



Australian College of Neonatal Nurses  
Incorporated (INC1300211)

# Holistic Assessment Tool

## Proficient Level (2025)

## **Australian College of Neonatal Nurses Incorporated (INC1300211) \*Holistic Assessment Tool for Proficient 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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## Proficient level in neonatal nursing

As the competent nurse continues to develop and progress, the proficient stage is entered where the nurse can see a situation in its entirety and use that information to provide direction in care. The proficient nurse has a holistic understanding that allows for improved decision-making processes.

### Use of the holistic assessment tool – Proficient 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.

## Proficient level Holistic Assessment (example)

Neonatal nurse's name: \_\_\_\_\_

Date: \_\_\_\_\_

## General Allocated Patient Information (example)

## Standard 1: Thinks critically and analyses nursing practice

**1.3 Proficient – 2 to 3 years**

1.3.1 Applies best available evidence to decision-making throughout nursing care provision.

1.3.2 Utilises critical reflection on experience, knowledge, actions and beliefs to shape and improve practice.

**Supporting evidence (example)**

## Standard 2: Engages in therapeutic and professional relationships

**2.3 Proficient – 2 to 3 years**

2.3.1 Appraises the need for family support and identifies resources within the neonatal unit or via consumer groups that can be offered.

2.3.2. Initiates referrals for, liaises, and communicates effectively with other departments and colleagues that

contribute to comprehensive care of the neonate and their family.

2.3.3 Effectively and ably mentors colleagues, undergraduate and new graduate students to mutually develop and nurture leadership skills, professional growth and trusting relationships.

2.3.4 Role models expected nursing and professional behaviours and practices in developing trusting relationships with families and colleagues.

2.3.5 Appraises, reflects and monitors own emotional response to interaction and uses this to nurture therapeutic relationships with the family.

### Supporting evidence

## Standard 3: Maintains capability for practice

### 3.3 Proficient – 2 to 3 years

3.3.1 Engages with professional bodies via membership and actively promotes formal and informal educational opportunities to nursing colleagues.

3.3.2 Contributes to the appraisal and critique of governing documents that are relevant to neonatal care, including evidence-based clinical guidelines, policies and procedures.

3.3.3 Serves as a preceptor/mentor in supporting novice and advanced beginner level colleagues to develop further knowledge and skill acquisition.

3.3.4 Monitors own emotional response and uses self-care strategies to maintain safe practice.

**Supporting evidence****Standard 4: Comprehensively conducts assessments****4.3 Proficient – 3 to 4 years**

4.3.1 Assesses and maintains an age-appropriate and neurodevelopmentally supportive environment

4.3.2 Appraises families for readiness for transition to home/ongoing care to inform discharge planning choices.

**Supporting evidence**

## Standard 5: Develops a plan for nursing practice

### 5.3 Proficient – 3 to 4 years

5.3.1 Supervises and mentors colleagues to critically appraise and make adaptations to plan of care to facilitate priorities being met.

5.3.2 Appraises plan of care with the family to actively facilitate the family transition to the role of primary caregiver.

5.3.3 Actively engages with the multidisciplinary team to advocate for the neonate and their family throughout care delivery.

### Supporting evidence

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

### 6.3 Proficient – 3 to 4 years

6.3.1 Communicates effectively with families and colleagues to ensure safe, appropriate and responsive caregiving. Depending on scope of practice and/or neonates' condition, this may include either delegation or escalation of care.

6.3.2 Facilitates transition of care and related activities to parent, acknowledging their role as primary caregiver and encouraging autonomous care for their infant.

6.3.3 Incorporates changes in clinical condition, family choices or decisions from visiting teams into nursing care, demonstrating professional flexibility and responsiveness.

6.3.4 Acknowledges and can describe emotional and traumatic impact on families whose infant is receiving neonatal care and can identify signs and symptoms associated. Identifies available support services, both in-hospital and outpatient, and arranges connection to these for families.

6.3.5 Considers ethical implications of all clinical care activities and how these affect the wellbeing of infants, families and clinical staff.



**Supporting evidence****Standard 7: Evaluates outcomes to inform practice****7.3 Proficient – 2 to 3 years**

7.3.1 Appraises and critiques neonatal outcomes using clinical assessment and care pathways.

7.3.2 Evaluates the family's transition to primary caregivers and adapts plans of care to further support them in their role.

7.3.3 Appraises and adapts plans of care to support the family and promote the parental role throughout the redirection of care, promoting a positive end of life experience that meets the family's cultural, spiritual and parental identity needs.

**Supporting evidence**

**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: