



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

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**EXIT LEVEL OUTCOMES: POSTGRADUATE DIPLOMA IN PERIOPERATIVE NURSING**

**TABLE 1: FOUNDATIONAL EXIT LEVEL OUTCOMES WITH ASSOCIATED ASSESSMENT CRITERIA**

Exit level outcomes	Associated assessment criteria
<p><b>1.</b> 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><b>1.1</b> Critical decision making and moral reasoning models are used to guide clinical practice and resolve professional-ethical dilemmas within Perioperative nursing.</p> <p><b>1.2</b> The relevant latest legislation, policies, protocols, regulations, guidelines, directives and applicable ethics regarding Perioperative care nursing are applied in practice.</p> <p><b>1.3</b> The professional/ ethical legal frameworks guide the practice of the Perioperative Nursing Specialist.</p> <p><b>1.4</b> Practice and facilitate advocacy for the rights and best interests of patients.</p> <p><b>1.5</b> Ethical codes, professional accountability, responsibility, confidentiality and standards for the practice of Perioperative nursing are interpreted and applied consistently and correctly.</p>
<p><b>2.</b> Apply knowledge of basic research methodology in the appraisal of articles in the field of perioperative care.</p>	<p><b>2.1</b> Academic writing skills are demonstrated in research reports.</p> <p><b>2.2</b> Research articles in the field of Perioperative nursing care are appraised through the application of basic knowledge of research methodology.</p> <p><b>2.3</b> Qualitative, quantitative and mixed method research designs are accurately differentiated.</p> <p><b>2.4</b> 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><b>The Perioperative Nurse Specialist will:</b></p>	
<p><b>3.</b> Demonstrate advanced knowledge of perioperative nursing care of patients in a variety of clinical settings, to promote health outcomes.</p>	<p><b>3.1</b> Health outcomes are promoted through the demonstration of knowledge of perioperative care.</p> <p><b>3.2</b> Epidemiological data pertaining to perioperative care is interpreted and used to plan a community awareness programme/campaign.</p> <p><b>3.3</b> Subjective and objective assessment findings from investigations and laboratory results are interpreted in order to make nursing diagnoses.</p> <p><b>3.4</b> Comprehensive individual, people-centre, perioperative treatment plans are based on assessment findings and standardized national and contextually appropriate guidelines.</p> <p><b>3.5</b> Applicable legislation, policies and guidelines are identified, debated and recommendations communicated to authorities.</p> <p><b>3.6</b> Strategies are identified to ensure that the human rights of surgical patients are respected.</p> <p><b>3.7</b> Pre-operative surgical patients are assessed holistically and findings are relayed to relevant team members.</p> <p><b>3.8</b> Biomedical, pharmacology and psychosocial sciences are used to explain assessment findings.</p> <p><b>3.9</b> Infection control measures are compared to best available evidence, and debated.</p> <p><b>3.10</b> Sequence of operating cases are planned according to standards.</p> <p><b>3.11</b> Evidence-based practice, theories or models on surgical patients are critically appraised and best practice guidelines are adopted to improve health care service delivery.</p> <p><b>3.12</b> Patient safety measures are compared to best available evidence.</p> <p><b>3.13</b> Record of surgical-related procedures are kept according to legal requirements.</p>

	<p><b>3.14</b> Accurate record-keeping on surgical patients perioperatively are audited to maintain quality standards.</p> <p><b>3.15</b> Legislation, policy and guidelines are used to plan management of adverse events during perioperative care.</p> <p><b>3.16</b> Plans/ procedures/ guidelines on how to deal with possible disasters in the geographical or operating theatre environment are compared to best available evidence.</p> <p><b>3.17</b> Care pathways and the referral system are evaluated by comparing them with best available evidence.</p> <p><b>3.18</b> The rationale and safety measures of technological devices used in the perioperative environment are explained and debated.</p> <p><b>3.19</b> Accuracy of data pertaining to a perioperative patient is evaluated.</p> <p><b>3.20</b> National core standards are used to audit files for perioperative patients.</p>
<p><b>4.</b> Render and coordinate comprehensive perioperative health care to patients in a variety of health care settings, in order to promote health outcomes.</p>	<p><b>4.1</b> Health outcomes are promoted through rendering and coordinating specialist perioperative care of surgical patients in a variety of clinical settings.</p> <p><b>4.2</b> Health and well-being of patients and staff are promoted through the execution of a health awareness campaign.</p> <p><b>4.3</b> Perioperative nursing care is provided within the professional ethical-legal parameters.</p> <p><b>4.4</b> Principles of health dialogue are applied to negotiate the treatment plan with the patient and family.</p> <p><b>4.5</b> Infection control measures are maintained or improved in order to minimize nosocomial infections.</p> <p><b>4.6</b> The perioperative holistic care plan for all the patients is executed competently.</p> <p><b>4.7</b> Safety measures that are based on best available evidence are implemented throughout the perioperative period.</p>

	<p><b>4.8</b> Records of surgical-related procedures are kept according to legal requirements.</p> <p><b>4.9</b> Technological devices in the perioperative environment are used appropriately and safely in ways that facilitate diagnosing, monitoring and management of the surgical patient.</p> <p><b>4.10</b> Perioperative data (statistics) are captured accurately and utilized to improve specialist nursing practice.</p>
<p><b>5.</b> 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 Perioperative nursing.</p>	<p><b>5.1</b> Current evidence-based guidelines used in perioperative practice are evaluated and reported at predetermined times to improve health care.</p> <p><b>5.2</b> Academic and professional writing skills are demonstrated in reports and guidelines.</p> <p><b>5.3</b> Research questions are formulated according to the PICO and other formats.</p> <p><b>5.4</b> Evidence-based practice, theories or models on Perioperative practice are critically appraised and best practice guidelines are adopted to improve health care service delivery.</p> <p><b>5.5</b> Databases are searched by using <i>Boolean</i> and other information search strategies.</p>
<p><b>6.</b> Apply principles of evidence-based care to ensure quality in perioperative nursing care.</p>	<p><b>6.1</b> Quality of patient care and safety in Perioperative nursing is promoted by implementing evidence-based practice.</p> <p><b>6.2</b> Use systematic reviews to improve client experience and outcomes in Perioperative nursing.</p> <p><b>6.3</b> Quality audits aimed at improving patient services are performed at predetermined times.</p> <p><b>6.4</b> Critique, develop and implement clinical standards for Perioperative nursing.</p> <p><b>6.5</b> Patient outcomes in Perioperative nursing, including quality patient care and safety, are continuously monitored.</p>
<p><b>7.</b> Implement strategies to develop self and peers by promoting self-directedness through a process of precepting and mentoring.</p>	<p><b>7.1</b> Precepting and mentoring processes are applied to develop self and peers.</p> <p><b>7.2</b> Activities towards enhancing Continuous Professional Development (CPD) are evident.</p> <p><b>7.3</b> Thinking/reasoning processes of self and others are developed through facilitation of learning.</p>

	<p><b>7.4</b> Learning theories are applied in own development and the development of others.</p> <p><b>7.5</b> A positive learning environment is created by supporting peers and novices.</p> <p><b>7.6</b> Academic networks are established and used to sustain personal development.</p>
<p><b>8.</b> Manage Perioperative nursing services by implementing effective medico-legal norms, practices and standards within an inter-professional team</p>	<p><b>8.1</b> Perioperative services are managed according to medico-legal norms, practices and standards within an inter-professional team.</p> <p><b>8.2</b> Appropriate leadership styles are demonstrated within the Perioperative inter-professional team.</p> <p><b>8.3</b> Shared decision making opportunities regarding perioperative services are created and documented.</p> <p><b>8.4</b> Benchmarks and best practices are accessed and used to develop indicators for quality and cost effectiveness in perioperative nursing care.</p> <p><b>8.5</b> The activities of the Perioperative inter-professional team are well coordinated.</p> <p><b>8.6</b> Data on perioperative nursing care is used for decision making.</p>