

# Competency Assessment Tool for Antineoplastic Agent Administration 2009

## Guidelines for use:

- In assessing competence, a combination of assessment methods may be utilised including clinical questioning/interview and observation.
- During assessment, for each criterion listed below, choose one indicator that best describes the candidate's performance. Circle the number representing the chosen indicator.
- The sum of scores for each item is obtained to determine an overall score. This score will correspond with a band level description of the candidate's overall performance (Refer to page 7) to validate the performance level rating.
- The assessor may prompt the candidate throughout the observation. Such action should be recorded in the comments section. Prompting suggests that the candidate is not yet independent and requires supervision. The rating given should reflect this by circling only the score that the candidate can perform independently.
- For further information please view the Assessment Fact Sheet: Performance Assessment using Competency Assessment Tools.

## At the completion of this assessment the specialist cancer nurse (SCN) should, with respect to administration of antineoplastic therapy:

- Demonstrate an understanding of the rationales for and mechanisms involved in cancer therapies and their related clinical effects, both acute and delayed
- Undertake and document a comprehensive and timely assessment of current and potential effects and complications arising from having cancer and cancer control efforts using a systematic, evidence-based approach
- Anticipate, monitor and respond to potential adverse events associated with cancer and cancer control efforts using evidence-based knowledge
- Communicate effectively with the person affected by cancer and other members of the health care team to facilitate timely and comprehensive assessment and identification of current and potential adverse effects of having cancer and cancer control efforts
- Collaborate with people affected by cancer and other members of the health care team, in planning and implementing care to prevent, minimise and manage the acute and delayed effects of having cancer and its treatment
- Demonstrate knowledge of and adherence to treatment protocols and clinical guidelines including non-pharmacological treatments, in the context of cancer control
- Demonstrate safe and effective use of clinical procedures and technologies in the provision of optimum care related to cancer control efforts
- Comply with legislation relevant to cancer control
- Provide comprehensive and specialised information in a coordinated manner to assist people affected by cancer to achieve optimal health outcomes, reduce distress and make informed decisions
- Provide education to the person affected by cancer to enable them to be active participants in their care and engage in self-management of health related needs where appropriate to achieve optimal health outcomes across the cancer continuum

## Competency Domain: Professional practice

This domain comprises competencies that reflect the Specialist Cancer Nurse's (SCN) ability to develop professionally, participate effectively in clinical governance and influence cancer control efforts at the systems level.

Criteria	Indicator	Comments
<b>1.1</b> Dons protective equipment throughout procedure	<p><b>0</b> Does not identify legislation or workplace guidelines relevant to safe handling and protection</p> <p><b>1</b> Practice reflects recall of local policy relevant to safe handling and use of protective equipment</p> <p><b>2</b> Practice and rationale reflects appreciation of local policy, legislation and guidelines relevant to safe handling and use of protective equipment</p>	
<b>1.2</b> Explains and discusses procedure with individual to obtain verbal consent for interventions	<p><b>0</b> Consent not obtained</p> <p><b>1</b> Describes procedure, consent obtained</p> <p><b>2</b> In obtaining consent, acknowledges the rights of people affected by cancer OR advocates for individual with regard to consent issues</p>	
<b>1.3</b> Completes requirements for reporting and documenting interventions	<p><b>0</b> Reporting and documentation incomplete</p> <p><b>1</b> Practice reflects recall of local policy for documenting and reporting antineoplastic agent administration</p> <p><b>2</b> In accordance with local policy, documents and reports antineoplastic agent administration in a timely, objective and accurate manner and reports significant outcomes where appropriate</p>	
<b>1.4</b> Understands requirements, processes and rationale for incident reporting	<p><b>0</b> Does not identify rationale for incident reporting</p> <p><b>1</b> Lists requirements and processes for incident reporting</p> <p><b>2</b> Explains rationale for incident reporting relevant to individual and organisation</p>	

Criteria	Indicator	Comments
<b>1.5</b> Disposes of waste safely and appropriately	<b>0</b> Does not identify legislation related to safe handling of cytotoxic material and waste <b>1</b> Practice reflects recall of local policy relevant to safe handling of cytotoxic material and waste <b>2</b> Practice demonstrates appreciation for local policy and legislation concerning safe handling of cytotoxic material and waste	
<b>1.6</b> Practices within professional boundaries, organisational role descriptions and standards for care	<b>1</b> Does not identify professional scope of practice, organisational role descriptions and standards of care related to administration of antineoplastic agents <b>2</b> Practice reflects recall of local role descriptions relevant to administration of antineoplastic agents <b>3</b> Practice and rationale reflects appreciation of local role descriptions, standards of care and appraises own scope of practice relevant to administration of antineoplastic agents	

## Competency Domain: **Critical thinking and analysis**

This domain comprises competencies that reflect the SCN's ability to practice within an evidence-based framework, participate in ongoing professional development, ensure optimal standards of cancer care and lead ongoing development of cancer nursing.

Criteria	Indicator	Comments
<b>2.1</b> Checks that all details on the label of antineoplastic agent are correct when compared with individual's prescription and protocol (including dose, Body Surface Area (BSA), and Area Under the Curve (AUC) calculations)	<b>0</b> Check incomplete <b>1</b> Check complete ensuring safety but lacks logical progression and critical inquiry <b>2</b> Practice incorporates systematic check and analysis of findings against established benchmarks, standards and guidelines	

## Competency Domain: Provision and coordination of care

Provision and coordination of care relates to coordination, organisation and provision of nursing care. It includes the assessment, planning, implementation, and evaluation of care for people affected by cancer, and consists of four dimensions including:

- Disease and treatment related care
- Supportive care
- Coordinated care
- Information provision and education

Criteria	Indicator	Comments
<b>3.1</b> Evaluates the individual's/ carer's knowledge of antineoplastic therapy. Offers explanation of use, action, dose, potential effects of agent/s involved including signs and symptoms	<p><b>0</b> Does not assess individual's understanding of condition, therapy or expected effects</p> <p><b>1</b> Lists routine effects and rationale for therapy without specificity to individual or treatment regime</p> <p><b>2</b> Using appropriate language and demonstration, provides tailored education and supportive resources, based on an assessment of individual need, capabilities, preferences and treatment regime</p>	
<b>3.2</b> Conducts comprehensive assessment prior to procedure	<p><b>0</b> Does not conduct an assessment</p> <p><b>1</b> Performs routine safety checks and a range of nursing assessments without specificity to treatment regime or the individual</p> <p><b>2</b> Evaluates treatment order for potential adverse effects, performs appropriate assessments, assesses impact of previous therapy and identifies contraindications and risk factors with planned therapy</p>	
<b>3.3</b> Collects and prepares equipment for aseptic administration procedure and secure intravenous system	<p><b>0</b> Equipment incomplete</p> <p><b>1</b> Practice reflects recall of local policy, equipment collected</p> <p><b>2</b> Equipment preparation complete, rationales for practice are provided</p>	
<b>3.4</b> Inspects venous access device (VAD) and confirms patency (if via intravenous route)	<p><b>0</b> Does not inspect VAD or confirm patency</p> <p><b>1</b> Practice reflects recall of local policy, slow and awkward technique demonstrated</p> <p><b>2</b> Demonstrates efficient and dexterous technique, assesses throughout administration for signs of extravasation, rationales for practice are provided</p>	

Criteria	Indicator	Comments
<b>3.5</b> Verifies individual's identity	<b>0</b> Does not verify identification <b>1</b> Practice reflects recall of local policy for identity verification <b>2</b> Confidently uses variety of techniques to verify identity before administration of medication	
<b>3.6</b> Administers antineoplastic agents and supportive therapies (e.g. vesicants, antiemetics, hydration) by correct route and in correct order	<b>0</b> Inappropriate technique employed for preparation and administration of medications and antineoplastic agents <b>1</b> Demonstrates slow and awkward technique for preparation and administration of supportive therapies and antineoplastic agents <b>2</b> Demonstrates efficient and dexterous technique for preparation and administration of supportive therapies and antineoplastic agents, appraises suitability of treatment orders against individual's condition, rationales for practice are provided	
<b>3.7</b> Ensures correct administration rate via gravity, or volumetric pump	<b>0</b> Inaccurate rate calculations performed <b>1</b> Completes rate calculations with assistance, sets infusion or pump rate accurately <b>2</b> Independently completes accurate rate calculations and verifies calculations according to local policy, ensures infusion or pump rate is accurate	
<b>3.8</b> Flushes device between medications and after administration	<b>0</b> Does not flush device, inappropriate technique employed <b>1</b> Demonstrates slow and awkward technique for flushing between medications <b>2</b> Demonstrates efficient and dexterous technique for flushing between medications, appraises compatibility of solutions, rationales for practice are provided	

Criteria	Indicator	Comments
<b>3.9</b> Assesses/monitors individual's comfort and for adverse effects including extravasation and hypersensitivity reaction	<b>0</b> Does not assess/monitor individual's condition <b>1</b> Requires occasional prompts to guide assessments of individual <b>2</b> Independently performs appropriate assessments across the care continuum and explains the significance of change in individual condition	
<b>3.10</b> Manages adverse effects including extravasation and hypersensitivity reaction	<b>0</b> Does not manage adverse effects <b>1</b> Requires occasional prompts to guide management of individual <b>2</b> In accordance with local policy implements proactive interventions to prevent and , manages adverse effects, explains the significance of change in an individual's condition, rationales for practice are provided	
<b>3.11</b> Provides ongoing education regarding self care strategies	<b>0</b> Ongoing education not provided <b>1</b> Lists self care strategies without specificity to individual or treatment regime <b>2</b> Education continuous and relevant to need, preference, capabilities and treatment, utilises evidence-based strategies to promote self care	

## Competency Domain: Collaborative and therapeutic practice

This domain comprises competencies reflecting the SCN's ability to develop effective collaborative relationships with people affected by cancer that will assist to maximise health outcomes, and establish a collaborative approach to working effectively as part of a multidisciplinary team across the care continuum. These competencies include recognition of the critical interdependence between the roles of the SCN, other health professionals and organisations and the establishment of partnerships with people affected by cancer to maximise outcomes.

Criteria	Indicator	Comments
<b>4.1</b> Effectively communicates with individual and multidisciplinary team throughout procedure	<b>0</b> Communication is limited with individual and/or multidisciplinary team (MDT) <b>1</b> At ease in interactions with individual and the MDT, evidence based communication strategies promoting information exchange not attempted <b>2</b> Therapeutic relationships established and maintained with individual, needs are assessed, facilitates timely involvement of other team members in care	

## Band Level Descriptors

Performance Level	Interpretation	Range
<p>COMPETENT</p> <p>Established competence as specialist cancer nurse</p>	<p>Complies with legislation relevant to cancer care. Explains and justifies practice in accordance with local policy. Evaluates and appraises treatment orders. Is cognisant of individual's specific condition, needs and preferences. Performs comprehensive and ongoing assessments. Has a sound knowledge underpinning antineoplastic therapy. Confident and independent in procedures. Efficient and dexterous technique demonstrated. Is able to manage changing scenarios. Documents and reports across the care continuum. Cognisant of organisation- wide/ global cancer control issues. Practices in a way that acknowledges the impact of cancer on the culture, dignity, values, beliefs of people affected by cancer.</p>	28 – 38
<p>COMPETENT</p> <p>Beginning competence as specialist cancer nurse</p>	<p>Identifies and follows standard policy requirements with some specificity to chemotherapeutic agent or individual. Identifies and resolves unsafe situations. Nursing considerations limited to specific context but lack organisational/ global perspectives. Requires occasional prompts to carry out routine processes and practice. Evolving technique demonstrated.</p>	19 – 27
<p>NOT YET COMPETENT</p>	<p>Knowledge of local policy and rationales for practice limited to recall. Limited focus on task, individual or context. Requires continuous directions or prompts to carry out routine procedures. Accuracy and technique not dependable.</p>	0 – 18

# Antineoplastic Agent Administration Record of Competency Assessment

**Candidate's Name:** \_\_\_\_\_

**Date of assessment:** \_\_\_\_\_

**Total Score:** \_\_\_\_\_

Assessor's comments/ suggested areas for improvement:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Circle appropriate score range)

Performance Level	Interpretation	Range
COMPETENT Established competence as specialist cancer nurse	Complies with legislation relevant to cancer care. Explains and justifies practice in accordance with local policy. Evaluates and appraises treatment orders. Is cognisant of individual's specific condition, needs and preferences. Performs comprehensive and ongoing assessments. Has a sound knowledge underpinning antineoplastic therapy. Confident and independent in procedures. Efficient and dexterous technique demonstrated. Is able to manage changing scenarios. Documents and reports across the care continuum. Cognisant of organisation- wide/ global cancer control issues. Practices in a way that acknowledges the impact of cancer on the culture, dignity, values, beliefs of people affected by cancer.	28 – 38
COMPETENT Beginning competence as specialist cancer nurse	Identifies and follows standard policy requirements with some specificity to chemotherapeutic agent or individual. Identifies and resolves unsafe situations. Nursing considerations limited to specific context but lack organisational/ global perspectives. Requires occasional prompts to carry out routine processes and practice. Evolving technique demonstrated.	19 – 27
NOT YET COMPETENT	Knowledge of local policy and rationales for practice limited to recall. Limited focus on task, individual or context. Requires continuous directions or prompts to carry out routine procedures. Accuracy and technique not dependable.	0 – 18

**Candidate's Signature:** \_\_\_\_\_

**Assessor's Name:** \_\_\_\_\_

**Assessor's Signature** \_\_\_\_\_