

What does it mean to be a competent nurse? How do you know you're ready to perform activities in your practice? What factors influence your decisions in client care?

Welcome to the *Nursing Competence* learning module. Understanding your nursing competence is essential for delivering clinically and culturally safe, competent, and ethical care. This module will delve into the key components of competence: knowledge, skills, attitudes, and judgment. Throughout this module, you will define nursing competence, explain its key components, and describe the "advanced activities" along with the competence requirements necessary to perform them. Additionally, you will identify when you are competent or not competent to carry out a nursing activity.

By the end of this module, you'll understand what it means to be a competent nurse and gain insights into how your competence impacts your scope of practice.

Note: This module is designed specifically for nurses. If you're a midwife, please refer to the separate modules created for midwifery practice.

Estimated time: 30-40 minutes

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Territorial acknowledgement



We acknowledge the rights and title of the First Nations whose collective unceded territories encompass the land base colonially known as British Columbia. We give specific thanks to the hənt8qt8əmint8əmt8 speaking peoples the xt8məθkwəyəm (Musqueam) and sel'íl'witulh (Tsleil- Waututh) Nations and the Skwxwú7meshulh Sníchim speaking Peoples the Skwxwú7mesh Úxwumixw (Squamish Nation), on whose unceded territories BCCNM's office is located. We also give thanks for the medicines of these territories and recognize that laws, governance, and health systems tied to these lands and waters have existed here for over 9000 years.

We also acknowledge the unique and distinct rights, including rights to health and wellness, of First Nations, Inuit, and Métis, peoples from elsewhere in Canada who now live in British Columbia. As leaders in the settler health system,

we acknowledge our responsibilities to these rights under international, national, and provincial law.

Lesson 2 of 10

What is competence?

Before we dive in, take a moment to think about your practice. Ask yourself:

- Do I regularly assess my competence by reflecting on my strengths and opportunities for improvement?
- Do I regularly engage in learning opportunities to maintain or increase my competence in practice?
- Do I have a plan when I encounter a situation that is outside my competence?

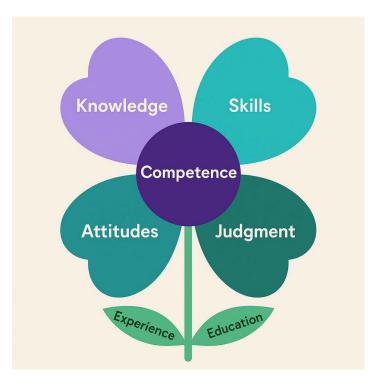


Defining nursing competence

Competence is your ability to integrate and apply knowledge, skills, attitudes, and judgments (competencies) in practice.

Competence is more than just the ability to perform technical skills. In nursing, competence integrates **knowledge**, **skills**, **attitudes**, and **judgment**, which are essential for delivering culturally safe, competent, and ethical care within a nurse's scope of practice. Achieving competence requires both **education** and **experience**.

Nursing demands a blend of theoretical knowledge, practical skills, and the capacity to make informed judgments. To ensure the provision of safe care, nurses must continually enhance their competence through self-reflection, ongoing education, and practical experience.



Controls on practice overview



The nursing scope of practice is shaped by four controls—legislation, BCCNM standards, limits, conditions, organizational policies, and individual competence—that determine what nurses are legally and ethically allowed and able to do in their roles. Let's briefly review the four controls on practice.

Level 1: Legislation and regulation

The *Health Professions Act (HPA)* and nursing regulations set the legal framework for regulated health professions in B.C. These laws ensure that nurses and others provide culturally safe, ethical, and competent care.

Level 2: BCCNM bylaws, standards, limits, & conditions

BCCNM sets practice standards and may impose limits or conditions on certain activities authorized in the regulation. Bylaws outline additional requirements for practice.

Level 3: Organizational policies

Employers have the authority to further limit your scope of practice. This means that some activities allowed by regulations or BCCNM may not be allowed at your workplace. Policies and procedures may vary across different workplaces.

Level 4: Individual nurse competence

As a nurse, you are personally accountable and responsible for ensuring that you have the skills, knowledge, attitudes, and judgment to perform an activity safely and competently.



For a comprehensive review of the controls on practice, check out the module *Know Your Scope*: *Navigating the Controls on Practice*.





Competence is essential for delivering culturally safe, competent, and ethical care. Below are actionable steps you can take to enhance your competence in practice:

- Reflect on your practice by regularly evaluating your strengths and areas for growth.
- Engage in ongoing education to actively pursue learning opportunities to gain and maintain competence.
- Understand the controls on practice by staying informed about the regulations, standards, and employer policies guiding your profession.
- Be accountable for your competence to ensure you have the necessary expertise to provide safe care.

Get ready to dive deeper as we explore the key components of nursing competence in the next lesson.

Lesson 3 of 10

Components of competence









Components of competence

Competence in nursing practice is built upon a strong foundation of knowledge, skills, attitudes, and judgment. Each of these components plays a vital role in ensuring culturally safe, competent, and ethical care. The following outlines the key elements that contribute to comprehensive nursing competence. Click on each tab to learn more about the components contributing to nursing competence.



KNOWLEDGE

Clinical knowledge: Understanding of anatomy, physiology, pharmacology, disease processes, evidence-based nursing interventions, holistic and psycho-social health, and determinants of health.

Ethics knowledge: Firm grasp of ethical principles guiding nursing practice, including client rights, informed consent, privacy and confidentiality, and cultural safety, cultural humility, anti-racism, and anti-discrimination.

Legal knowledge: A comprehensive understanding of the laws, regulations, and BCCNM standards that govern nursing practice is essential. This includes clarity on the scope of practice and a thorough awareness of personal accountability within the profession.



SKILLS

Clinical skills: Ability to perform activities like assessments, medication administration, documentation, wound care, and using medical equipment effectively and safely.

Communication skills: Effective verbal and nonverbal communication with clients and members of the health-care team, client and family teaching, active listening, and empathy are crucial for building rapport and understanding client needs.

Critical thinking skills: Applying knowledge to problem-solve, anticipate complications, and prioritize client care needs using clinical judgment.



ATTITUDES

Culturally safe, anti-racist, and anti-discriminatory care: Demonstrating a humble presence, respect for diverse cultural backgrounds, particularly for Indigenous clients, and actively promoting equity in health care.

Professional responsibility: Embracing accountability, acknowledging limitations, providing clear explanations, respecting client rights, respecting professional boundaries, and committing to continuous learning.



JUDGMENT

Clinical judgment: Ability to systematically assess client situations, analyze information, identify problems, and make informed decisions prioritizing client safety and wellbeing.

Check your understanding

The ability to apply knowledge, skills, attitudes, and judgment in practice is called

Which of the following are key components that contribute to nursing competence? Select all that apply.

- a) Understanding of ethical principles and client rights
- b) Ability to perform clinical skills like assessments and wound care
- c) Clinical knowledge of medical/nursing sciences and evidence-based interventions
- d) Exclusive focus on technical skills without considering cultural safety
- e) Prioritizing personal beliefs over professional responsibility

Let's apply nursing competence to a scenario



The scenarios presented in this module have been intentionally simplified to emphasize specific aspects of the content. Please note that they may not encompass all relevant details that should be considered.

Consider this scenario

Bobbie is assigned to Mr. Thomas, a 65-year-old Matsqui First Nation man post-colostomy. Let's see how Bobbie reflects on her knowledge, skills, attitudes, and judgment when providing care for the client.





Competence in clinical practice involves a combination of knowledge, skills, attitudes, and judgment. This process explores how these components come together to ensure culturally safe, competent, and client-centred care.

Knowledge

Bobbie begins by recalling her clinical knowledge of ostomy care, infection prevention, and the importance of skin integrity. She reviews the BCCNM's controls on practice to ensure compliance with standards, limits, and conditions.

Additionally, she seeks to understand Mr. Thomas's perspective on health and healing by consulting with him and following his suggestion to connect with the healer from the Matsqui First Nation to learn about traditional knowledge and holistic approaches to care. Bobbie asks Mr. Thomas if he wants a family or community member present during any part of his care.

Skills

Bobbie demonstrates clinical competence by preparing the necessary supplies, assessing the stoma and surrounding skin, and selecting the appropriate ostomy appliance. She explains the procedure to Mr. Thomas in a clear and empathetic manner detailing what each step will entail and accomplish. Bobbie reaffirms the client's consent throughout the procedure, ensuring his comfort and understanding.

Furthermore, she employs trauma-informed communication techniques to provide care that is culturally safe, respectful, and non-judgmental, while considering any historical experiences of discrimination or mistrust in health-care settings.

Attitudes

Bobbie emphasizes the importance of culturally safe and anti-racist care by taking the time to build rapport with Mr. Thomas. She listens attentively as he shares his cultural beliefs, connection to the land and his home, and traditional healing practices.

Bobbie respects his feelings, provides emotional support, and ensures access to both Western medical care and traditional Indigenous health supports. She actively works to

create a safe space by addressing potential biases and advocating for culturally appropriate resources, including access to an Indigenous patient navigator or Elder if desired.

Judgment

Bobbie uses clinical judgment to assess Mr. Thomas's overall condition, monitor for complications, and ensure his comfort with the care process. Recognizing his difficulty with emptying the pouch and adhering it correctly, she schedules a follow-up with the wound and ostomy nurse. She documents her findings and follows up to address any concerns promptly.

Additionally, Bobbie considers systemic barriers such as geographic access to supplies and follow-up, and previous negative health-care experiences, connecting Mr. Thomas with appropriate community resources.

Reflection

After the shift, Bobbie reflects on the experience. She identifies strengths in her knowledge and communication but also recognizes areas for growth, such as improving her confidence in selecting and applying ostomy appliances.

She also acknowledges the importance of ongoing learning about Indigenous health perspectives, anti-racism in health care, and culturally safe nursing practice.

Bobbie decides to seek mentorship from Indigenous health-care professionals and enroll in further training to enhance her competence in providing equitable, respectful care.

Bringing it all together

By integrating knowledge, skills, attitudes, and judgment, Bobbie provides competent and culturally safe care. This approach ensures that clients like Mr. Thomas receive respectful, effective, and client-centred support tailored to their unique needs and circumstances.

As well, by embracing culturally safe and anti-racist practices, she supports Mr. Thomas's physical health and fosters a trusting, respectful relationship that promotes holistic well-being.

Bobbie's commitment to continuous learning will help her grow in her practice.

Match Bobbie's actions to the correct component of competence. Write knowledge, skills, attitudes or judgment next to the correct statement.

Researches cultural practices relevant to care
Prepares supplies and assesses stoma
Listens attentively and upholds Mr. Thomas's cultural beliefs
Schedules follow-up with wound and ostomy nurse

Bobbie notices that Mr. Thomas seems hesitant when she explains how to empty and reattach the ostomy pouch. She considers his nonverbal cues and the past health-care experiences he's shared. Which action best demonstrates the integration of attitudes and judgment?

- a) She instructs him again using simpler language and leaves written instructions.
- b) She slows down, asks how he feels about managing his care, and asks if he would like support from a care provider in his community.
- c) She reassures him that it's easy and encourages him to practice on his own.
- d) She moves on, assuming he will call if he has questions.

Mr. Thomas expresses discomfort with the ostomy appliance, explaining that a close friend had a negative experience with one and warned him about pain and embarrassment. How should Bobbie respond to ensure culturally safe care? Select all that apply.

- a) Acknowledge Mr. Thomas's concerns and ask if he'd like to talk more about his friend's experience and how it's affecting him.
- b) Reassure him that the medical team knows best and he should trust their judgment.
- c) Provide information about how ostomy care can vary for each individual and invite him to ask questions or express preferences.
- d) Tell him that most people get used to the appliance quickly and there's no reason to worry.
- e) Explore what aspects of the appliance or process are causing him the most discomfort, including emotional or cultural concerns.

f) Offer to involve a wound care nurse or community support person to help address concerns and provide more tailored support

Ready to deepen your understanding? Join us in the next lesson where we will explore gaining and maintaining competence in your practice.

Lesson 4 of 10

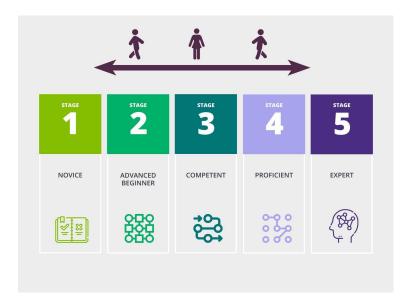
Assessing competence



Your competence is like a garden; it requires care, attention, and the right conditions to thrive. Just as plants grow and adapt to their environment, your skills and knowledge can expand or diminish based on your experiences and learning opportunities. Time, experience, and self- reflection are key factors in gaining and maintaining competence.

Patricia Benner's Novice to Expert Theory (1982) serves as a guide to help you navigate this growth, whether you are planting the seeds of understanding as a student or cultivating a practice as a seasoned nurse.

Just as a gardener observes how plants thrive with sunlight and water, you can reflect on your own growth throughout this journey. Click the + sign to explore Benner's stages in more detail.



Competence on a continuum

Competence evolves as you transition into new roles. Even experienced nurses revert to the novice stage when starting a new position, relying on established procedures and support until they recognize patterns and develop proficiency. Experience is key to building competence in different contexts.

Novice - Just starting, novices rely on structured guidelines and textbook knowledge. They have limited experience and often need instructor support, sticking closely to rules.

Advanced Beginner - Nurses (recent graduates or those new to an area) with some experience can recognize key patterns but still depend on textbook knowledge. They lack confidence and seek advice from more experienced colleagues as they navigate challenges.

Competent - Competent nurses are quicker and more accurate than advanced beginners. They rely on planning and experience to manage client care and still face some anxiety in complex situations. They begin to handle subtleties and prioritize predicting client needs.

Proficient - Proficient nurses see situations holistically and use their experience to adjust plans. They interpret client responses in context and confidently manage complex situations, drawing on insights gained over time.

Expert - Expert nurses intuitively understand situations and prioritize key issues over minor details. They use deep knowledge and experience to respond flexibly to expected and unexpected needs, sharing their insights to drive continuous improvement.

Where am I on the continuum?

Competence is not fixed—it grows as you gain experience and may shift when you enter new roles or settings. This short self-reflection will help you identify where you might currently fall on Benner's Novice to Expert continuum.

There are no right or wrong answers or good or bad stages—just honest self-reflection.

Question 1: Decision-Making

When I encounter an unfamiliar clinical situation, I usually:

- A. Look for clear rules or instructions before acting
- B. Use some experience and ask for advice when needed
- C. Create a care plan and adapt it based on what unfolds
- D. Rely on my intuition and deep understanding to prioritize immediately

Question 2: Pattern recognition

In client care, I am best at:

- A. Following step-by-step instructions
- B. Recognizing common problems I've seen before
- C. Predicting changes in client condition
- D. Sensing subtle cues that others may miss

Question 3: Confidence

When making decisions:

- A.I need frequent reassurance from others
- B.I ask for guidance in unfamiliar situations
- C. I act independently but consult as needed
- D.I make confident, independent decisions and mentor others

Question 4: Handling complexity

When faced with a complex situation:

- A. I feel overwhelmed and unsure where to start
- B. I try to follow a familiar framework
- C. I analyze the situation and modify care as needed
- D. I respond fluidly, drawing from experience to act quickly

Your results

If mostly A's

Novice

You may be in the novice stage of your competence journey. You likely rely on structured procedures and guidance as you build foundational knowledge. Reflection: What areas of practice feel most unfamiliar to you right now? Who can support your learning in those areas.

If mostly B's

Advanced Beginner

You're developing your confidence and starting to recognize patterns. You still rely on support, which is normal at this stage. Reflection: What recurring client situations are helping you build experience? What resources can help you deepen your knowledge?

If mostly C's

Competent

You're functioning independently and managing care efficiently. You're beginning to see the big picture and anticipate needs. **Reflection:** How can you use reflection and mentorship to grow your clinical judgment and move toward proficiency?

If mostly D's

Proficient/Expert

You likely function at a high level of competence, responding to complex situations with insight and intuition. You may also be supporting the growth of others. **Reflection:** How are you sharing your knowledge and experience? What learning keeps you inspired in your practice?



Competence in nursing is not just about what you know—it's about recognizing what you don't and having the humility and responsibility to keep learning.

Keep growing your competence

Based on your responses, you've identified your current stage on Benner's Novice to Expert continuum. This snapshot reflects your position in a specific context and is not static.

- Competence can shift as you enter new roles or gain experience. Use these insights to guide your growth, build confidence, and reflect on how your level of competence shapes your nursing practice.
- Every stage on the competence continuum offers **opportunities for learning and growth**. As your roles and practice settings evolve, so will your competence.
- Use what you've learned today to enhance self-awareness, guide your professional development, and recognize when to seek mentorship or new challenges. Building competence is a journey—stay curious, reflective, and committed.

Let's move forward to look at some strategies for gaining and maintaining competence, ensuring continuous growth and success in your career.

Lesson 5 of 10

Gaining and maintaining competence

Imagine this

Zofia has been a nurse for eight years, working in a busy community clinic. She's confident in her ability to manage common presentations—but lately, new procedures, changing guidelines, and expanded scopes of practice have left her feeling uncertain.

Zofia wonders: "I know I'm experienced... but does that mean I'm still fully competent in today's context?"



Zofia isn't alone. Whether you're just starting out, transitioning into a new role, or decades into practice, competence isn't something you achieve once—it's something you maintain, adapt, and grow over time.

In this lesson, we'll discuss the importance of continuous learning and adaptation in nursing practice, as well as strategies to enhance your competence through professional development, mentorship, and reflective practice. By the end of this lesson, you will gain insights into how to identify areas for growth, ensuring you remain effective and competent in your nursing role.

Gaining competence

Competence in nursing is a critical aspect of delivering safe, competent, and ethical care. It involves acquiring the knowledge, skills, attitudes, and judgment necessary to perform nursing responsibilities safely and proficiently.

Nurses begin practice with a set of entry-level competencies acquired in nursing school. Many nursing activities go beyond entry-level competencies and are learned after graduation. These activities are referred to at BCCNM as advanced activities. Nurses must ensure they have acquired the necessary education, training, and experience before performing these advanced activities.

Example: A newly graduated nurse working in an ICU may be asked to assist with a central line dressing change—an activity they were not taught in school. They must seek additional education, training and/or clinical experience to gain the competencies required before performing this activity.

An employer may assess a nurse's competence to ensure safe care. If a nurse is already performing activities, employers can evaluate existing competence to identify gaps and determine necessary supports. Additional education may include employer-developed or formal post-basic education.

Advanced activities are activities within a nurse's scope of practice that require additional education, training and/or clinical experience that build on the foundational knowledge, skills, and judgment attained during entry-level nursing education.

BCCNM

Maintaining competence

Nurses often specialize or work in settings where they frequently use some skills and rarely use others. This means that while they may be very skilled at certain activities, they might not practice others as often. To stay effective in their roles, nurses need to practice their skills regularly to maintain their competence. If they are asked to perform a skill they have not used in a long time (even if it was part of their entry-level education), they must assess their competence before proceeding.

Your competence is not just about what you know right now—it's about how you continue to learn, adapt, and reflect. This is important because health care is always changing, and nurses need to ensure they are up-to-date with their skills to provide the best care possible.

Example: A nurse who has worked in community health for years may not have retained competence in starting IVs. If required to do so, they must seek retraining before performing the activity.



Not performing activities beyond your competence:

If an employer or colleague asks a nurse to perform an activity, or a nurse is presented with an activity they are not competent to perform, they **must not** perform it. Nurses have a professional responsibility to recognize their limits and advocate for client safety.

Check your understanding

What should a nurse do before performing an advanced activity within their scope of practice that they are not competent in?

- a) Perform the activity under supervision to gain experience.
- b) Rely on their entry-level competencies from nursing school.
- c) Ensure they have acquired the necessary education, training, and experience.
- d) Consult a textbook for a detailed description of how to perform the activity.

Which strategies can help nurses maintain their competence? Select all that apply.

- a) Relying solely on entry-level competencies from nursing school.
- b) Engaging in reflective practice to identify areas for growth.
- c) Avoiding tasks they are not immediately confident in performing.
- d) Collaborating with mentors and peers for feedback and support.
- e) Attending workshops, conferences, or webinars relevant to their practice.

Why is continuous learning so important?



Nursing is a dynamic, ever-evolving profession. Advances in research, technology, policy, and client needs mean that what was considered best practice a few years ago may no longer be current today. As a result, competence in nursing is not static—it must be continuously developed and maintained throughout your career.

- **Client safety and quality care:** Keeping your knowledge and skills up to date ensures you can provide safe, competent, and ethical care in a variety of situations.
- **Changing roles and scopes:** Whether you're transitioning into a new role, expanding your scope of practice, or responding to changing population needs, ongoing learning helps you stay competent.
- **Professional accountability**: BCCNM expect nurses to maintain and demonstrate competence as part of their responsibility to the public.

Reflection

- What strategies have helped you stay competent or grow in your practice? Are there areas where you feel your competence could improve?
- What's one step you could take this month to strengthen your professional growth?

Strategies to maintain competence

Maintaining competence is a key responsibility of being a nurse. Whether it's learning about the latest treatments, brushing up on techniques, or staying on top of new research, there's always something new to know. By staying curious and open to learning, you can keep giving

your client safe, competent, and ethical care while growing in your career. Below are some strategies you can use to maintain your competence.



Professional development

Attend workshops, conferences, or webinars in your area of practice.

Complete courses or certifications relevant to your evolving role.

Stay current with clinical guidelines, practice standards, and legislation.



Mentorship and peer support

Seek out mentors who can share experience, provide feedback, and support your learning.

Collaborate with colleagues to learn from shared experiences and perspectives.

Join communities of practice to stay connected with others in your specialty.



Reflective practice

Regularly reflect on your clinical experiences—what went well, what challenged you, and what you might do differently.

Use journaling or case debriefs to identify learning needs and opportunities for growth.

Link your reflections to professional goals and quality improvement.

By committing to lifelong learning and using strategies like professional development and self-reflection, you can grow and provide safe, competent, and ethical care throughout your career.

In the upcoming lesson, we will explore how these concepts are applied in real-world scenarios.

Lesson 6 of 10

Case Study: Nico



The scenarios presented in this module have been intentionally simplified to emphasize specific aspects of the content. Please note that they may not encompass all relevant details that should be considered.

Knowing when you're not yet competent



Nico faces a critical moment: bridging the gap between theoretical knowledge and real-world practice. How will he rise to the challenge in the fastpaced environment of a rural emergency department? Nico is a newly graduated RN working in a rural emergency department. One evening, he's asked to perform a central line dressing change. While he vaguely remembers reading about the procedure during nursing school, it was not covered in his clinical training.

He has never done it before and hasn't received formal instruction or supervised experience. The charge nurse, however, is putting extreme pressure on Nico to proceed, insisting that the task must be completed immediately due to the department's high workload.

What should Nico do in this situation?

- a) Use a reference guide and attempt the procedure independently
- b) Watch a colleague do it once and try it himself the next time
- Inform the team that he is not yet competent and request training
- d) Proceed with the dressing change since it is within the RN scope

Why is it unsafe for Nico to proceed with the central line dressing change without formal training or supervision?

- a) Because it is outside his professional scope of practice
- b) Because he lacks the competence needed to perform it safely
- c) Because he might get in trouble with his employer
- d) Because he hasn't reviewed the hospital's infection control manual

Imagine you are working in a busy hospital ward. One day, you are asked to administer a medication via an unfamiliar route that you have not practiced during your training. While you recall reading about it, you have never performed the procedure yourself. The senior nurse on duty insists that it needs to be done immediately due to the urgency of the client's condition. How would you handle this situation?

- a) Attempt the procedure based on your recollection from reading about it.
- b) Inform the senior nurse that you are not competent to perform the procedure and they need to find a nurse who is competent.
- c) Refuse to perform the procedure and leave the responsibility to the senior nurse.

d) Proceed with the procedure and inform the senior nurse afterwards if any issues arise.

Reflection

Think about a time when you encountered an activity or procedure you didn't feel fully prepared to perform.

- How did you respond?
- What steps did you take (or could have taken) to ensure client safety and build your own competence?
- How does your response align with your professional responsibility?

Summary

This lesson focused on Nico, a new RN, and the challenges of performing a central line dressing change without proper training. It emphasized the importance of recognizing limitations and seeking guidance in your practice. Remember, prioritizing safety and seeking support are key to professional growth and client care. Here are some key takeaways:

- Acknowledge your limits and recognize when you lack the skills to perform an activity safely.
- Seek guidance and communicate with your team if you need additional education, training or supervision.
- Prioritize client safety by not performing procedures without the required competence.

Let's try another one...

Lesson 7 of 10

Case Study: Dale

Maintaining competence in a changing practice environment



Meet Dale, a nurse with years of experience. When a new colleague highlights an updated guideline Dale missed, how will they respond?

Dale has been a nurse on a general medical unit for over 12 years. They're well respected by colleagues, confident in managing complex cases, and have excellent rapport with clients—especially those with chronic conditions like diabetes and heart disease.

During a recent shift, a newly hired nurse orientating with Dale reviews a client's insulin regimen and says,

"Oh, we don't titrate insulin this way anymore. Didn't you see the new guideline flagged last month?"

Dale pauses. They realize they haven't read the new insulin titration updates. They feel a flicker of self-doubt—*Have I missed something important?* They've been relying on long-standing routines that have always seemed to work.

What should Dale consider first in this situation?

- a) Review the new guideline and check if there is any client harm
- b) Whether the new nurse is overstepping their role
- c) Whether the insulin titration approach they've been using is based on outdated information
- d) Whether it's fair to expect experienced nurses to keep up with everything

Dale decides to look into the new guideline but isn't sure what steps to take next. As a nurse committed to safe, ethical care, what would be the most appropriate next action? Select all that apply.

- a) Ask the new nurse for more details and review the guideline together
- b) Make a note to look it up later and continue with the usual approach
- c) Ask a clinical educator or charge nurse for clarification
- d) Report the new nurse for being a know-it-all

Reflection

Think of a time when you realized something in your usual practice might be outdated or unfamiliar.

- How did you recognize the gap?
- What steps did you take (or could have taken)

Summary

This lesson focused on the challenges of staying competent in a fast-changing health care environment, as illustrated by Dale's experience with new insulin titration guidelines. Here are some key takeaways:

- Stay informed by regularly reviewing updated guidelines to ensure safe and effective practice.
- Collaborate with colleagues to share and discuss new information for a deeper understanding.
- Reflect on your practice to identify knowledge gaps and take steps to address them.
- Continuous learning and adaptability are key to maintaining your competence in the ever-changing world of health care.

Great job! Let's do one more.

Lesson 8 of 10

Case Study: Merritt

Competence beyond training—what comes next?



Merritt questions her competence to apply recent training on trauma-informed care. Can she ensure her actions reflect cultural safety and build trust with Alex and his family?

Merritt is a nurse working in a general medical unit in northern B.C. Their unit recently admitted Alex, a 19-year-old Gitanmaax client who was flown in from his remote community for treatment of complications related to Type 1 diabetes.

Alex appears quiet and withdrawn. He avoids eye contact, answers questions with a nod or "I guess," and doesn't speak much unless prompted. Merritt notices that Alex's mother and

grandmother, who accompanied him, speak in Gitksan when discussing his care. They seem hesitant during the discussions and ask few questions.

Merritt begins the morning assessment but feels unsure about how to approach the family in a way that acknowledges their cultural identity and historical context. They reflect on a recent workshop about culturally safe and trauma-informed care—but realize they haven't deeply integrated that learning into daily practice.

Merritt thinks:

"I want to be respectful, but I don't feel fully confident that I know how to provide culturally safe and trauma-informed care. Am I actually competent in this area? And if not, what should I do about it?"

What is the first step Merritt should take to assess their competence in this situation?

- a) Ask a colleague to take over care of the client
- b) Continue providing care and assume the family will ask questions if they need help
- c) Reflect honestly on their current knowledge, attitudes, and communication approach
- d) Review the client's chart and follow routine procedures as usual

What actions can Merritt take to assess and strengthen their competence in this situation? Select all that apply.

- Reflect on what they've learned in training and how competent they feel applying it now
- Seek guidance from an Indigenous health liaison or Elder from the community
- c) Ask respectful, open-ended questions to understand the client and family's perspectives
- d) Assume they're competent because they completed the required training
- e) Identify specific areas where they need more learning and plan how to address them

f) Avoid addressing cultural concerns unless the family brings them up

Match each concept related to continuous learning in nursing (engaging in reflective practice, using evidence-based resources, participating in workshops, self-assessment, seeking mentorship) with an example of how Merritt can apply it in their practice. This will help you reflect on ways to enhance professional growth. Write the correct response beside each statement.

Merritt assesses their current understanding of culturally safe care
and identifies areas where they feel uncertain.
Merritt seeks advice from an Indigenous health liaison or Elder to
better understand Alex's cultural context.
better understand Alex's Cultural Context.
Merritt attends a training session on trauma-informed care to deepen
their understanding and practical application.
Merritt journals about their interactions with Alex and his family to
identify what went well and what could be improved.
Merritt reviews clinical guidelines and research on culturally safe
practices to inform their approach to Alex's care.

Reflection

Merritt is taking time to reflect on their readiness to care for Indigenous clients in a culturally safe and trauma-informed way.

- How would you assess your current competence in this area?
- What would help you grow your skills, knowledge, or competence?
- Who or what could support your learning?

Summary

This lesson emphasized Merritt's approach to providing culturally safe and trauma- informed care to Alex, an Indigenous client. A critical aspect of this process is assessing one's competence in delivering such care. Self-reflection is essential to evaluate your competence. Remember, continuously assess your competence to ensure safe, competent, and ethical care.

- Reflect on your knowledge and identify areas where your understanding may be lacking.
- Seek support from experts, such as Indigenous health liaisons or Elders, for guidance.
- Ask open-ended questions to foster dialogue and understand clients' and families' perspectives.
- Identify learning gaps and create a plan to address areas needing further education.

As you wrap up this module, take a moment to reflect on what you've learned. Get ready to test your knowledge and solidify your understanding with the final quiz!

Lesson 9 of 10

Quiz

Welcome to the final quiz section! This is an opportunity to test your understanding of the material covered. Remember, this is a chance to reinforce your learning and identify any areas that may need further review.

Question

01/06

Which of the following best describes nursing competence?

- a) Performing technical activities proficiently
- Having knowledge, skills, attitudes, and judgment necessary to provide safe, effective nursing care
- c) Memorizing medical terminology
- d) Following standard procedures and applying critical thinking

Question

02/06

How does a nurse's competence level affect their scope of practice?

- a) Competence is fixed and has no impact on scope of practice
- b) As a nurse's competence grows or decreases, it can expand or limit the activities they are allowed to perform
- c) Competence only matters for newly graduated nurses;
 experienced nurses do not need to reassess their skills
- d) A nurse's scope of practice is solely determined by their nursing regulation

Question

03/06

Match each nursing competence area (knowledge, skills, attitudes, judgement) with an example of that area. Choose the best option and write it beside each statement.

In-depth understanding of topics such as nursing sciences and cultural safety
Performing accurate client assessments and administering medications safely
Demonstrating respect for diverse cultural backgrounds
Systematically assess client situations, analyze information, and identify problems

Question

04/06

Which of the following actions can help in recognizing and addressing competence gaps in nursing practice? Select all that apply.

- a) Ignoring feedback from colleagues and clients
- b) Regularly reflecting on personal practice and seeking mentorship
- c) Engaging in continuous professional development opportunities Participating in appropriate training
- d) Relying solely on past experiences without updating knowledge

Question

05/06

Which of the following actions contribute to maintaining nursing competence? Select all that apply.

- a) Relying solely on past knowledge without seeking new learning opportunities
- b) Regularly reviewing and following updated clinical guidelines
- c) Engaging in continuous professional development activities

d) Avoiding collaboration with other health-care professionals Participating in reflective practice to evaluate personal performance

Question

06/06

You are struggling to use a new electronic health record (EHR) system, which is causing delays in your documentation. What should you do first to address this challenge?

- a) Complete an inservice or additional training
- b) Avoid using the EHR system until you feel more confident
- c) Request additional responsibilities to demonstrate your overall competence
- d) Rely on colleagues to complete your EHR tasks while you observe

Lesson 10 of 10

Summary

This module on nursing competence explored the essential elements that define a competent nurse, emphasizing self-reflecting and assessment, continuous learning. It highlights the importance of self-assessment, collaboration, and understanding your scope of practice to ensure safe, competent, and ethical care.

- **Define nursing competence**. Understand the integration of knowledge, skills, attitudes, and judgment in practice.
- **Recognize competence levels**. Identify when you are ready or not ready to perform specific nursing tasks.
- Acknowledge the impact of competence. Realize how your abilities influence your scope of practice and patient safety.
- Engage in reflective practice. Regularly assess your experiences to identify strengths and areas for improvement.
- **Seek guidance when needed**. Consult with mentors, colleagues, or regulatory bodies for support in challenging situations.
- **Commit to continuous learning**. Stay updated on guidelines, policies, and advanced skills to adapt to evolving healthcare demands.

By embracing continuous growth and collaboration, you can confidently navigate the complexities of nursing and provide safe, competent, and ethical care.

Your thoughts please!

To help us create resources that meet your needs, please complete the 2-minute survey below to let us know what you think. Your feedback will help us improve this and future resources we create for our learners. Thanks in advance!

Take the survey

Answer key

Page 10

The ability to apply knowledge, skills, attitudes, and judgment in practice is called **competence**.

Which of the following are key components that contribute to nursing competence? Select all that apply.

- Understanding of ethical principles and client rights
- Ability to perform clinical skills like assessments and wound care
- Clinical knowledge of medical/nursing sciences and evidence-based interventions
- Exclusive focus on technical skills without considering cultural safety
- Prioritizing personal beliefs over professional responsibility

Page 13

Match Bobbie's actions to the correct component of competence:

Knowledge	Researches cultural practices relevant to care
Skills	Prepares supplies and assesses stoma
Attitudes	Listens attentively and upholds Mr. Thomas's cultural beliefs
Judgment	Schedules follow-up with wound and ostomy nurse

Bobbie notices that Mr. Thomas seems hesitant when she explains how to empty and reattach the ostomy pouch. She considers his nonverbal cues and the past health-care experiences he's shared. Which action best demonstrates the integration of attitudes and judgment?

- She instructs him again using simpler language and leaves written instructions.
- She slows down, asks how he feels about managing his care, and asks if he would like support from a care provider in his community.
- She reassures him that it's easy and encourages him to practice on his own.
- She moves on, assuming he will call if he has questions.

Mr. Thomas expresses discomfort with the ostomy appliance, explaining that a close friend had a negative experience with one and warned him about pain and embarrassment. How should Bobbie respond to ensure culturally safe care? Select all that apply.

- Acknowledge Mr. Thomas's concerns and ask if he'd like to talk more about his friend's experience and how it's affecting him.
- Reassure him that the medical team knows best and he should trust their judgment.
- Provide information about how ostomy care can vary for each individual and invite him to ask questions or express preferences.
- Tell him that most people get used to the appliance quickly and there's no reason to worry.
- Explore what aspects of the appliance or process are causing him the most discomfort, including emotional or cultural concerns.

• Offer to involve a wound care nurse or community support person to help address concerns and provide more tailored support.

Page 24

What should a nurse do before performing an advanced activity within their scope of practice that they are not competent in?

- Perform the activity under supervision to gain experience.
- Rely on their entry-level competencies from nursing school.
- Ensure they have acquired the necessary education, training, and experience.
- Consult a textbook for a detailed description of how to perform the activity.

Which strategies can help nurses maintain their competence? Select all that apply.

- Relying solely on entry-level competencies from nursing school.
- Engaging in reflective practice to identify areas for growth.
- Avoiding tasks they are not immediately confident in performing.
- Collaborating with mentors and peers for feedback and support.
- Attending workshops, conferences, or webinars relevant to their practice.

Page 28-29

What should Nico do in this situation?

- Use a reference guide and attempt the procedure independently
- Watch a colleague do it once and try it himself the next time
- Inform the team that he is not yet competent and request training
- Proceed with the dressing change since it is within the RN scope

Why is it unsafe for Nico to proceed with the central line dressing change without formal training or supervision?

- Because it is outside his professional scope of practice
- Because he lacks the competence needed to perform it safely
- Because he might get in trouble with his employer
- Because he hasn't reviewed the hospital's infection control manual

Imagine you are working in a busy hospital ward. One day, you are asked to administer a medication via an unfamiliar route that you have not practiced during your training. While you recall reading about it, you have never performed the procedure yourself. The senior nurse on duty insists that it needs to be done immediately due to the urgency of the client's condition. How would you handle this situation?

- Attempt the procedure based on your recollection from reading about it.
- Inform the senior nurse that you are not competent to perform the procedure and they need to find a nurse who is competent.
- Refuse to perform the procedure and leave the responsibility to the senior nurse.
- Proceed with the procedure and inform the senior nurse afterwards if any issues arise.

Page 30

What should Dale consider first in this situation?

- Review the new guideline and check if there is any client harm
- Whether the new nurse is overstepping their role
- Whether the insulin titration approach they've been using is based on outdated information
- Whether it's fair to expect experienced nurses to keep up with everything

Dale decides to look into the new guideline but isn't sure what steps to take next. As a nurse committed to safe, ethical care, what would be the most appropriate next action? Select all that apply.

Ask the new nurse for more details and review the guideline together

- Make a note to look it up later and continue with the usual approach
- Ask a clinical educator or charge nurse for clarification
- Ignore the comment and assume their approach is fine
- Report the new nurse for being a know-it-all

Page 35-36

What is the *first* step Merritt should take to assess their competence in this situation?

- Ask a colleague to take over care of the client
- Continue providing care and assume the family will ask questions if they need help
- Reflect honestly on their current knowledge, attitudes, and communication approach
- Review the client's chart and follow routine procedures as usual

What actions can Merritt take to assess and strengthen their competence in this situation? Select all that apply.

- Reflect on what they've learned in training and how competent they feel applying it now
- Seek guidance from an Indigenous health liaison or Elder from the community
- Ask respectful, open-ended questions to understand the client and family's perspectives
- Assume they're competent because they completed the required training
- Identify specific areas where they need more learning and plan how to address them
- Avoid addressing cultural concerns unless the family brings them up

Match each concept related to continuous learning in nursing with an example of how Merritt can apply it in their practice. This will help you reflect on ways to enhance professional growth.

Self-assessment	Merritt assesses their current understanding of culturally safe
	care and identifies areas where they feel uncertain.
Seeking mentorship	Merritt seeks advice from an Indigenous health liaison or Elder to
	better understand Alex's cultural context.
Participating in	Merritt attends a training session on trauma-informed care to
workshops	deepen their understanding and practical application.
Engaging in reflective	Merritt journals about their interactions with Alex and his family
practice	to identify what went well and what could be improved.
Using evidence-based	Merritt reviews clinical guidelines and research on culturally safe
resources	practices to inform their approach to Alex's care.

Page 38-40

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01/06

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03/06

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	cultural safety
Skills	Performing accurate client assessments and administering
	medications safely
Attitudes	Demonstrating respect for diverse cultural backgrounds
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	identify problems

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Thank you for completing this module! Want to learn more? Check out one of the other modules in the Scope of Practice Learning Series.

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Thank you for completing this learning module.

Please continue to apply this knowledge
to your nursing practice.