# DEVELOPMENT OF A COMPETENCY-BASED COMMON CLINICAL ASSESSMENT TOOL FOR NURSE ANESTHESIA EDUCATION

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### Conflict of Interest Statement

I have no financial relationships with any commercial interest related to the content of this presentation.



### Introduction to CCAT

- Common clinical assessment tool
- Tracking the progression of SRNAs
- Assessment of theory verses clinical performance





### **Mandates for Evaluation**









Interprofessional Education Collaborative

Connecting health professions for better care



## **Significance**

Potential benefit to all:

- Individual
- Institution
- Society

### **Individual**

- Student
- Program Faculty
- Clinical Preceptor

### **Institution**

- Nurse Anesthesia Program
- University
- Council on Accreditation

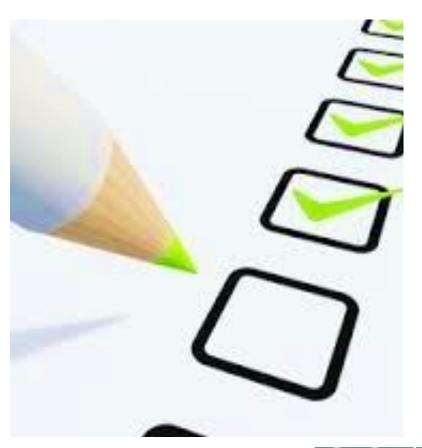
### **Society**

- **Patients**
- Health Care System



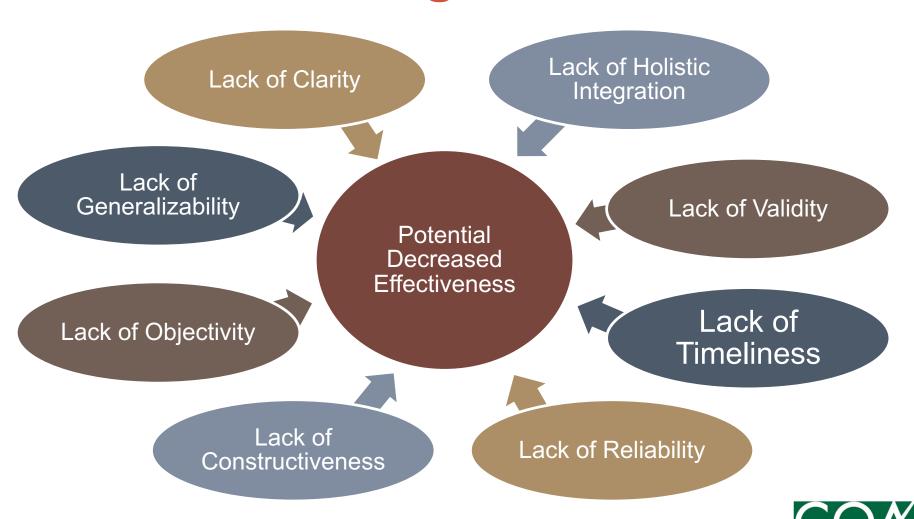
### **Goals of Evaluation**

- Define clinical outcomes
- Validate behaviors
- Provide feedback
- Early identification
- Improve quality and safety





## **Current Challenges**



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## **Current Challenges**

- Objectivity
- Reliability
- Timeliness
- Validity
- Holistic Integration
- Clarity



## **Objectivity**

- Current tools
  - Not standardized
  - Lack explicit criteria
- Subjectivity
  - Personal value
  - Bias
  - Socialization
  - Reluctance
- Need standardization





## Reliability

- Interrater reliability
  - Focus on different aspects
  - Different levels of expectations
  - Clinical experience
- Current tools lack consistency
- Needs:
  - Rater independent
  - Context independent





### **Timeliness**

- Time lag:
  - between observation and rating of performance
  - between rating and feedback to the student
- Current tools:
  - too complex
  - too lengthy
  - too time consuming
- Need a tool that reduces both





## **Validity**

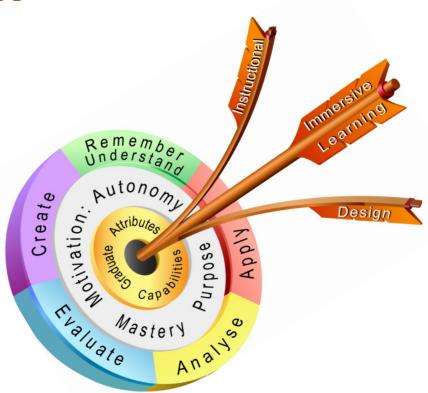
- Measures what is intended
- Problematic:
  - Defining competence
  - Determining behaviors
  - Measuring these behaviors
- Needs:
  - Alignment of purpose and outcomes
  - Observation of actual performance





## **Holistic Integration**

- Current tools devalue integration
- Students focus on completion of task
- Need a tool that fosters critical thinking





## **Clarity**

- Current tools:
  - Broad
  - Lack Focus
  - Academic Jargon
- Lack conceptual clarity
- Needs:
  - Clear outcomes
  - Explicit behaviors
  - Simple scale





### COA's Response

Following the January 2015 COA meeting, the COA finalized the appointment of the Common Clinical Assessment Tool Special Interest Group (CCATSIG).

### Special Interest Group Initial Charge

- Investigate the feasibility of developing a Common Clinical Assessment Tool (CCAT) for use by nurse anesthesia educational programs
  - Provide reliability lacking in the myriad of evaluation forms used by programs
  - Assure alignment of evaluation of student clinical performance with COA and nursing Standards
- Develop a timeline that includes key activities and a cost estimate to develop and implement a CCAT
- Identify characteristics and key content areas to be included in the tool



# COA Common Clinical Assessment Tool Special Interest Group (CCATSIG)

Juan Gonzalez, PhD, CRNA, Champion, COA Educator Member
Laura Bonanno, DNP, PhD (c), CRNA, COA Educator Member
Amanda Brown, DNAP, CRNA, APRN, External Member-Practitioner
Brett Clay, DNAP, CRNA, External Member-Practitioner
Kathy Cook, DNP, CRNA, External Member-Program Administrator
Sass Elisha, EdD, CRNA, COA Educator Member
Demetrius Porche, DNS, PhD, FACHE, FAANP. FAAN, External Member-Dean
Deana Starr, DNP, CRNA, COA Student Member
Frank Gerbasi, PhD, CRNA, COA Chief Executive Officer
Molyka Leonard, MPA, Accreditation Specialist
Susan Monsen, MATD, Accreditation Specialist



## 2015 Survey to Nurse Anesthesia Programs-Current State of Programs' Clinical Evaluation of Students

- Strengths of current clinical evaluation tools
- Weaknesses of current clinical evaluation tools
- Challenges encountered with obtaining valid and reliable clinical evaluations from preceptors
- Versions of clinical evaluation tools used each semester
- Versions for student cohort levels or specialty rotations
- Technology platforms used to support clinical evaluation tools/processes
- Interest in a Common Clinical Assessment Tool



## What the Survey Results Told Us

- A single evaluation tool that has core competencies based on COA Standards and allows a program to insert other questions based on their individual program requirements is desirable.
- The tool should be concise, be available electronically and via paper and have a section where preceptors can include comments.
- Use of the tool would be optional as some programs state their clinical evaluation process is adequate for their needs.
- The cost of using the tool should not be prohibitive to programs.

## Other Sources of Information to Inform Development of the Tool

- AANA Focus Sessions, 2015-2017
- AANA Member Profile Questions, 2016
- NBCRNA National Certification Examination (NCE) Content Outline, 2016
- Graduate QSEN Competencies
- IPEC Core Competencies, 2016
- Toward a Common Taxonomy of Competency Domains for the Health Professions and Competencies for Physicians, Englander, 2013



# Crosswalks to Ensure Consistency with COA Standards and AACN Essentials and Competencies

- COA Standards for Accreditation of Nurse
   Anesthesia Programs Practice Doctorate, 2015
- AACN The Essentials of Doctoral Education for Advanced Nursing Practice, 2006
- AACN Common APRN Doctoral Competencies, 2018



## Institutional Review Board (IRB) Approval

 Louisiana State University Institutional Review Board reviewed and approved the content and methodology of the COA's Delphi Study



## Delphi Study Participant Panel

- Program Administrators
  - Doctoral degree required
  - Minimum 1 year experience as a program administrator
- Program Faculty
  - Doctoral degree required
  - Minimum 1 year experience as a program faculty member
- Certified Registered Nurse Anesthetist (CRNA) Clinical Educators
  - Doctoral degree preferred; Master's degree required
  - Minimum 1 year experience providing clinical education
- Nurse Anesthesia Students
  - Completion of 1 year of clinical education; good academic standing as evidenced by recommendation letter from program administrator

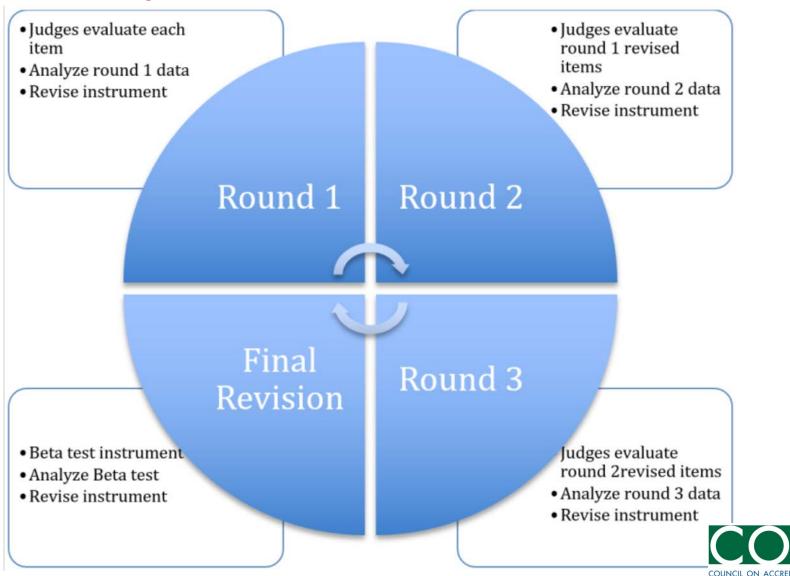


## Delphi Study Methodology

- CCATSIG developed
  - Domains
  - Descriptor for each Domain
  - Competencies for each Domain and Descriptors
  - Progression Indicators for each Competency
    - Description of Unsafe, Novice, Advanced Beginner, Competent, Proficient (Prepared for Entry into Practice)
    - Progression Indicator "Unsafe" Revised to "Safety Concern" from Round 1 to Round 2



## Delphi Study Process



## Delphi Study Methodology

- CCATSIG Members Assigned to Workgroups by Domain
- Three (3) Rounds of Feedback and Revision
- Statistical Analysis of Delphi Study Feedback for Each Round
  - Domains
    - Rate the relevancy of each Domain on 5-point Likert scale
    - Comment regarding interpretability of each Domain
  - Domain Descriptors
    - Rate the relevancy of each Domain Descriptor on 5-point Likert scale
    - Comment regarding interpretability of each Domain Descriptor
  - Competencies
    - Rate the relevancy of each Competency on a 5-point Likert scale
    - Comment regarding interpretability of each Competency
  - Progression Indicators
    - Rate the relevancy of each Progression Indicator for each Competency on a 5-point Likert scale
    - Comment regarding interpretability of Progression Indicators for each Competency

## **Anatomy of the CCAT Rubric**

- Competency
- Descriptors
- Progression Indicators

Competency (Descriptors)	N A	Safety Concern	Novice	Advanced Beginner	Competent	Proficient (Entry into Practice)
<ol> <li>Provides safe and vigilant patient care throughout the perianesthesia period</li> <li>Timely response to alarms, audible indicators, anesthesia, and/or surgical events.</li> <li>Limited distractions.</li> </ol>		Fails to demonstrate safe practices throughout the perianesthesia period.			_	Demonstrates safe practices throughout the perianesthesia period, independently; identifies/anticipates safety concerns; intervenes if others are demonstrating unsafe practices.



### Domain 1: Patient Safety and Perianesthesia Care

<u>Domain Descriptor</u>: Administers and manages comprehensive, safe, and patient-centered anesthesia care across the lifespan for a variety of procedures and physical conditions.

Competency	N	Safety Concern	Novice	Advanced	Competent	Proficient
(Descriptors)  1. Provides safe and vigilant patient care throughout the perianesthesia period  Examples:  • Timely response to alarms, audible indicators, anesthesia, and/or surgical events  • Limits distractions	A	Fails to demonstrate safe practices throughout the perianesthesia period.	Demonstrates safe practices throughout the perianesthesia period with continual direction.	Beginner  Demonstrates safe practices throughout the perianesthesia period with minimal direction.	Demonstrates safe practices throughout the perianesthesia period, independently; identifies safety concerns.	(Entry into Practice)  Demonstrates safe practices throughout the perianesthesia period, independently; identifies/anticipates safety concerns; intervenes if others are demonstrating unsafe practices.
Performs a comprehensive preanesthetic equipment check      Examples:     Verifies availability and function of standard and emergency equipment     Performs the required anesthesia machine check		Fails to perform a comprehensive preanesthetic equipment check.	Performs a comprehensive preanesthetic equipment check with minimal direction.	Performs a comprehensive preanesthetic equipment check, independently.	Performs a comprehensive preanesthetic equipment check, independently; identifies and reports concerns.	Performs a comprehensive preanesthetic equipment check, independently; troubleshoots and resolves concerns.
3. Protects patients from perioperative complications  Examples:  Participates in "time-out" procedure Safely positions patient Monitors physiological responses (i.e. cardiopulmonary status, temperature)		Fails to protect patients from perioperative complications.	Performs interventions to prevent perioperative complications with continual direction.	Performs interventions to prevent perioperative complications with minimal direction.	Performs interventions to prevent perioperative complications, independently.	Performs interventions to prevent perioperative complications, independently; intervenes if others are demonstrating behaviors that may result in perioperative complications.
Examples     Incorporates cultural awareness, knowledge, sensitivity, and skills     Recognizes own cultural perspective and bias     Recognizes patient's cultural perspectives and bias     Includes cultural perspectives and biases in decision making		Fails to deliver culturally competent perianesthesia care.			Delivers culturally competent perianesthesia care.	Delivers culturally competent perianesthesia care; uses interprofessional collaboration.

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Competency	N	Safety Concern	Novice	Advanced	Competent	Proficient
(Descriptors)	A			Beginner		(Entry into Practice)
5. Administers anesthesia for a variety of						
procedures and physical conditions to patients across the lifespan						
5a. Induction		Fails to perform	Performs induction	Performs induction	Performs induction	Manages complex
Examples:		induction safely.	safely with continual	safely with minimal direction.	safely, independently.	induction events; troubleshoots and resolves
Applies standard monitoring			direction.	ininimai direction.	independently.	concerns; suggests
Adequately preoxygenates						alternative plans for
Appropriately selects and administers induction						induction.
medications						
<ul> <li>Appropriately manages airway and ventilation</li> </ul>						
5b. Maintenance		Fails to maintain	Intervenes to	Intervenes to	Intervenes to	Intervenes to maintain
-		patient safety and	maintain patient	maintain patient	maintain patient	patient safety; uses
Examples:		adequate depth of anesthesia.	safety and adequate depth of anesthesia	safety and adequate depth of anesthesia	safety and adequate depth of anesthesia,	interprofessional collaboration; anticipates
Continuous monitoring     Titrates anesthesia and adjunct medications to		anesmesia.	with continual	with minimal	independently.	anesthetic needs for
maintain physiologic stability			direction.	direction.	maepenaentry.	increasingly complex
Appropriately maintains airway and ventilation.			(-550,500,500,500)			cases.
Anticipates postoperative requirements						X2.2.21
5c. Emergence		Fails to manage	Manages	Manages emergence	Manages emergence	Manages emergence safely
		emergence safely.	emergence safely	safely with	safely, timely,	for increasingly complex
Examples:			with continual	minimal direction.	independently.	cases; uses
Discontinues anesthetic medications			direction.			interprofessional
Ensures extubation criteria is met						collaboration.
Ensures physiologic stability     Prepares for transfer						
Frepares for transfer  5d. Postoperative care		Fails to manage	Manages	Manages	Manages	Manages postoperative care
Su. Postoperative care		postoperative care	postoperative care	postoperative care	postoperative care	safely for increasingly
Examples:		safely.	safely with	safely with	safely,	complex cases; uses
Safely transports patients for recovery		7.150.2.7	continual	minimal direction.	independently.	interprofessional
<ul> <li>Provides comprehensive "hand-off" to RN</li> </ul>			direction.			collaboration.
<ul> <li>Ensures physiologic stability</li> </ul>						
Ensures adequate pain control						
<ul> <li>Verbalizes discharge criteria/goals</li> </ul>						
Performs postoperative visit/follow-up as						
indicated					4	

### Domain 1: Patient Safety and Perianesthesia Care

<u>Domain Descriptor</u>: Administers and manages comprehensive, safe, and patient-centered anesthesia care across the lifespan for a variety of procedures and physical conditions.

Competency	N	Safety Concern	Novice	Advanced	Competent	Proficient
(Descriptors)	A	FP		Beginner	500	(Entry into Practice)
6. Administers and/or manages a variety of regional anesthesia techniques  Examples:  • Verbalizes indications, contraindications, and risks  • Verifies availability and function of standard and emergency equipment  • Identifies anatomic landmarks  • Appropriately selects and administers anesthetic medications  • Ensures use of sterile technique		Fails to administer and/or manage regional anesthesia techniques safely.	Administers and/or manages regional anesthesia techniques safely with continual direction.	Administers and/or manages regional anesthesia techniques safely with minimal direction.	Administers and/or manages regional anesthesia techniques safely, independently.	Administers and/or manages regional anesthesia techniques safely, independently; advocates for the use of regional anesthesia techniques appropriate for patient and procedure.
Appropriately administers regional anesthetic						
<ul> <li>Identifies and manages complications</li> </ul>						

### COMMENTS:

### **Domain 2: Knowledge and Critical Thinking**

<u>Domain Descriptor:</u> Comprehends, applies, synthesizes, and evaluates new and existing knowledge and experience to guide clinical anesthesia decision making.

Competency	N	Safety Concern	Novice	Advanced Beginner	Competent	Proficient
(Descriptors)  1. Uses knowledge, experience and science-based principles to formulate an anesthetic plan	A	Fails to use knowledge, experience, and science-based principles to formulate a basic anesthetic plan.	Uses knowledge, experience, and science-based principles to formulate a basic anesthetic plan with minimal direction.	Uses knowledge, experience, and science-based principles to formulate an individualized anesthetic plan with minimal direction.	Uses knowledge, experience, and science- based principles to formulate an individualized anesthetic plan, independently.	(Entry into Practice) Uses knowledge, experience, and science- based principles to formulate an individualized anesthetic plan, independently; uses interprofessional collaboration.
2. Performs a comprehensive pre-anesthesia history and physical (H&P) assessment, and utilizes these findings to formulate an individualized anesthetic plan  Examples:  Past medical/surgical/social history Review of systems Labs/ diagnostic studies Physical assessment and airway evaluation		Fails to perform a comprehensive H&P assessment and formulate a basic anesthetic plan.	Performs a comprehensive H&P assessment and formulates a basic anesthetic plan with minimal direction.	Performs a comprehensive H&P assessment and formulates an individualized anesthetic plan with minimal direction.	Performs a comprehensive H&P assessment and formulates an individualized anesthetic plan, independently.	Performs a comprehensive H&P assessment and formulates an individualized anesthetic plan, independently; uses interprofessional collaboration.
3. Interprets and utilizes data obtained from noninvasive and invasive monitoring modalities for clinical decision making  Examples:  • Cardiovascular (i.e.: HR, NIBP, ABP, CVP, PAP)  • Respiratory (i.e.: SpO2, minute ventilation, ETCO2)  • Neurologic (i.e., ICP, NMB status, evoked potentials)		Fails to interpret and utilize data obtained from noninvasive and invasive monitoring modalities for clinical decision making.	Interprets and utilizes data obtained from noninvasive and invasive monitoring modalities for clinical decision making with continual direction.	Interprets and utilizes data obtained from noninvasive and invasive monitoring modalities to prioritize clinical decision making with minimal direction.	Interprets and utilizes data obtained from noninvasive and invasive monitoring modalities to prioritize clinical decision making, independently.	Interprets and utilizes data obtained from noninvasive and invasive monitoring modalities to prioritize clinical decision making, independently; uses interprofessional collaboration while prioritizing clinical decision making.

### **Domain 2: Knowledge and Critical Thinking**

<u>Domain Descriptor:</u> Comprehends, applies, synthesizes, and evaluates new and existing knowledge and experience to guide clinical anesthesia decision making.

Competency	N	Safety Concern	Novice	Advanced Beginner	Competent	Proficient
(Descriptors)	A	Safety Concern	Novice	Advanced Deginner	Competent	(Entry into Practice)
Temperature						(Entry into Fractice)
Labs /diagnostic studies						
• Laos / diagnostic studies						
4. Calculates, initiates, and manages fluid,	-	Fails to calculate,	Calculates, initiates,	Calculates, initiates,	Calculates, initiates, and	Calculates, initiates, and
blood and blood component therapy		initiate, and/or manage	and/or manages fluid,	and manages fluid,	manages fluid, blood and	manages fluid, blood and
		fluid, blood and blood	blood and blood	blood and blood	blood component	blood component therapy,
		component therapy.	component therapy with	component therapy	therapy, independently.	independently, for
			continual direction.	with minimal	(450) 450) OF	increasingly complex
				direction.		cases.
5. The recognition, evaluation and/or		Fails to recognize,	Recognizes, evaluates,	Recognizes, evaluates,	Recognizes, evaluates,	Recognizes, evaluates, and
appropriate management of physiologic		evaluate, and/or	and appropriately	and appropriately	and appropriately	appropriate manages
responses during anesthesia care		appropriately manage	manages physiologic	manages physiologic	manages physiologic	physiologic responses in a
responses during antestatesta care		physiologic responses	responses with	responses with	responses in a timely	timely manner,
Examples:		during anesthesia care.	continual direction in	minimal direction in	manner, independently.	independently anticipates.
Hypo/hypertension			a timely manner.	a timely manner.	355 of 5	
Hypo/hypercarbia			35			
Hypoxia						
Dysrhythmias						
6. The recognition and appropriate		Fails to recognize and			Recognizes, evaluates,	Recognizes, evaluates, and
management of complications occurring		appropriately manage			and appropriately	appropriately manages
during anesthesia care		complications.			manages complications	complications in a timely
					while ensuring effective	manner while ensuring
Examples:					interprofessional	effective interprofessional
Myocardial ischemia					collaboration,	collaboration,
Pneumothorax					independently.	independently anticipates.

Domain 2: Knowledge and Critical Thinking							
<b><u>Domain Descriptor:</u></b> Comprehends,	<b>Domain Descriptor:</b> Comprehends, applies, synthesizes, and evaluates new and existing knowledge and experience to guide clinical anesthesia decision						
making.							
Competency	N	Safety Concern	Novice	Advanced Beginner	Competent	Proficient	
(Descriptors)	A					(Entry into Practice)	
Malignant hyperthermia				2			
COMMENTS:	COMMENTS:						

### Domain 3: Professional Communication and Collaboration

<u>Domain Descriptor:</u> Engages in effective communication with patients, their families/significant others, and other healthcare professionals to deliver safe, patient-centered anesthesia care.

Competency	N	Safety Concern	Novice	Advanced Beginner	Competent	Proficient
(Descriptors)	A					(Entry into Practice)
1. Utilizes communication skills with		Fails to utilize			Utilizes effective	Utilizes effective
patients, their families/significant		effective			communication skills	communication skills with
others, and other healthcare		communication skills			with patients, their	patients, their
professionals		with patients, their			families/significant	families/significant others,
		families/significant			others, and other	and other healthcare
Examples:		others, and other			healthcare professionals.	professionals; uses and
<ul> <li>Accepts instruction and constructive</li> </ul>		healthcare			100 Section (100 Sec	utilizes interprofessional
feedback		professionals.				communication to
<ul> <li>Uses effective, empathic and respectful</li> </ul>		19 4-10 a. C. 10 2 to 10 a 10				improve the quality of
verbal/nonverbal communication						care.
<ul> <li>Educates and advocates for patients,</li> </ul>						
families and significant others						
<ul> <li>Teaches others</li> </ul>						
<ul> <li>Maintains patient confidentiality</li> </ul>						
<ul> <li>Informs the public of the role and</li> </ul>						
practice of a CRNA						

### **Domain 3: Professional Communication and Collaboration**

**<u>Domain Descriptor:</u>** Engages in effective communication with patients, their families/significant others, and other healthcare professionals to deliver safe, patient-centered anesthesia care.

patient-centered anestnesia care.						
Competency	N	Safety Concern	Novice	Advanced Beginner	Competent	Proficient
(Descriptors)	A	150			35	(Entry into Practice)
2. Maintains comprehensive, accurate, and legible (if applicable) healthcare records		Fails to maintain comprehensive, timely, accurate and/or legible healthcare records.	Maintains comprehensive, timely, accurate and legible healthcare records with continual direction.	Maintains comprehensive, timely, accurate and legible healthcare records with minimal direction.	Maintains comprehensive, timely, accurate and legible healthcare records, independently.	Maintains comprehensive, timely, accurate and legible healthcare records, independently; identifies opportunities for system improvements.
3. Transfers the responsibility for patient		Fails to transfer	Transfers responsibility	Transfers responsibility	Transfers the	Transfers the responsibility
care that assures continuity and patient safety  Examples:  Report to RN  patient identifying information  medical history  anesthetic technique performed  intraoperative course  postoperative status and plan of care  Solicits concerns or questions from healthcare providers		responsibility for patient care that assures continuity and patient safety.	for patient care that assures continuity and patient safety with continual direction.	for patient care that assures continuity and patient safety with minimal direction.	responsibility for patient care that assures continuity and safety, independently.	for patient care that assures continuity and safety, independently; identifies opportunities for system improvements (if applicable).
4.Provides leadership that facilitate intra-professional and inter-professional communication and collaboration  Examples:  • Provides and accepts constructive feedback • Exhibits self-confidence, positive attitude and flexibility • Exhibits a diligent work ethic, serves as a role model • Demonstrates healthy coping mechanisms • Exhibits emotional intelligence		Fails to demonstrate leadership behaviors that facilitate intra-professional and inter-professional communication and collaboration.		Demonstrates leadership behaviors that facilitate intra-professional and inter-professional communication and collaboration with minimal direction.	Demonstrates leadership behaviors that facilitate intra-professional and inter-professional communication and collaboration, independently.	Demonstrates leadership behaviors that facilitate intra-professional and inter-professional communication and collaboration, independently; serves as a role model, mentor, and emerging leader.
Report to RN  patient identifying information  medical history  anesthetic technique performed  intraoperative course  postoperative status and plan of care  Solicits concerns or questions from healthcare providers  4.Provides leadership that facilitate intra-professional and inter-professional communication and collaboration  Examples: Provides and accepts constructive feedback  Exhibits self-confidence, positive attitude and flexibility  Exhibits a diligent work ethic, serves as a role model  Demonstrates healthy coping mechanisms		Fails to demonstrate leadership behaviors that facilitate intra-professional and inter-professional communication and	-	Demonstrates leadership behaviors that facilitate intra-professional communication and collaboration with	Demonstrates leadership behaviors that facilitate intra-professional and inter-professional communication and collaboration,	Demonstrates leade behaviors that facil intra-professional communication and collaboration, independently; service model, mento

### COMMENTS:

### **Domain 4: Professional Role**

<u>Domain Descriptor:</u> Practices in a responsible and accountable manner that complies with professional, legal, ethical, and regulatory standards with an awareness and responsiveness to the larger healthcare system.

			<u> </u>			
Competency	N	Safety Concern	Novice	Advanced Beginner	Competent	Proficient
(Descriptors)	A	***************************************		C-7-40-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		(Entry into Practice)
1. Adheres to the <u>AANA</u> and <u>ANA</u> Codes		Fails to adhere to the			Adheres to the AANA &	Adheres to the AANA &
of Ethics		AANA & ANA Codes			ANA Codes of Ethics.	ANA Codes of Ethics and
40,741-50,000-000		of Ethics.			350000000000000000000000000000000000000	uses interprofessional
		COMPANY CONTRACTORY				collaboration to uphold the
						Codes of Ethics.
2. Adheres to AANA Standards for Nurse		Fails to adhere to the			Adheres to the AANA	Adheres to AANA Standards
Anesthesia Practice		AANA Standards for			Standards for Nurse	for Nurse Anesthesia
00		Nurse Anesthesia			Anesthesia Practice.	Practice and uses
		Practice.				interprofessional
						collaboration to uphold the
						AANA Standards.

### **Domain 4: Professional Role**

<u>Domain Descriptor:</u> Practices in a responsible and accountable manner that complies with professional, legal, ethical, and regulatory standards with an awareness and responsiveness to the larger healthcare system.

The state of the s	<u>A </u>				
Competency	Safety Concern	Novice	Advanced Beginner	Competent	Proficient
(Descriptors) A			6-35	j sas	(Entry into Practice)
3. Interacts with professional integrity	Fails to interact with			Interacts with	Interacts with professional
(6.7% St. 20	professional integrity.			professional integrity.	integrity within the
Examples:					healthcare team; uses
<ul> <li>Demonstrates truthfulness, honesty,</li> </ul>				<i>A</i> '	interprofessional
consistency				4'	collaboration.
4. Functions within professional, legal,	Fails to comply with			Complies with	Complies with professional,
regulatory standards, and adheres to	professional, legal,			professional, legal,	legal, regulatory standards,
institutional policies	regulatory standards,			regulatory standards, and	and institutional policies;
	and institutional			institutional policies.	uses interprofessional
	policies.			<u> </u>	collaboration.
5. Responsible and accountable for	Fails to accept			Accepts responsibility	Accepts responsibility and
practice	responsibility and			and accountability for	accountability for own
25.60 25	accountability for			practice.	actions and engages in
Example:	practice.			,	interprofessional
<ul> <li>Demonstrates punctuality,</li> </ul>	'			<i>4</i> '	collaboration to improve
self-discipline, reliability				<u> </u>	practice.
6. Provides cost-effective anesthesia care	Fails to provide			Provides cost-effective	Demonstrates stewardship
1 200	cost-effective			anesthesia care.	of financial and other
Examples:	anesthesia care.			<b>4</b> '	resources for the delivery of
<ul> <li>Considers cost-effectiveness when</li> </ul>				<b>4</b> '	cost-effective anesthesia
selecting equipment and medications				<b>4</b> '	care.
Minimizes medical waste				<u> </u>	

#### COMMENTS:

## **Next Steps**

- Final Call for Comment on COA-Approved Tool-Complete
- Registered User Process In Progress
  - Demographic Survey for Programs to Indicate Interest
  - Determine Electronic System Used
  - Groups for required Orientation/Training to ensure Validity and Reliability
- Manuscript for Publication In Progress
- Obtain Copyright In Progress
- Collaboration with Medatrax and Typhon to Include Tool and Current Reporting Features – In Progress
- Orientation/Training Webinars
- Ongoing Evaluation and Revision

