## Portfolio composition

The portfolio demonstrates the required competence proficiency level of the roles acquired during the practical learning period. The portfolio consists of 80 pages maximum, excluding the appendices (Arial 11, interline spacing 1).

In order to get access to the CGI, the portfolio must include **evidence for all roles** and meet the evidence matrix criteria.

The following parts are included in the portfolio:

|  |
| --- |
| * Title page
* Table of contents
* Introduction
* A chapter per role, including:
	+ A short description of the role in question
	+ Evidence. Each piece of evidence contains the following parts:
		- Theoretical substantiation of your actions
		- Feedback
		- Reflections
	+ Summarizing self-assessment
* Reflection on your personal learning goals
* Appendices, including:
	+ Orientation plan
	+ CDP
 |

# Orientation plan parts

**Competence card:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Roles**  | **Caregiver** | **Director** | **Designer** | **Coach** | **Professional** |
| **Competences** | **KC 1** | **KC 2** | **KC****3** | **KC 4** | **KC 5** | **KC 6** | **KC 7** | **KC 8** | **KC 9** | **KC 10** | **KC 11** | **KC 12** |
| Bachelor 4 |  |  |  |  |  |  |  |  |  |  |  |  |
| Bachelor 3 |  |  |  |  |  |  |  |  |  |  |  |  |
| Junior 2 |  |  |  |  |  |  |  |  |  |  |  |  |
| Junior 1 |  |  |  |  |  |  |  |  |  |  |  |  |

1. For each KC, indicate in the above competence card at which level you are by checking the right box. To this end, use the table including professional roles, professional tasks, and learning outcomes in this module.

2. At the beginning stage, substantiate why you chose a certain competence card level. Think of what you learned from your education and work placement or placements prior to this practical learning period.

**Orientation activities per role:**

|  |  |
| --- | --- |
| **Activities:** | **Week/date:** |
|  |  |

**SWOT analysis:**

|  |  |
| --- | --- |
| **Your strong points** | **Your weak points** |
| * *What are you good at?*
* *What contributes to your success?*
* *Why did you start these studies and what were your motives?*
* *Which motives contribute to your success?*
* *What has been your best performance so far?*
* *How can you explain your success or successes?*
 | * *What are you weak at?*
* *What gives you a lot of trouble when it comes to you as a person?*
* *Which bad experiences have you had and to what degree do these partially explain your weaknesses?*
* *What would you like to be much better at?*
* *In what way is your performance influenced by your weaknesses?*
 |
| **Opportunities for your practical learning period**  | **Threats to your practical learning period** |
| *This involves developments, events and influences that are not related to you as a person, but might have a positive influence on your development or practical learning period.*  | *It involves developments, events and influences that are not related to you as a person, but might have a negative influence on your development or practical learning period.* |

**Personal learning goals:**

**Formulate learning goals in a SMARTI way**

**S** Specific *be specific about what you want to develop*

**M** Measurable *the result is measurable*

**A** Activating *formulate in the form of activities, an action plan*

**R** realistic *the learning goals must be realistic given the circumstances*

**T** Time *include a time plan in the action plan*

**I** Inspiring *are you motivating, what attracts you?*

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# Competence Development Plan (CDP) per role

|  |
| --- |
| **Role** |
| Starting situation |
| Desired end result: learning outcome or outcomes |
| Learning goal or goals |
| Activities |
| Evidence (how can you demonstrate you meet the desired end level) |
| Whom do you want feedback from and related to which parts |
| Planning  |

###  Evidence matrix

A portfolio allows the assessors to get an impression of the acquired competences.

Several aspects are important when testing this evidence: *authenticity, relevance, topicality, quantity, variation, feedback, and reflection.*

**Authenticity:** The degree to which evidence accurately represents the experience and expertise of the student, in other words: has it actually been done by the student?

**Relevance:** The degree to which the evidence covers the most important elements of the competence. The more specific, the more relevant.

**Topicality:** The degree to which the evidence reflects the competence level of the period.

**Quantity:** Is the amount of evidence sufficient to assess the competence?

**Variation:** Has the competence been proven in various contexts?

**Feedback**: Is the content of the feedback of the coaches sufficient to assess the competence level of the.

**Reflection**: Does the evidence sufficiently demonstrate the current reflection level of the student related to the practical learning period?

The aspects of each item of the evidence matrix are assessed with 2 scoring options, namely:

+ : Sufficient

- : Insufficient

# The STARRT methodology

**Situation**

Describe a concrete professional situation/several situations as clearly as possible

* What was the situation?
* Where did the situation take place?
* When did the situation take place?
* What happened exactly?
* Who were involved?

**Task**

Precisely describe your task or position in that situation

* What was your task?
* What was expected of you?
* What did you expect from yourself?
* What did you think you had to do?
* What did you want to achieve?

**Activities**

Concretely describe the activities in that situation

* What was your approach?
* What did you do exactly?
* What did you say?
* How did the others behave?
* How did you respond to the behaviour of others?

**Result**

Describe what you achieved in that situation

* What are the results?
* Which theoretical substantiation was applied?

**Reflection**

Reflect on your own actions in that situation

* How do you look back at the situation?
* What helped you?
* What obstructed you?
* What went well?
* What did you learn?
* What are you dissatisfied with?
* What do you want to enforce?
* What do you need for that purpose?

**Transfer**

Describe how you can apply what you learned to different situations.

* To which situations will you apply it?
* And how will you apply it?

# Appendix 4: CGI example questions

Questions:

* In what way did you present yourself in the role of a director, caregiver, etc. (mention a concrete situation)?
* How did you substantiate your actions (using which standards, guidelines, methodologies, discussion models, etc.)?
* In what way can you guarantee the quality of care in your department?
* What is the role of EBP in your department, what do you think of that? How important do you find it?
* Which vision were your actions based on? How did you get to this vision? What is the vision of the department and how was this reflected in the department?
* Give an example of a situation in which you acted in a methodical way
* In case no nursing plans are used in a department, what opinion does the student have about this? What is the added value of a nursing plan?
* What makes a situation a complex situation?
* How did you maintain in control of your learning process?
* How were you able to distinguish between main and side care issues (prioritize)?
* Give an example of a situation in which you are able to think in a cross-departmental way (helicopter view).
* How do you handle resistance (e.g. in the role of caregiver and director)?
* How do you connect to clients? Can you substantiate this?
* How did you develop a critical viewpoint? Give an example.
* Mention a difficult situation that you encountered, what were your moments of choice? How do you look back at it? How would you do it differently (transfer)?
* Which ethical dilemmas did you encounter? What were your moments of choice?
* What are the boundaries of the nursing domain? Is there much overlap with other disciplines (domains)?
* Can you give an example of a situation in which you handled proactively?
* Can you give an example of a situation in which you handled creatively?

# Appendix 5: Cultural Sensitivity learning outcomes

**Caregiver**

1. The nurse enters into a professional relationship, in a culturally sensitive way, with care recipients of a different ethnic and/or cultural background in a way that they can communicate equally.

2. The nurse is able to recognize and professionally apply various models\* to explain illnesses, health, and care requests that direct the experience and presentation of symptoms.

* The student indicates how he/she adjusts care to the cultural background of the patient.
* If communication with the patient is difficult, the student uses or develops possibilities for support.
* The student applies theory about the way culture plays a role in a care situation (nursing plan).
* The student makes observations related to non-verbal communication explicit (voice volume, tone, intonation, reflections, willingness to share thoughts and feelings).
* The student collects cultural data, which are important to the execution of care, in a culturally sensitive way.
* The student provides the patient with information material that matches the language and culture of the patient.

**Director**

3. The nurse enters into a professional relationship, in a culturally sensitive way, with family members and others in the social support system of the patient with a different ethnic and/or cultural background, allowing them to communicate equally.

4. The nurse uses networks and organizations that are important to the social environment of the care recipient for the purpose of continuation and coordination of care.

* The student applies theory about the way culture plays a role in care organizations (care process).
* The student involves other disciplines in creating sympathy for the cultural background of patients.
* The student gets information from third parties (family, social support system) about the health behaviour of the patient, the perception of illness and health and about treatment options.

 **\*** From: Professionele verpleegkunde (translated: Professional nursing)/Arets and Vaessen:

The relationship between nursing models and theories:

In short it can be stated that all theories are models, but models are not necessarily theories. The nursing relationship mainly involves the fact that a model acts as a means for further development of theories.

A model is a symbol or a representation of reality, where important characteristics are: reduction, accentuation, transparency, and perspectivity.

A theory is considered a combination of logically connected, non-conflicting and verifiable claims. Theories can be used to describe, explain and predict reality.

**Designer**

5. The nurse contributes to the development of methods, techniques and systems in order to perform care in a culturally sensitive way and bring about change.

6. The nurse works in a project-based and programme-based way, taking into account cultural aspects, allowing change in care programmes, quality care and nursing policy to come about.

* The student assesses to what degree the work placement institution provides a structure and the means that are necessary to meet patient needs in the fields of culture and language.
* The student gives advice about the way policy regarding culturally sensitive care can be improved.

**Coach**

7. The nurse detects differences in views between colleagues with a different ethnic and/or cultural background, discusses those and consults.

8. The nurse transfers experiences with care recipients of different cultures and/or ethnic backgrounds to colleagues.

* The student makes culturally specific values and habits discussible during consultation moments.
* The student shows the importance of reflection on a cultural background by demonstrating example behaviour.
* The student is able to contribute to the nursing team at the work placement in the field of culturally sensitive care.

**Professional**

9. The nurse substantiates culturally sensitive actions based on the professional code and ethical codes.

10. The nurse demonstrates a (life-long) commitment to reflection on, and evaluation of, ethnicity and culture when performing the profession related to contacts with care recipients, their environments and colleagues with various cultural backgrounds.

* The student recognizes the own values and norms as different from the ones of patients
* The student recognizes social inequality in the care sector and makes intervention proposals in order to reduce/ prevent inequality.

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