



South African Nursing Council
(Under the provisions of the Nursing Act, 2005)

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EXIT LEVEL OUTCOMES – POSTGRADUATE DIPLOMA IN CRITICAL CARE NURSING: ADULT

TABLE 1: FOUNDATIONAL EXIT LEVEL OUTCOMES WITH ASSOCIATED ASSESSMENT CRITERIA

Exit level outcomes	Associated assessment criteria
<p>1. Practice within the ethical-legal parameters of the nursing profession, and resolve professional-ethical dilemmas by using decision-making and moral reasoning models.</p>	<p>1.1 Critical decision making and moral reasoning models are used to guide clinical practice and resolve professional-ethical dilemmas within Critical Care settings.</p> <p>1.2 The relevant latest legislation, policies, protocols, regulations, guidelines, directives and applicable ethics regarding Critical Care are applied in practice.</p> <p>1.3 The professional-ethical and legal frameworks guide the Critical Care Specialist practice.</p> <p>1.4 Practice and facilitate advocacy for the rights and best interests of the critically ill patient.</p> <p>1.5 Ethical codes, professional accountability and responsibility, confidentiality and standards for the practice of Critical Care nursing are interpreted and applied consistently and correctly.</p>
<p>2. Apply knowledge of basic research methodology in the appraisal of articles in the field of Critical Care.</p>	<p>2.1 Academic writing skills are demonstrated in research reports.</p> <p>2.2 Research articles in the field of Critical Care and healthcare are appraised through the application of basic knowledge of research methodology.</p> <p>2.3 Qualitative, quantitative and mixed methods research designs are accurately differentiated.</p> <p>2.4 Evidence-based practice of research findings are integrated for safe, effective and efficient practice.</p>

TABLE 2: CORE EXIT LEVEL OUTCOMES WITH ASSOCIATED ASSESSMENT CRITERIA

Exit level outcomes	Associated assessment criteria
<p>The Critical Care Nurse Specialist will:</p>	
<p>3. Demonstrate advanced knowledge of people-centered critical care of patients in a variety of Critical Care units, to promote health outcomes.</p>	<p>3.1 Health outcomes are promoted through the demonstration of people-centred Critical Care nursing in a variety of critical care units.</p> <p>3.2 Epidemiological data pertaining to Critical Care are interpreted and used to plan a community awareness programme/campaign.</p> <p>3.3 Legislation, policies and guidelines relevant to Critical Care are identified and debated and recommendations communicated to authorities.</p> <p>3.4 Strategies are identified to ensure that the human rights of vulnerable populations in Critical Care units are respected.</p> <p>3.5 Best available evidence is used to plan a healthy environment in Critical Care units.</p> <p>3.6 The influence of the psychosocial, political, cultural and economic developments within the country on the provision of Critical Care are debated, and recommendations communicated to authorities with the ultimate goal of improving Critical Care nursing.</p> <p>3.7 Suitable injury/ condition-specific assessment techniques are explored and debated to improve health outcomes of critically ill patients.</p> <p>3.8 Biomedical, pharmacology and social sciences are used to explain interpretations of health assessment findings and management of conditions affecting critically ill patients.</p> <p>3.9 Subjective and objective assessment findings are interpreted and explained in order to make nursing diagnoses.</p> <p>3.10 Comprehensive individual, family-centred treatment plans are based on assessment findings and standardised national and contextually appropriate guidelines in the Critical Care setting.</p>

	<p>3.11 Care priorities are established in relation to the critically ill patient’s problems and severity, with due consideration of system and practice challenges.</p> <p>3.12 The health status of the critically ill patient is continuously and frequently monitored, interpreted and actions are planned within an inter-professional team.</p> <p>3.13 The rationale and safety measures of technological devices used in the Critical Care environment are explained and debated.</p> <p>3.14 Principles of health dialogue are used to communicate with the patient, families and the inter-professional team.</p> <p>3.15 Care pathways and the referral system are explored and debated.</p> <p>3.16 Transportation of critically ill patients are discussed and appropriately planned for.</p> <p>3.17 National core standards are used to audit the records of critically ill patients.</p> <p>3.18 Accuracy of data pertaining to Critical Care patients is evaluated.</p>
<p>4. Render and coordinate comprehensive Critical Care nursing care to patients in a variety of critical care units, in order to promote health outcomes.</p>	<p>4.1 Health outcomes are promoted through rendering and coordinating specialist Critical Care nursing in a variety of Critical Care units.</p> <p>4.2 Community awareness campaigns are based on epidemiological data pertaining to Critical Care.</p> <p>4.3 A healthy Critical Care environment which is based on best available evidence is created and sustained.</p> <p>4.4 Subjective and objective assessments are performed and critically analysed/ interpreted.</p> <p>4.5 Comprehensive individual, person-centred treatment plans are executed and coordinated competently within an inter-professional team.</p> <p>4.6 The severity of a patient’s condition is calculated and classified according to standardised tools, and optimal interventions are executed within the limitations of the system and practice.</p>

	<p>4.7 The health status of the patient is continuously monitored, interpreted and appropriate interventions implemented in collaboration with the inter-professional team.</p>
<p>5. Apply scientific knowledge and principles of the systematic review and guideline development process, in order to evaluate and review the standard of guidelines used in Critical Care clinical practice.</p>	<p>5.1 Current evidence-based guidelines used in Critical Care practice are evaluated and reported at predetermined times to improve health care.</p> <p>5.2 Academic and professional writing skills are demonstrated in reports and guidelines.</p> <p>5.3 Research questions are formulated according to the PICO and other formats.</p> <p>5.4 Evidence-based practice, theories or models on Critical Care nursing are critically appraised and best practice guidelines are adopted to improve health care service delivery.</p> <p>5.5 Databases are searched by using <i>Boolean</i> and other information search strategies.</p>
<p>6. Apply principles of evidence-based care to ensure quality patient care and safety in Critical Care nursing.</p>	<p>6.1 Quality of patient care and safety in Critical Care settings are promoted by implementing evidence-based practice.</p> <p>6.2 Use systematic reviews to improve client experience and outcomes in Critical Care health services.</p> <p>6.3 Quality audits aimed at improving patient services are performed at predetermined times.</p> <p>6.4 Critique, develop and implement clinical standards for critically ill patients.</p> <p>6.5 Patient outcomes in the Critical healthcare services, including quality patient care and safety, are continuously monitored.</p>
<p>7. Implement strategies to develop self and peers by promoting self-directedness through a process of precepting and mentoring.</p>	<p>7.1 Precepting and mentoring processes are applied to develop self and peers.</p> <p>7.2 Activities towards enhancing Continuous Professional Development (CPD) are evident.</p> <p>7.3 Thinking/reasoning processes of self and others are developed through facilitation of learning.</p> <p>7.4 Learning theories are applied in own development and the development of others.</p> <p>7.5 A positive learning environment is created by supporting peers and novices.</p>

	<p>7.6 Academic networks are established and used to sustain personal development.</p>
<p>8. Manage Critical Care nursing services by implementing effective medico-legal norms, practices and standards within an inter-professional team.</p>	<p>8.1 Critical Care health services are managed according to medico-legal norms, practices and standards within an inter-professional team.</p> <p>8.2 Benchmarks and best practices are accessed and used to develop indicators for quality and cost effectiveness in Critical Care nursing.</p> <p>8.3 Appropriate leadership styles are demonstrated within the Critical Care inter-professional team.</p> <p>8.4 Shared decision making opportunities regarding Critical Care health services are created and documented.</p> <p>8.5 Resources are mobilized and utilized to optimize the Critical Care health environment.</p> <p>8.6 Care pathways and referral systems are analyzed and optimized.</p> <p>8.7 The activities of the inter-professional team within the Critical Care unit are well coordinated.</p> <p>8.8 Morbidity and mortality data of Critical Care nursing are used to guide decision-making.</p>