience for families*

7.4 Advanced Practitioner and Expert – 4 years or more

- *Communicates expertly on results and outcomes, using emotional intelligence and non-verbal skills*
- *Discusses clinical reporting, audit data and adverse incidents in monitoring outcomes*
- *Actively supports and mentors multidisciplinary team members in evaluation of care, including debriefing as needed*