College of Nursing of New Brunswick | Ordre de la pratique infirmière du Nouveau-Brunswick

Assessment of Nursing Practice Application

Please complete this form electronically and return to reg-imm@cnnb-opinb.ca

General Information:

Name:

CNNB Registration Number:

Job Title:

Business/employer name:

Nursing Practice Description:

1. **Describe the nursing practice you would like to have assessed. .**
   (What services or care do you provide or will be providing?)

2. **Which nursing practice role best describes your practice?**
   (Refer to Appendix A for definitions of practice domains)

   a) ☐ **Practitioner** ☐ **Educator** ☐ **Administrator** ☐ **Researcher** ☐ **Consultant**

   b) **Describe your role noted above within your practice.**

3. **Describe the client population in your practice.**
   (Age groups, health needs, setting- e.g., community, virtual, acute care)

4. **Explain how best-practice and evidence-informed practice are used in your practice.**
   (List any guidelines, protocols, or evidence used as per Standards of practice 2.6.- uses credible research findings and applies evidence-informed practices)

5. **Please identify the Entry-Level Competencies (ELCs) that are applied in your practice and how your nursing practice aligns with the CNNBELCs. If your practice requires beyond entry-level competencies, please provide evidence of additional education and acquired competencies.**
   (Describe your education, certifications, training, or work experience)

☐ **I have attached relevant Beyond Entry-Level Competency (BELCs) Proof**
(BELCs- Require relevant proof of extra education/training- e.g., foot care, Botox, advanced wound care as per- Standard of Practice 2.4-recognizes and practices within own level of competence and seeks additional knowledge and assistance when needed)

6. **Explain how you apply the nursing process in your practice**.
   *(Describe how you **assess**, **plan**, **implement**, and **evaluate** care as per Standard 2.1 uses critical inquiry to assess, plan, intervene, and evaluate client care and related services. Include any tools you use)*

7. **Provide include a copy of the job description provided by your employer.**
   (Required by all applicants)

   ☐ **I have attached my Job Description.**

NPs ONLY

8. **Explain how your NP practice includes the following:**

   a) Diagnosing or assessing a disease, disorder, or condition;

   b) Communicating the diagnosis or assessment to the client and/or other healthcare professionals as appropriate;

   c) Performing procedures for clinical management and prevention of disease, injuries, disorders, or conditions;

d) Prescribing, authorizing, ordering, administering, and dispensing drugs and medications;

e) Ordering, receiving and interpreting screening and diagnostic tests, including applications of forms of energy.
(E.g., X-Ray, Ultrasound)

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Appendix A

CNNB Rules

2.01 Active Practice of Nursing

Pursuant to By-law 1.03D, active practice of nursing means practices in any of the following roles:

(a) Practitioner:
A nurse who is engaged primarily in the direct care of patients in any of the following settings: institutional, community, physician office, self-employed.

(b) Educator:
A nurse who is engaged primarily in the teaching of those who are or will be involved in giving care to patients such as in: health care agencies, faculty of nursing, school of nursing, Community College.

(c) Administrator:
(i) a nurse who is engaged primarily in the management of nursing services or nursing education; and
(ii) a nurse with administrative responsibilities in a hospital or agency which promotes quality care or provides patient care.

(d) Researcher:
A nurse who is engaged primarily in research activities related to nursing.

(e) Nursing Consultant:
A nurse who is engaged primarily in an advisory capacity regarding nursing or some specific area of health care.