

## #2

**COMPLETE**

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Page 1: CRPNM CCP Audit 2022

### Q1

Please enter the assigned ID number that was sent to you in your e-mail from the CRPNM here:

DO NOT put any other identifying information on this form. **1234**  
Auditors will be blind to your identity.

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### Q2

**ACCEPT**

DECLARATION:By clicking on the check box below I declare that I have engaged in a process of self-assessment and the statements contained in this Continuing Competence Program Audit are true and correct to the best of my knowledge.

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Page 2: Part A. Self-Assessment Requirement

### Q3

**ACCEPT**

DECLARATION:By clicking on the check box below I declare that as one of the requirements of the CRPNM Continuing Competence Program that I will maintain a professional portfolio.

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**Q4**

What tool(s) did you use to complete and document your self-assessment? (check all that apply)

Self-Assessment tool and competency examples in CRPNM Continuing Competence package  
,  
"Standards of Psychiatric Nursing Practice",  
Employer Performance Evaluation,  
"Registered Psychiatric Nurse Regulators of Canada: National Entry-Level Competencies for Registered Psychiatric Nurses"  
,  
RPN Scope of Practice in Manitoba,  
A practice direction or practice guideline

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**Q5**

What tool(s) did you use to develop your learning plan?

I used the learning plan in the CRPNM Continuing Competence Package

**Q6**

How many learning objectives did you work on this year?

2-4

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Page 5: REFLECTIVE PRACTICE REQUIREMENT: PART 1

**Q7**

Please identify one learning objective you worked on this year:

To improve and update my skills in suicide risk assessments.

**Q8**

AREA OF PSYCHIATRIC NURSING COMPETENCE TARGETED: Please check one (1) to focus on for the following questions:

Assessment

**Q9**

Modes of Learning/Planned Strategies: How did you meet your area targeted?

Professional Activities (serving on boards or committees)  
,  
Supervision (includes mentorship programs or preceptorships for students)  
,  
Conferences/Courses/Workshops

Page 6: REFLECTIVE PRACTICE REQUIREMENT: PART 2

**Q10**

Please describe the way(s) in which you met your educational goals:

**Assessment,**

Other (please specify):

I attended a two day CAMs intensive training work shop. I attended the following webinars: 1. Suicide Prevention: Latest Updates, Resources, Books. 2. Attachment Based-Family Therapy: a family safety net approach to suicide treatment. I have been on a working committee conducting a literature review of best practice guidelines for suicide risk assessment. Reading "Managing Suicidal Risk, A Collaborative Approach to CAMS-care book".

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**Q11**

How did you know if you met your educational goals; e.g. how did it change your day-to-day practice as a result? Or, how did it enhance your competency you identified previously? Please feel free to use anonymous examples from practice.

**Assessment,**

Other (please specify):

I have been able to incorporate standardized assessment tools to use during my assessment with clients. These tools are used each session at the beginning and end. They promote clinician and client assessment of presenting risk, identify drivers for suicidal thoughts/feelings, and work through these drivers in a therapeutic manner with the goal of decreasing the risk to self. The documents help me determine when emergency services are required, and when I am unable to manage the risk in session. I feel they have helped me recognize waxing and waning of suicidal ideation in a concrete way. Implementing these tools has enhanced my understanding of my clients' presenting symptoms. Prior to using these tools my assessments may have been vague, I felt unclear about actual risk and how to assess the contributing factors to the risk identified. I noticed previously I may have over focused on protective factors, and may have missed targeting the factors increasing the risk for suicide. I had previously been taught contracting for safety was a useful intervention to manage someone's risk to self, while learning the CAMS model I recognize there are more useful interventions to mitigate risk. The model ends the sessions with re rating the suicidal risk. This has helped me recognize the value and importance of properly assessing to promote therapeutic interventions that match the current risk in that moment. Implementing the standardized risk assessment has improved client engagement in the process. Often clients will complete the tool and identify what they want to focus on to manage their risk during that session. Implementing the CAMs model has improved my assessment skills and has helped me engage the client in the assessment process, I feel that has increased client autonomy and engagement in the assessment process.

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**Q12**

**Yes**

Was your educational goal met?

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**Q13**

If your educational goal was met, please describe the ways in which you plan to implement this in your practice as a RPN:

**Assessment,**

Other (please specify):

I plan to continue implementing the standardized risk assessment, maintaining my knowledge on best practices with suicidal risk. The model has different forms for different situations - clients not willing to engage in treatment, creating a safety plan, forms for working through problems in sessions. I recognize having a focused assessment in sessions regularly has helped me to slow down and assess the situation vs. jump ahead. I plan to continue to use my assessment skills every session vs. assuming I am aware of the risk based on past presentations.

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**Q14**

If your goal was not met, or you recognize that your require further education to meet this goal, please describe the ways you plan to meet this in the coming year:

**Respondent skipped this question**

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Page 10: Standards Of Psychiatric Nursing Practice

**Q15**

Choose one of the following Standards you met within the past year:

**Standard 3: Professional Responsibility and Accountability: practises in accordance with all relevant legislation and regulation including the Standards of Psychiatric Nursing Practice.**

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**Q16**

Using the standard you selected, describe how you met this in your practice as an RPN:

**Standard 3: Professional Responsibility and Accountability: practises in accordance with all relevant legislation and regulation including the Standards of Psychiatric Nursing Practice.**

,

Other (please specify):

I have reviewed the Practice Direction: Performing a Psycho-social Intervention. I refer to this practice direction to further identify when/if I need further collaboration within my multidisciplinary team, or crises resources. When doing case reviews I will review this practice direction to reflect on what zone I am in with that client to determine if further clinical support is required, assess if I am working within my personal competencies and identifying how I know what zone I am in and why. I have used clinical consultation at times if it feels unclear which zone I am working in. This practice direction helps me reflect in the moment and after the fact on interventions implemented. I keep this practice direction posted in my office, and have used it at times with clients identifying we are in a higher risk moment and we need to match appropriate interventions to the current risk.

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