



# **Hong Kong College of Surgical Nursing**

## **Post Membership Program for Ordinary Member**

**Name of Trainee:** \_\_\_\_\_

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# 1. PARTICULARS OF MENTOR AND TRAINEE TRAINING PERIOD

Name of Trainee: \_\_\_\_\_

Rank: \_\_\_\_\_ HKCSN Ordinary Membership No.: \_\_\_\_\_

No.	Training Site	Period of Supervision	
1	Clinical Department: General / Specialty: _____ Ward: _____ Hospital: _____	From:	To:
	Name of Mentor: _____		
	Fellowship No.: _____		
	2		
Name of Mentor: _____			
Fellowship No.: _____			
3		Clinical Department: General / Specialty: _____ Ward: _____ Hospital: _____	From:
	Name of Mentor: _____		
	Fellowship No.: _____		
	4	Clinical Department: General / Specialty: _____ Ward: _____ Hospital: _____	
Name of Mentor: _____			
Fellowship No.: _____			
5		Clinical Department: General / Specialty: _____ Ward: _____ Hospital: _____	From:
	Name of Mentor: _____		
	Fellowship No.: _____		

## 2. INTRODUCTION

### **Training for Ordinary Member**

Trainee is expected to sit for Fellowship exit examination within 3 years after being an Ordinary Member. During this period, trainee is encouraged to attend conferences and specialized courses locally or internationally to update his / her knowledge and skill on the trends of development in the specialty. The learning in clinical practice will increase relative to didactic teaching and to wider multidisciplinary team approach. The clinical practice will be mainly in work placement with Mentor guiding and supervising trainee to further consolidate experience and competencies gained as an Ordinary Member in the first year; to widen spectrum of practice through taking part in hospital-wide / specialty projects in the second year; and to be recognized as a role model or consultant of the specialty field in the final year (Skills for Health, 2010). Trainee should discuss and agree with the Mentor how he / she can best achieve his or her learning objectives within the set time frame. This learning agreement forms the basis of a learning partnership between the mentor and the trainee.

#### Responsibilities of Trainee:

- Trainee is expected to take a proactive approach in learning and development
- Make full use of learning opportunities during training
- Identify areas for observation and feedback
- Initiate regular meetings with mentor once every 6 months
- Maintain up to date learning portfolio
- Regular reflective practice

During the three year's period, the trainee is expected to

1. Submit two comprehensive case study (Appendix 4.1 )
2. Conduct one learning agreement project (Appendix 4.2)
3. Meet with mentor once every 6 months using the Assessment Form (Appendix 4.3)
4. Achieve a total of 100 score for the recognized significant contributions (Appendix 4.4)

### **Mentor(s)**

Mentor(s) must be Fellow(s) of the Hong Kong College of Surgical Nursing and is/are in current practice in Surgical Nursing. Trainee must be assigned to a designated mentor at the training site. One mentor should supervise no more than 2 trainees at one time.

Responsibilities of Mentor:

- Provide learning opportunities to the trainee in practicing advanced surgical care to an independent and leadership role;
- Facilitate the trainee to be innovative and change practice when providing care to patients and families with complex and unpredictable surgical conditions;
- Facilitate and guide the trainee to research and analyse evidences in improving and developing the advanced practice skills in patient care;
- Provide on-going feedback on the trainee's clinical performance and advice on areas for improvement;
- Facilitate the trainee to take up responsibility and exercise professional autonomy in service delivery;
- Facilitate and guide the trainee to prepare for Fellow Exit Assessment.

### 3. References

Skills for Health (2010). Key Elements of the Career Framework. United Kingdom.  
[cited on 2017 June 08]. Available from:

[http://www.skillsforhealth.org.uk/index.php?option=com\\_mtree&task=att\\_download&link\\_id=163&cf\\_id=24](http://www.skillsforhealth.org.uk/index.php?option=com_mtree&task=att_download&link_id=163&cf_id=24)

**COMPREHENSIVE CASE STUDY**

- i. The case study should reflect advanced surgical specialty nursing practice related to the key domains of competency framework\* of an Advanced Practice Surgical Nurse
- ii. The case study should be type-written on A4-size paper with Times New Roman 12 font size and 1.5 line spacing within the word limit of 2000 – 3000 words
- iii. There should be a cover page with the candidate's name, Ordinary membership number, report title, date of submission, total number of words and a self-declaration of original work

**Suggested Format**

- Patient data with present chief complaint, health and social history
- Physical health assessment with findings
- Laboratory examination and investigations
- What is / are the differential diagnosis of this patient?
- What investigations / laboratory examination you would like to order for diagnostic evaluation with rationale?
- What is the most likely diagnosis of this patient?
- Discuss the advanced nursing practice you give throughout the patient's hospital stay
- Reflect on your nursing practice and its outcomes
- What are the implications to the impact of the surgical advanced nursing practice in the local and / or international context

## **\*Key Domains of Competency Framework for Advanced Practice Nurse**

Domain 1 Managing clients with complex health conditions

Domain 2 Enhancing therapeutic nurse-client relationship

Domain 3 Demonstrating effective leadership and team work

Domain 4 Enhancing quality assurance and improvement

Domain 5 Managing and negotiating innovative and effective approaches to care delivery

Domain 6 Enhancing professional attributes of general and advanced practice

Domain 7 Enhancing personal attribute



**PROJECT LEARNING AGREEMENT**

Hospital / Department \_\_\_\_\_

Period \_\_\_\_\_

Year of Ordinary Member 1<sup>st</sup> / 2<sup>nd</sup> / 3<sup>rd</sup> \_\_\_\_\_

Assigned Mentor \_\_\_\_\_

**Initial Period**

**Part 1. Topic of Interest**

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**Part 2. Proposed Learning Opportunities to Meet Learning Objective(s)**

Workplace Learning:

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Formal Learning:

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Self-directed Learning:

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**Part 3. Proposed Assessment Method to Meet Learning Objective(s): “Project based assessment” or “written test or examination” or “Audit”**

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**Part 4. Comments**

Trainee:

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Mentor:

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**Trainee's Name and Signature**

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**Date (dd/mm/yy)**

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**Mentor's Name and Signature**

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**Date (dd/mm/yy)**

**Interim Review**

**Part 1. Review and Update on Topic of Interest**

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**Part 2. Progress on Learning Opportunities to Meet Learning Objective(s)**

Workplace Learning:

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Formal Learning:

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Self-directed Learning:

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**Part 3. Progress on Assessment Method to Meet Learning Objective(s): “Project based assessment” or “written test or examination” or “Audit”**

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**Part 4. Comments**

Trainee:

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Mentor:

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**Trainee’s Name and Signature**

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**Date (dd/mm/yy)**

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**Mentor’s Name and Signature**

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**Date (dd/mm/yy)**

**Final Review**

**Part 1. Achieve Objective(s) on Topic of Interest**

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**Part 2. Complete Learning Opportunities**

Workplace Learning:

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Formal Learning:

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Self-directed Learning:

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**Part 3. Completion Assessment**

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**Part 4. Trainee Reflection on Overall Learning Opportunities and Results (if no, write reason)**

1. Mentor discussed and provided feedbacks on my progress  Yes  No

Reason:

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2. Mentor provided me with information on learning opportunities for this project  Yes  No

Reason:

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3. There are no unresolved issue or adverse effect  Yes  No

Reason:

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4. Self- perceived Overall Performance

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5. Self-perceived Strengths

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6. Self-perceived Areas for Improvement

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**Part 5. Comments from Mentor**

1. Trainee's reflective practice was satisfactory  Yes  No

Reason:

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2. Trainee followed an agreed timeframe to complete the project  Yes  No

Reason:

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3. There are no unresolved issue or adverse effect  Yes  No

Reason:

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4. Overall Performance

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5. Strengths

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6. Areas for Improvement

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**Trainee's Name and Signature**

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**Date (dd/mm/yy)**

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**Mentor's Name and Signature**

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**Date (dd/mm/yy)**

# HONG KONG COLLEGE OF SURGICAL NURSING

## ASSESSMENT FORM FOR ORDINARY MEMBER

Name of Trainee : \_\_\_\_\_ Training Period From : \_\_\_\_\_ To : \_\_\_\_\_

Hospital : \_\_\_\_\_ Specialty in Training : \_\_\_\_\_

No. of Days absent \_\_\_\_\_ Reason for absence (e.g. holiday / study leave / others) \_\_\_\_\_

**Guidelines for Mentors:** It is expected that the majority of trainees will fall into in the “satisfactory” category for most competencies. Mentors are asked to write in the right hand column that best reflects the trainee’s performance during the training period for each specified competency. Please note that explanatory comments would be required to submit and attach to this assessment form for less than satisfactory performance or excellent rating.

**UNSATISFACTORY = 1**

**SATISFACTORY = 2**

**ABOVE AVERAGE = 3**

**EXCELLENT =4**

UNSATISFACTORY = 1	SATISFACTORY = 2	ABOVE AVERAGE = 3	EXCELLENT =4	RATING
<b>CLINICAL EXPERTISE – access and apply relevant knowledge to clinical practice</b>				
Poor knowledge base Significant deficiencies or poor perspective Needs direction to study Allows deficiencies to persist	Maintains currency of knowledge Applies scientific knowledge to patient care Reads appropriately, asks for information and follows-up Recognizes and solves real-life problems	Generally performs above the expected standard	Outstanding knowledge Knows common areas in depth Aware of the unusual Excellent application of knowledge in clinical situation	
<b>TECHNICAL EXPERTISE – safely and effectively perform appropriate surgical procedures</b>				
Fails to acquire appropriate skills despite repeated instruction/ practice. Too hasty or too slow. Rough, Hesitant, Lacks attention to detail	Consistently demonstrates acquisition, practice and retention of sound procedural knowledge, surgical skills and techniques for level of training	Generally performs above the expected standard	Excellent and advanced abilities in procedures and techniques Excellent pre-operative preparation, and post-operative care	
Poor manipulative skills Poor hand/eye coordination Fails to learn from experience	Demonstrates manual dexterity required to carry out procedures Good hand/eye coordination		Outstanding technician Fluent and always in control Meticulous	
Unable to adapt skills and techniques	Adapts their skills in the context of each patient—each procedure		Extremely good at adapting skills for varying operative situations Excellent clinical judgement	
Lacks enthusiasm and/or initiative to participate and/or learn	Maintain skills and learn new skills		Seeks opportunities to learn new skills	
Lacks care and diligence in approach 'Near enough is good enough'	Approaches and carries out procedures with due attention to safety of patient, self, and others		Outstanding clinician Constantly aware and responds to patient, self and team members	
As procedure assistant fails to follow operation	Follows the operation with guidance from the operator		Anticipates the needs of the operator & responds accordingly	
Ignores/fails to follow up on problematic performance Little or no recognition of deficiencies in skills/techniques	Analyses their own clinical performance for continuous improvement		Accurate in self-appraisal, excellent insight Seeks and accepts criticism & responds appropriately	

UNSATISFACTORY = 1	SATISFACTORY = 2	ABOVE AVERAGE = 3	EXCELLENT =4	RATING
<b>JUDGEMENT – clinical decision making/organize diagnostic testing, imaging and consultation as needed</b>				
Incomplete or inaccurate Poor basic skills	Takes a history, performs an examination, and arrives at a well-reasoned diagnosis Efficiently and effectively examines the patient	Generally performs above the expected standard	Precise, thorough and perceptive	
Incomplete/inaccurate recognition of significant symptoms Significant errors/omissions/ not concise on history, signs or diagnosis Poor discussion of clinical cases	Recognizes the symptoms of, accurately diagnose, and manages common disorders Differentiates those conditions amenable to operative and non-operative treatment Competent, concise and correct on clinical details Arrives at appropriate conclusions in case presentations		Accurate and efficient Considers a wide range of symptoms and factors Insightful perspective in case discussions	
Inadequate or Inappropriate, poor selection and/or interpretation Unable to appropriately justify use of investigations Disregards patient's needs or circumstances	Selects appropriate investigative tools and monitoring techniques in a cost-effective manner Appraises and interprets results of investigations against patient's needs in the planning of treatment Critically evaluates the advantages and disadvantages of different investigative modalities		Always selects optimal investigations Excellent interpretation Safe, efficient and cost effective approach to use of investigations	
Unable to make a decision Unable to suggest alternative interpretations Presentation unclear, disorganized	Formulates a differential diagnosis based on investigative findings Evaluates the significance of data Indicates alternatives in the process of interpreting investigations and in decision making Clear & concise presentation of findings		Precise, well organized, thorough, systematic, focused - Presentation of findings - Indicates relevant alternatives - Decisions based on data	
Poor record keeping – incomplete, disorganized, irrelevant, illegible – not up-to date	Contemporaneously maintains accurate and complete clinical records Precise and focused Complies with required organizational structure		Perceptive of relevant information / data for documentation Records very easily accessible	
Disinterested or indifferent approach to patient problems Fails to grasp significance or respond accordingly Under or overreacts	Manages patients in ways that demonstrate sensitivity to their physical, social, cultural, and psychological needs Considers all issues relevant to the patient		Excellent and highly developed ability to manage & interact with patients and to anticipate and/or respond to their needs	
Copes poorly in situations of stress and/or complexity	Effectively manages the care of patients with trauma including multiple system trauma Generally maintains controlled approach & demonstrates sound judgement during times of stress/complexity – seeks assistance accordingly		Anticipates possible risks and/or complications In stressful situations always maintains orderly approach and demonstrates sound judgment	
Inadequate planning Inadequate involvement in pre & post-operative care Fails to grasp significance of symptoms or respond accordingly Under or overreacts to emergencies	Plans, and where necessary implements a risk management plan. Conscientious and reliable follow-up Effectively manages complications of operative procedures and the underlying disease process Identifies and manages risk Manages complexity and uncertainty		Outstanding clinician who - anticipates possible risks/complications - identifies problems early - follows-up meticulously - coordinates and uses other personnel effectively - aware of own limitations	

UNSATISFACTORY = 1	SATISFACTORY = 2	ABOVE AVERAGE = 3	EXCELLENT =4	RATING
<b>COMMUNICATION – communicate effectively</b>				
Disliked by patients because of poor interpersonal skills Bad listener Poor communicator Increases patient anxieties Patients remain confused or unclear and/or unable to follow instructions	Trusted by patients. Listens well Communicates information to patients (and their family) about procedures, potentialities, and risks associated with surgery in ways that encourage their participation in informed decision making Communicates with the patient (and their family) the treatment options, potentials, complications, and risks associated with all treatment modalities Recognizes what constitutes 'bad news' for patients and relatives & communicates accordingly, demonstrates empathy at appropriate times	Generally performs above the expected standard	Possesses excellent interpersonal skills Develops excellent rapport with patients & team members Inspires confidence Patients delighted to be looked after by this trainee	
Ignores or fails to recognize misunderstandings Causes disruption/problems	Initiates the resolution of misunderstandings or disputes with peers, colleagues, and others		Effectively diffuses any problems in the surgical team	
Unaware of patient's needs Unable to communicate under varying conditions/situations	Appropriately adjusts the way they communicate with patients & relatives to accommodate cultural and linguistic differences and emotional status		Always interacts effectively with patients according to their social & health needs	
<b>COLLABORATION - work in collaboration with members of an interdisciplinary team where appropriate</b>				
Refuses to facilitate function of team Poor relationship with peers and other professionals Does not adequately acknowledge the contributions of others May undermine team members or function	Good rapport with nursing and other medical staff. Willing to help Employs a consultative approach with colleagues and other professionals Communicates effectively with and co-ordinate surgical teams to achieve an optimal surgical environment	Generally performs above the expected standard	Always willing to help even if personally inconvenient Excellent working relationship with other professionals Always supports colleagues and junior staff	
Reluctant/unable to work as a team member Self-focused Unreliable Fails to seek timely assistance with issues of patient care Ignores or is unaware of their own limitations	Respectful of & appreciates the different kinds of knowledge and expertise which contribute to the effective functioning of a clinical team Develops a patient care plan in collaboration with members of an interdisciplinary team Collaborates with other professionals in the selection and use of various treatment modalities assessing the effectiveness of each management option Recognizes and facilitates the need to refer patients to other professionals		Excellent team member Extremely knowledgeable about the contribution of different fields of care Aware of and seeks the contribution of different fields and refers patients in a timely and appropriate manner	
<b>MANAGEMENT and LEADERSHIP – effectively use resources to balance patient care and system demands</b>				
Unaware of management constraints and/or expectations Reluctant to take on any management responsibility Wasteful of resources Poor interaction with and/or supervision and management of junior staff	Identifies and differentiates between resources of the health care delivery system and individual patient needs. Effectively assesses and manages systemic risk factors Applies a wide range of information to prioritize needs and demands Directs and supervises junior staff effectively	Generally performs above the expected standard	Willing to contribute to health services management Uses resources very effectively for patient care balanced with patient need Excellent role model for junior medical staff, all ways offers support for junior staff	



UNSATISFACTORY = 1	SATISFACTORY = 2	ABOVE AVERAGE = 3	EXCELLENT =4	RATING
<b>HEALTH ADVOCACY</b>				
Ignores/jeopardizes own or colleagues health or well-being	Promotes health maintenance of colleagues Looks after own health	Generally performs above the expected standard	Maintains high level of fitness and encourages others	
Takes little interest in patient health beyond surgery	Advocates patient health		Very knowledgeable and active in advocating patient health including preventative measures	
<b>SCHOLAR and TEACHER – recognize the value of knowledge and research and its application to clinical practice</b>				
Little evidence of reading texts or journals Needs direction to study	Assumes responsibility for own on-going learning Draws on different kinds of knowledge in order to weigh up patient's problems in terms of context, issues, needs, and consequences Critically appraises new trends in Surgical Nursing	Generally performs above the expected standard	Always keen to discover new knowledge Takes extra courses & learning opportunities	
Avoids teaching if possible. Poorly prepared, poorly delivered	Facilitates the learning of others Competent and well prepared in teaching others		Enthusiastic teacher Logical and clear Can inspire Excellent teaching skills	
<b>PROFESSIONALISM – appreciate the ethical issues associated with Nursing</b>				
Behaviour inconsistent with ethical ideals Little interest/comprehension of medico-legal issues	Consistently applies ethical principles Identifies ethical expectations that impinge on the most common medico-legal issues	Generally performs above the expected standard	Highly conscientious Anticipates possible areas where medico-legal issues may arise	
Late, idle, unreliable, forgetful Off-loads work onto others Difficult to contact	Acts responsibly Dependable, conscientious Efficient use of his/her time		Applies self beyond the 'call of duty' Always completes tasks	
Copes poorly under stress 'Disappears' when problems arise Unwilling or fails to take on responsibility	Regularly participates in clinical audit Willing to undergo close scrutiny Responds appropriately to stress		Anticipates and remains efficient "when the going gets tough" Seems to thrive on pressure	
Has problems acknowledging/ recognizing mistakes Unable to accept criticism	Acknowledges and learns from mistakes Is accountable for their own decisions and actions Recognizes & acknowledges their own limitations		Prompt response to criticism marked improvement and positive change	
Has inaccurate view of own performance Pays little regard to clinical audit	Employs a critically reflective approach		Has great insight into their level of performance	
<b>RESEARCH ACTIVITIES DURING CURRENT TERM: (circle appropriate statement for each research area)</b>				
<b>Continuing research</b>	No current project	Research project in progress	Active researcher, demonstrated flair for research, original ideas	
<b>Publications</b>	No current project	Project in process of being prepared for submission for publication	Article(s) accepted for publication and/or published	

**REPORT ON CNE PROGRAMME**

CNE CYCLE (FROM \_\_\_\_\_ TO \_\_\_\_\_ )

- Number of CNE points accumulated during this assessment period : \_\_\_\_\_ points
  
- Number of CNE points accumulated in 1<sup>st</sup> Year \_\_\_\_\_ points  
2<sup>nd</sup> Year \_\_\_\_\_ points  
3<sup>rd</sup> Year \_\_\_\_\_ points

COMPLIANCE OF CNE REQUIREMENTS: YES / NO

**SUMMARY REPORT ON TRAINING PROGRAMME**

Assessment Period 1<sup>st</sup> / 2<sup>nd</sup> / 3<sup>rd</sup> / 4<sup>th</sup> / 5<sup>th</sup> / 6<sup>th</sup> / \_\_\_\_\_ (6 monthly) (circle or write appropriate number)

Submitted 1<sup>st</sup> comprehensive case study YES / NO Remarks: \_\_\_\_\_

Submitted 2<sup>nd</sup> comprehensive case study YES / NO Remarks: \_\_\_\_\_

Conducted learning agreement project YES / NO Remarks: \_\_\_\_\_

Achieved a total of \_\_\_\_ / 100 score for the recognized significant contributions

**ADDITIONAL/EXPLANATORY COMMENTS** (If insufficient space attach separate document)

**Any identified area(s) of less than satisfactory performance** YES / NO

*If Yes it must correlate with ratings given above*

Have each of these areas been discussed with the trainee? YES / NO

Have these areas been corrected during the term? YES / NO

**Details of area(s) of less than satisfactory performance must be fully documented and attached to this assessment form**

**OVERALL RATING** (circle appropriate box)

Unsatisfactory	Satisfactory	Above Average	Excellent
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**Recommendations regarding future training** (Circle appropriate number(s))

1. Trainee should continue in a Training Position
2. Due to less than satisfactory performance Trainee is likely to require additional time and/or training
3. Due to continuing less than satisfactory performance that has not been rectified, the Trainee should not continue in the training programme

MENTOR \_\_\_\_\_ (print name) \_\_\_\_\_ (signature)

I AGREE WITH THIS ASSESSMENT                      YES / NO

TRAINEE \_\_\_\_\_ (print name) \_\_\_\_\_ (signature)

*Important Note: Trainees should ensure that this Trainee Assessment Form, together with completed case study / project are distributed as follows:*

1. *Original assessment and completed case study / project should be submitted to the Secretariat of the Hong Kong College of Surgical Nursing at LG1, School of Nursing, Princess Margaret Hospital, 232 Lai King Hill Road, Lai Chi Kok, Kowloon, Hong Kong. The College Secretariat would be responsible for keeping the original documentation for trainees.*
2. *Copies of the above should be made and retained by the trainee for their portfolio records*
3. *Copies of the above should be made and retained by the assessing mentor*
4. *A score less than Satisfactory (2) in any category will be discussed by the Specialty Board & Education Committee of the Hong Kong College of Surgical Nursing*

*The trainee should ensure that separate assessment forms are filled in by each Mentor. The College must receive completed assessment forms, case studies and project no later than one month prior to application for fellowship exit examination.*

## Record of Recognized Significant Contribution Scoring System

(within past 9 years)

Recognized Significant Contribution (provide proof on submission)	Score	Remarks	Date Achieved
<b>Professional Development</b>			
Publishable Nursing Research – Principle Investigator	100		
Publishable Nursing Research – Member (active role)	50	Certified by Principle Investigator	
Publishable Nursing Meta-analysis Paper – Principle Investigator	100		
Publishable Nursing Meta-analysis Paper – Member (active role)	50	Certified by Principle Investigator	
Project - Leader	50		
Project – Member (active role)	30	Certified by the Project Leader	
Local Conference – Organizing / Scientific Committee Member	40	Other Committee Member not recognized	
Local Conference – Abstract Reviewer	40		
Local Conference – Invited Speaker	40		
Local Conference – Oral Presenter	30		
Local Conference – Poster Presenter	20		
International Conference – Organizer / Scientific Committee Member	60	Other Committee Member not recognized	
International Conference – Abstract Reviewer	60		
International Conference – Invited Speaker	60		
International Conference – Oral Presenter	40		
International Conference – Poster Presenter	30		
<b>Community Service</b>			
Academic Institution – Invited Speaker / Mentor	20	Per institution	
Professional Organization – Council / Committee Member	20	Per organization	
Community Organization - Advisor	10	Per organization	

The list above is not exhaustive, any proposed significant contribution will be subject to the endorsement by the Hong Kong College of Surgical Nursing from time to time.