COLLEGE *of* NURSING
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APRN Annual Competency Validation
(Clinical Nurse Midwife &Women's Health Nurse Practitioner)

Date of Competency Validation: _____

Name of Employee: _____

Employee Title: _____

Employee National Certification Agency: _____

Collaborative Physician: _____

Orientation Preceptor Name (New Hire): _____

Instructions: Health care practitioners are regulated by state regulatory boards with the purpose of protecting the health, safety and welfare of the public. This competency verification should be completed by all new nurse practitioners and peer on initial hire and yearly thereafter to assess that minimal competency standards are met.

This competency form is a part of a Student and Preceptor Advancement through A Designated Education Site (SPADES) Project funded by Health Resources and Service Administration (HRSA). This project is supported in part by Grant Number D09HP28676 from the Health Resources and Services Administration (HRSA), an operating division of the U.S. Department of Health and Human Services. Using the Rapid Cycle Quality Improvement method (Plan, Do, Study, Act), the form will be piloted in a nurse managed clinic site by an expert family nurse practitioner/faculty member from East Tennessee State University College of Nursing validating its efficacy and efficiency.

Once the competency form is piloted for feasibility, time, cost, adverse events, and effect size, and revised, the form will be implemented at all of the East Tennessee State University Nurse Managed Clinics to validate the advanced practice registered nurse's competencies.

Independent APRN Competencies	Peer Review Validation Score (See Scale)	
Professionalism		
• Demonstrates professional dress and decorum.		
• Arrives to work on time.		
• Uses professional communication skills with peers, colleagues, administration, faculty, staff, and providers of care.		
• Demonstrates professionalism through respect toward patients.		
• Precepts students and new employees when needed.		
• Shows respect for diverse opinions when working collaboratively.		
• Demonstrates accountability for actions.		
• Volunteers when needed to help with administrative duties.		
• Demonstrates honesty and trustworthiness.		
• Committed to enhancing education and learning new evidence based care recommendations.		
• Seen by others as a team player.		
• Values opportunities to learn new tasks.		
• Committed to the success of the clinic.		
• Legible Handwriting		
Peer Reviewer Comments Related to this Domain: Professionalism	**Peer Reviewer Initial:**	**Date:**

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Independent APRN Competencies	Peer Review Validation Score (See Scale)

I. Scientific Foundations	
What is a competency? The Nurse Practitioner Core Competencies (NP Core Competencies) integrate and build upon existing Master's and DNP core competencies and are guidelines for educational programs preparing NPs to implement the full scope of practice as a licensed independent practitioner. The competencies are essential behaviors of all NPs. These competencies are demonstrated upon graduation regardless of the population focus of the program and are necessary for NPs to meet the complex challenges of translating rapidly expanding knowledge into practice and function in a changing health care environment. . Read more at: http://www.nonpf.org/?page=14	
Scientific Foundations Objectives:	
1. Critically analyzes data and evidence for improving advanced nursing practice	
• Give one example of competency #1: 1.	
3. Translates research and other forms of knowledge to improve practice processes and outcomes	
• Give one example of competency #3: 1.	
4. Develops new practice approaches based on the integration of research, theory, and practice knowledge	
• Give one example of competency #4 1.	
• Integrates research, theory and EBP to develop clinical approaches that address women's responses to physical and mental health and illness across the lifespan	
• Integrates best evidence into practice incorporating client values and clinical judgement	

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Independent APRN Competencies	Peer Review Validation Score (See Scale)

Peer Reviewer Comments Related to this Competency Domain: Scientific Foundations	Peer Reviewer Initial:	Date:

II. Leadership	
Leadership Objectives	
1. Assumes complex and advanced leadership roles to initiate and guide change.	
• Give one example of competency #1: 1.	
4. Advocates for improved access, quality, and cost effective healthcare.	
• Give one example of competency #4: 1.	
6. Communicates practice knowledge effectively, orally and in writing.	
7. Participates in professional organizations and activities that influence advanced practice nursing and/or health outcomes of population focus.	
• Give one example of competency #7: 1.	

Peer Reviewer Comments Related to this Competency Domain: Leadership	Peer Reviewer Initial:	Date:

Scoring Scale
1= Limited proficiency
2= Acceptable
3= Proficient
N/A= Not applicable at present
Any score below 2 requires a developmental plan.

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Independent APRN Competencies	Peer Review Validation Score (See Scale)	
III. Quality		
Quality Objectives		
1. Uses best available evidence to continuously improve quality of clinical practice.		
• Participates in the review of assigned UDS measures.		
Peer Reviewer Comments Related to this Competency Domain: Quality	**Peer Reviewer Initial:**	**Date:**
IV. Practice Inquiry		
Practice Inquiry Objectives		
2. Generates knowledge from clinical practice to improve practice and patient outcomes.		
• Analyzes clinical guidelines for individualized application into practice.		
3. Applies clinical investigative skills to improve health outcomes.		
• Assesses clinical practice via EHR and discerns gaps in care, barriers to care needing resolution, and recommend evidence based solutions for enhanced patient care outcomes.		
6. Analyzes clinical guidelines for individualized application into practice.		

Independent APRN Competencies	Peer Review Validation Score (See Scale)
• Uses knowledge of developmental stages to individualize care.	
• Analyzes readiness to learn and tailors interventions accordingly.	
• Demonstrates knowledge and utilizes interprofessional referrals for mental health service appropriately: psychologist, social worker, psychiatrist, APRN psychiatric nurse.	
• Facilitates patient-centered decision making about health.	
• Appropriately and timely addresses labs and diagnostic studies ordered and communicates with the patient plan of care.	
• Provides a formal hand-off of patients of concern to other provider(s) when not available to ensure timely follow-up care.	
• Evaluates gender-specific interventions and outcomes	
• Integrates of gender specific evidence into practice.	

Peer Reviewer Comments Related to this Competency Domain: Practice Inquiry	Peer Reviewer Initial:	Date:

V. Technology and Information Literacy

Technology and Information Literacy Objectives

1. Integrates appropriate technologies for knowledge management to improve health care.	

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Independent APRN Competencies	Peer Review Validation Score (See Scale)

• List 3 technologies used to manage patient's healthcare.
  1.
  2.
  3.	

• Uses health information and technology tools in providing care for women across the lifespan to communicate, manage knowledge, improve access, mitigate error, and to support clinical decision making locally and globally.	
3. Demonstrates information literacy skills in complex decision making.	
• Utilizes technology and applications for references in point of care.	
5. Uses technology systems that capture data on variables for the evaluation of nursing care.	
• Performs and adequately documents procedures in EMR	
• Competently and independently performs, documents, and bills appropriately for 1, 2, and 3 or more procedures evidenced by EMR examples or return demonstration.	
• Uses data from information systems to improve practice.	
• Has patient office visit documented in electronic health record and finalized within 24 hours.	

Peer Reviewer Comments Related to this Competency Domain: Technology and Information Literacy	Peer Reviewer Initial:	Date:

VI. Policy

Independent APRN Competencies	Peer Review Validation Score (See Scale)	
Policy Objectives		
1. Demonstrates an understanding of the interdependence of policy and practice.		
• Adheres to East Tennessee State University policies and procedures		
2. Advocates for ethical policies that promote access, equity, quality, and cost.		
• Give one example of competency #2: 1.		
• Advocates for health care policies and research theat support accessible equitable affordable, safe and effective health care for women both locally and globally.		
Peer Reviewer Comments Related to this Competency Domain: Policy	**Peer Reviewer Initial:**	**Date:**
VII. Health Delivery System		
Health Delivery System Objectives		
1. Applies knowledge of organizational practices and complex systems to improve health care delivery.		
• Follows facilities policies to reduce environmental health risks.		
• Collaborates in planning for transitions across the continuum of care.		
• Follows legal regulations for nurse practitioner practice, including reimbursement of services.		

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Independent APRN Competencies	Peer Review Validation Score (See Scale)
6. Analyzes organizational structure, functions, and resources to improve the delivery of care.	
• Reviewed JCCHC Organizational Structure and Phone Extension Trees	
• Reviewed the contents of the supply room	
• Located the AED equipment in the facility	
• Located the emergency cart and reviewed contents	
• Demonstrated use of electronics in patient rooms	
• Demonstrates when to transfer care or collaborate care with other disciplines	

Peer Reviewer Comments Related to this Competency Domain: Health Delivery System	Peer Reviewer Initial:	Date:

VIII. Ethics	
Ethics Objectives	
1. Integrates ethical principles in decision making.	
• One example of Beneficence: 1.	
• One example of Nonmaleficence : 1.	

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Independent APRN Competencies	Peer Review Validation Score (See Scale)
• One example of Autonomy 1.	
• One example of Justice 1.	
3. Applies ethically sound solutions to complex issues related to individuals, populations, and systems of care evidence by verbal recall.	
• Demonstrates knowledge of legal/ethical issues and regulatory agencies relevant to gender specific issues.	
• Recognizes the unique ethical dilemmas in women's healthcare	
• Recognize the global ethical challenges in women's healthcare	
• Develops ethically sound solutions to complex global issues related to women	

Peer Reviewer Comments Related to this Competency Domain: Ethics	Peer Reviewer Initial:	Date:

IX. Independent Practice Competencies

Independent Practice Objectives	
1. Functions as a licensed independent practitioner.	
• Maintains current unencumbered licensure as an RN in Tennessee or compact state:	Exp Date:

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Independent APRN Competencies	Peer Review Validation Score (See Scale)
• Maintains current National Credentialing Certification:	Exp Date:
• Maintains current licensure as an APN in Tennessee or other compact state every 2 years.	Exp Date
• Maintains current fitness to prescribe in the state on Tennessee every 2 years.	Exp Date:
• Attains a minimum of two (2) contact hours of continuing education designed specifically to address controlled substance prescribing practices. The continuing education must include instruction in the Tennessee Department of Health's treatment guidelines on opioids, benzodiazepines, barbiturates, and carisoprodol, and may include such other topics as medicine addiction and risk management tools.	Number of hours attained:
• Read Universal Precautions when prescribing opioids: http://www.opioidprescribing.com/overview	Date:
• Initiates a pain contract with all patients who are prescribed opioids.	Date:
• Review Guidelines for prescribing opioids http://www.cdc.gov/drugoverdose/prescribing/common-elements.html	Date:
• Review DIRE Tool for risk assessment http://integratedcare-nw.org/DIRE_score.pdf	Date:
• CSMD Registered and demonstrates use https://www.tncsmd.com/Login.aspx?ReturnUrl=%2fdefault.aspx	
• Review Opioid Risk Management http://www.painedu.org/soapp.asp	Date:
• Review NIDA Screen Assist Tool: https://www.drugabuse.gov/sites/default/files/pdf/nmassist.pdf	
• Review TN Dept. of Health Chronic Pain Guidelines http://www.tn.gov/assets/entities/health/attachments/ChronicPainGuidelines.pdf	Date:
AMCB Certification (American Midwifery Certification Board): Guideline: http://www.amcbmidwife.org/certificate-maintenance-program/purpose-objectives	

Independent APRN Competencies	Peer Review Validation Score (See Scale)
Option 1: *AMCB Certificate Maintenance Module Method* Successfully complete 3 AMCB Certificate Maintenance Modules during the five-year certification cycle. The five-year cycle begins with the year following certification. One module must be completed in EACH of the three areas of practice: Antepartum and Primary Care of the Pregnant Woman; Intrapartum, Postpartum and Newborn; and Gynecology and Primary Care for the Well-Woman. **AND** Obtain 20 contact hours (2.0 CEUs) of ACNM or ACCME Category 1 approved continuing education units. ***The Certificate Maintenance Modules completed cannot count toward the required 20 contact hours (2.0 CEUs). **AND** Paying annual fees and any applicable late fees for each of those years and any other charges or fees (e.g., for articles ordered). All fees must be paid in full by December 31st of the year your certificate will expire. **AND** Completion of the online Recertification Application once all other CMP requirements are submitted.	
Option 2: *Reexamination Method* Take the current AMCB Certification Examination no sooner than the fourth (4th) year of the current five-year certification cycle. Once the exam is taken, the CNM/CM may not change to Option 1. The exam must be passed by the end of the fifth (5th) year of the certification cycle. Criteria for passing and retaking the exam will be the same as those in effect for first time candidates at the time the exam is taken. **AND** Paying the National Certification Examination fee ($500) in lieu of annual fees. **AND** Completion of the online Recertification Application once all other CMP requirements are submitted.	
NCC Certification You must meet both total hours designated insuring that the specified hours in each of the stated core competency areas are met.	

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Scoring Scale
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2= Acceptable
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N/A= Not applicable at present
Any score below 2 requires a developmental plan.

Independent APRN Competencies	Peer Review Validation Score (See Scale)
CE requirements for maintenance can be as little as 10 hours but no more than 45 hours (50 minus the 5 for assessment). All CE must be in accordance with your education plan and earned AFTER the assessment has been taken. More information: https://www.nccwebsite.org/resources/docs/coding-book-whc.pdf	
• Maintains health care provider CPR certification approved by the American Heart Association every 2 years.	Exp Date:
• Maintains privileging (as appropriate)	
• Maintains current DEA licensure	Exp Date:
• Reviewed and understand the Tenn. Code Ann 63-7-123 regarding Prescription Rules and Regulations (http://www.lexisnexis.com/hottopics/tncode/)	
• Reviewed and understand the treatment of pain policy. (http://share.tn.gov/sos/rules/1000/1000-04.20150622.pdf)	
• Registered in CSMD (Demonstrated Access) (https://www.tncsmd.com/Login.aspx?ReturnUrl=%2fdefault.aspx)	
Performs Women's Health procedures as credentialed:	
☐ Suturing—estimated number performed this year _____	
☐ Incision and Drainage— estimated number performed this year _____	
☐ IUD Insertion-- estimated number performed this year _____	
☐ Pap Smear-- estimated number performed this year _____ Proper use of Graves, Pederson, and disposable speculum.	
☐ Pelvic Exam—estimated number performed this year_____	

Independent APRN Competencies	Peer Review Validation Score (See Scale)
☐ Bimanual exam—estimated number performed this year _____	
☐ Demonstrates Wet Mount, identifies yeast, trichamonas, yeast, whiff test (KOH)	
☐ Demonstrates STD Workup: GC, Syphillis, Genital Herpes, Genital Warts, Molluscum Contagiosum, HIV, HPV,	
☐ Demonstrates preconception counseling	
☐ Schedules proper followup appointments for OB patients: 8-20 weeks, 24-28 weeks, 35-37 weeks, 38 weeks to delivery.	
☐ Rhogam Injection	
☐ Genetic Screening Counseling	
☐ Fundal Height Measurement	
☐ Fetal Heart Tone	
☐ Non-stress test	
☐ Contractions stress test	
☐ Brethine SQ Injections	
☐ Components of Biophysical Profile	
☐ Leopold Maneuver	
☐ Fetal Monitoring: Baseline, Acceleration, Early Deceleration, Late Deceleration, Prolonged Deceleration	
☐ Post Partum Care follow up	
☐ Assessment for placenta previa	

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☐ Clinical Breast Exam-- estimated number performed this year _____	
☐ Cryotherapy -- estimated number performed this year _____	
☐ Use of Welch Allyn, AudioScope-- estimated number performed this year _____	
☐ Skin tag removal with high temp disposable cautery tool—(sharp excision/silver nitrate) estimated number performed this year _____	
☐ X-ray interpretation-- estimated number performed this year _____	
☐ 12 Lead EKG interpretation-- estimated number performed this year _____	
☐ Critical Lab interpretation—(Glucose, PT/INR) estimated number performed this year _____	
☐ Telehealth Equipment Use-- estimated number performed this year _____	
Other procedures as listed below:	
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Independent APRN Competencies	Peer Review Validation Score (See Scale)
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• I have read the **Tenn. Code Ann. § 63-7-126** • **(f)** An advanced practice nurse shall only perform invasive procedures involving any portion of the spine, spinal cord, sympathetic nerves of the spine or block of major peripheral nerves of the spine in any setting not licensed under title 68, chapter 11 under the direct supervision of a Tennessee physician licensed pursuant to chapter 6 or 9 of this title who is actively practicing spinal injections and has current privileges to do so at a facility licensed pursuant to title 68, chapter 11. The direct supervision provided by a physician in this subsection (f) shall only be offered by a physician who meets the qualifications established in § 63-6-241(a)(1) or (a)(3) or § 63-9-119(a)(1) or (a)(3). For purposes of this subsection (f), "direct supervision" is defined as being physically present	

Independent APRN Competencies	Peer Review Validation Score (See Scale)
in the same building as the advanced practice nurse at the time the invasive procedure is performed. This subsection (f) shall not apply to an advanced practice nurse performing major joint injections except sacroiliac injections, or to performing soft tissue injections or epidurals for surgical anesthesia or labor analgesia in unlicensed settings.	
2. Demonstrates the highest level of accountability for professional practice.	
• Follows current and emerging professional standards.	
• Demonstrates novice to expert continuum of clinical practice.	
3. Practices independently managing previously diagnosed and undiagnosed patients.	
3a. Provides the full spectrum of health care services to include health promotion, disease prevention, health protection, anticipatory guidance, counseling, disease management, palliative, and end-of-life care.	
3b. Uses advanced health assessment skills to differentiate between normal, variations of normal, and abnormal findings.	
3c. Employs screening and diagnostic strategies in the development of diagnoses.	
3d. Prescribes medications within scope of practice.	
3e. Manages the health/illness status of patients and families over time.	
4. Provides patient-centered care recognizing cultural diversity and the patient or designee as a full partner in decision-making.	
4a. Works to establish a relationship with the patient characterized by mutual respect, empathy, and collaboration.	
4b. Creates a climate of patient-centered care to include confidentiality, privacy, comfort, emotional support, mutual trust, and respect.	
4c. Incorporates the patient's cultural and spiritual preferences, values, and beliefs into health care.	

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Independent APRN Competencies	Peer Review Validation Score (See Scale)
4d. Preserves the patient's control over decision making by negotiating a mutually acceptable plan of care.	
• Provides culturally appropriate reproductive and primary care for women of all ages.	
• Approaches gender-specific developmental events, such as menarche, puberty, menopause and senescence, as normative transitions not disease states.	
• Recognizes unique health care needs of marginalized women, including victims of violence and transgendered female clients.	
• Recognizes and manages disease manifestations unique to women.	
• Provides infertility and STD services to sexual partners of female patients.	
• Supports a woman's right to make her own decisions regarding her health and reproductive choices within the context of her belief system	
• Assesses genetic, social, environmental, physical, and mental health risks through collection of family, social, environmental health data.	
• Provides counseling, management, and/or referral based on identified healthcare risk factors.	
Other Independent Practice Skills	
• Demonstrates the retrieval of the following clinical guidelines: oral contraceptives, IUD women's health promotion: mammogram, bone density testing, Pap Smear, and CBE • Manages contraception and explaining risks/benefits of each method to patients. Guideline: http://www.acog.org/Womens-Health/Birth-Control-Contraception Guideline: http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Gynecologic-Practice/Well-Woman-Visit	
• Manages heavy menstrual bleeding	

Independent APRN Competencies	Peer Review Validation Score (See Scale)
Guideline: http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Adolescent-Health-Care/Options-for-Prevention-and-Management-of-Heavy-Menstrual-Bleeding-in-Adolescent-Patients-Undergoing	
• Manages patients experiencing menopausal signs and symptoms Guideline: http://www.menopause.org/publications/clinical-care-recommendations	
• Attains a thorough sexual history Guideline: http://www.cdc.gov/std/treatment/sexualhistory.pdf	
• Instructs patient on breast cancer prevention/awareness. Guideline: http://www.breastcancer.org/risk/factors?gclid=CJHVgpzSgcwCFYkkgQodEZUI2g	
• Determines accurate EDD based on LMP Guideline: http://www.bupa.com.sa/mobile/english/healthandwellness/healthtools/pages/pregnancy-calculator-.aspx	
• Understands normal complications in pregnancy vs. abnormal Guideline: http://apps.who.int/iris/bitstream/10665/43972/1/9241545879_eng.pdf	
• Orders the correct labs and sequential follow-ups for obstetric visits • HCG • CVS • Triple or Quad Marker: (msAFP, hCG, uE3, inhibin A) • Amniocentesis, if indicated • 18 to 20 weeks anatomy US, Biophysical Profile • 24-28 weeks GTT • 24-28 weeks Rhesus Factor if Rh Negative and indicated • 35-37 weeks GBS • Daily fetal kick Count	

Independent APRN Competencies	Peer Review Validation Score (See Scale)	
• < 28 weeks monthly prenatal visit • 28-36 weeks every 2 week prenatal visit • >36 weeks weekly visit Guideline: http://www.acog.org/~/media/Districts/District%20VIII%20Junior%20Fellows/jfpc.pdf		
• Orders influenza vaccine for pregnant and non-pregnant women during influenza season Guideline: http://www.cdc.gov/flu/protect/vaccine/pregnant.htm		
• Orders tetanus or TDAP during pregnancy, if indicated Guideline: http://www.who.int/reproductivehealth/publications/maternal_perinatal_health/immunization_tetanus.pdf		
• Orders first trimester NT US to determine EDC Guideline: http://www.aium.org/resources/guidelines/obstetric.pdf		
• Orders routine US for Biophysical Profile Guideline: http://www.aium.org/resources/guidelines/obstetric.pdf		
Peer Reviewer Comments Related to this Competency Domain: Independent Practice	**Peer Reviewer Initial:**	**Date:**
HEDIS/UDS Core Measures		
HEDIS/UDS Objectives		
Colorectal Cancer Screening (Adult)		

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• Colorectal Cancer Screening on adults age 50-75 with annual fecal occult blood test; flexible sigmoidoscopy every five years; or colonoscopy every ten years. (HEDIS, 2016)(UDS, 2015) Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/colorectal-cancer-screening Sample Collection Instructions: http://hemosure.com/	
• Mammogram Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/breast-cancer-screening and USPSTF Recommendation Statement: http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/breast-cancer-screening	
• Pap Smear Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/cervical-cancer-screening?ds=1&s=pap%20smear Guideline: http://www.asccp.org/guidelines Guideline: http://www.acog.org/Womens-Health/Pap-Smear-Pap-Test	
Urinary Incontinence • Management of Urinary Incontinence in Older Adults (HEDIS, 2016) Guideline: http://annals.org/article.aspx?articleid=1905131	

Peer Reviewer Comments Related to this Domain: Effectiveness of Care Adult	Peer Reviewer Initial:	Date:

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HEDIS/UDS Core Measures		
HEDIS/UDS Objectives		
Osteoporosis Management (Older Adult) • Osteoporosis Management in Women age 65-85 who had a Fracture (HEDIS, 2016) • Bone Density Testing for women age 65-85 • Prescribe drug to treat osteoporosis when indicated. Guideline: http://nof.org/files/nof/public/content/file/344/upload/159.pdf		
Peer Reviewer Comments Related to this Domain: Older Adult	**Peer Reviewer Initial:**	**Date:**
Effectiveness of Care-Women's Health		
HEDIS/UDS Objectives		
Breast Cancer Screening • Breast Cancer Screening mammogram in women age 50-74 every 2 years (HEDIS, 2016) Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/breast-cancer-screening and USPSTF Recommendation Statement: http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/breast-cancer-screening		

Independent APRN Competencies		Peer Review Validation Score (See Scale)
Breast Cancer Hormone Therapy • Tamoxifen or aromatase inhibitor prescribed for patients who are > 18 and have Stage IC through IIIC, Estrogen Receptor, or Progesterone Receptor positive breast cancer. Guideline: http://www.instituteforquality.org/adjuvant-endocrine-therapy-women-hormone-receptor%E2%80%93positive-breast-cancer-american-society-clinical		
Breast Feeding • Breastfeeding education and encouragement for pregnant mothers, if no contraindications Guideline: http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Obstetric-Practice/Optimizing-Support-for-Breastfeeding-as-Part-of-Obstetric-Practice		
Cervical Cancer Screening • Cervical Cancer Screening only in women age 21 and older. (HEDIS, 2016) • Documented pap screening according to ACOG Guidelines. (UDS, 2015) Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/cervical-cancer-screening?ds=1&s=cervical%20cancer%20screening Guideline: http://www.acog.org/~/media/districts/district%20ii/pdfs/uspstf_cervical_ca_screening_guidelines.pdf Guideline: http://www.asccp.org/guidelines		
Chlamydia Screening • Chlamydia Screening in Women age 16-24, sexually active and at risk for chlamydia (HEDIS, 2016) Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/chlamydia-and-gonorrhea-screening?ds=1&s=chlamydia USPSTF Guideline Recommendation Statement: http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening		

Independent APRN Competencies		Peer Review Validation Score (See Scale)
Depression Screening • Maternal Depression Screening Guideline: http://www.acog.org/Resources-And-Publications/Committee-Opinions/Committee-on-Obstetric-Practice/Screening-for-Perinatal-Depression		
HPV Prevention • 3 doses of HPV vaccine for female adolescents by age 13 (HEDIS, 2016) Guideline: http://www.cdc.gov/hpv/hcp/index.html Guidelines: STD Treatments : http://www.cdc.gov/hpv/hcp/resources.html		
Prenatal/Postpartum Care • Prenatal and Postpartum Care (HEDIS, 2016) • Prenatal care in the first trimester. • Documentation of number of weeks of gestation at every visit. • Postpartum care21-56 days after delivery. • Ongoing prenatal care as recommended by guidelines. Prenatal Care Guideline: https://www.guideline.gov/content.aspx?id=38256 and American Family Physician Guidelines: http://www.aafp.org/afp/topicModules/viewTopicModule.htm?topicModuleId=25 Postpartum Care Guideline: http://apps.who.int/iris/bitstream/10665/97603/1/9789241506649_eng.pdf		
Prenatal Care Anti D Immune Globulin • Rhogam injection at 28 weeks gestation • Rhogam injection at 72 hours after delivery Guideline: http://www.rhogam.com/acog-aabb-standards		
Prenatal HIV Screening • HIV Screening at first or second prenatal visit. Guideline: http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm		

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Peer Reviewer Comments Related to this Domain: Women's Health	Peer Reviewer Initial:	Date:

Effectiveness of Care—Substance Abuse and Mental Health		
HEDIS/UDS Objectives		
Alcohol Treatment Plans • Initiation and Engagement of Alcohol and Other Drug Dependence treatment in adolescents and adults who have alcohol dependence. (HEDIS, 2016) • PCP visit after inpatient AOD hospitalization within 14 days. • Alcohol treatment initiated within 30 days of AOD diagnosis. • Documentation of alcohol treatment plan (HEDIS, 2016) Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/alcohol-misuse-screening-and-behavioral-counseling-interventions-in-primary-care?ds=1&s=alcohol and USPSTF Full Recommendation Statement: http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/alcohol-misuse-screening-and-behavioral-counseling-interventions-in-primary-care and CAGE Screening Tool: http://pubs.niaaa.nih.gov/publications/arh28-2/78-79.htm		
Depression • Antidepressant Medication Management in patient 18 and older (HEDIS, 2016)		

Scoring Scale
1= Limited proficiency
2= Acceptable
3= Proficient
N/A= Not applicable at present
Any score below 2 requires a developmental plan.

Independent APRN Competencies	Peer Review Validation Score (See Scale)	
• Patient remains on antidepressant for 12 weeks-6 months. Guideline: http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/depression-in-adults-screening and USPSTF Recommendation Statement: http://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/depression-in-adults-screening		
Depression Screening • Utilization of the PHQ-2 and PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults (12 and older) (HEDIS, 2016) • Follow up plan documented after each visit (UDS, 2015) Guideline: https://www.icsi.org/_asset/fnhdm3/Depr-Interactive0512b.pdf PHQ-2 and PHQ-9 Tools American Family Physician: http://www.aafp.org/afp/2008/0715/p244.html		
Peer Reviewer Comments Related to this Domain: Mental Health	**Peer Reviewer Initial:**	**Date:**
Effectiveness of Care –Tobacco Abuse		
HEDIS/UDS Objectives		
Tobacco Use Assessment • Tobacco Assessment/ Cessation Intervention (UDS, 2015) (HEDIS, 2016) • Tobacco Counseling • Offered Tobacco cessation intervention and/or pharmacotherapy at each visit		

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Independent APRN Competencies	Peer Review Validation Score (See Scale)	
• Advises smokers to quit smoking at each visit Tobacco Guideline: http://www.cdc.gov/tobacco/quit_smoking/cessation/		
Peer Reviewer Comments Related to this Domain: Effectiveness of Care—Tobacco Abuse	**Peer Reviewer Initial:**	**Date:**
Effectiveness of Care --Obesity		
HEDIS/UDS Objectives		
BMI • Adult BMI Assessment age 18 and older at every visit (HEDIS, 2016) • Documentation of BMI at each visit. • Follow up visit after weight screening, documentation of progress in patients who are under (<19) or overweight (≥25) (UDS, 2015) Obesity Guideline: http://www.healthquality.va.gov/guidelines/CD/obesity/CPGManagementOfOverweightAndObesityFINAL041315.pdf		
Peer Reviewer Comments Related to this Domain: Effectiveness of Care—Obesity	**Peer Reviewer Initial:**	**Date:**

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Independent APRN Competencies	Peer Review Validation Score (See Scale)

Disease Management: HIV		
HEDIS/UDS Objectives		
HIV • New HIV Cases with Timely Follow-up within 90 day of initial diagnosis (UDS, 2015) AHRQ Screening Guidelines for New Case: http://www.guideline.gov/content.aspx?id=45148&search=hiv and AHRQ Laboratory Testing within 90 days: http://www.guideline.gov/content.aspx?id=48499&search=hiv+and+hiv+treatment+with+90+days HIV Guideline: https://aidsinfo.nih.gov/guidelines		
Peer Reviewer Comments Related to this Domain: Disease Management: HIV	**Peer Reviewer Initial:**	**Date:**
Measures Collected Using Electronic Clinical Data Systems		
Applies skills in peer review to promote a culture of excellence.		
• Attends scheduled peer review meetings evidenced by peer review sign in sheets		
• Attends and contributes to the daily morning huddle.		

Independent APRN Competencies	Peer Review Validation Score (See Scale)	
• Attends and contributes to the quarterly staff meetings evidenced by sign in sheets		
Peer Reviewer Comments Related to this Domain: Measures Collected Using Electronic Clinical Data Systems	**Peer Reviewer Initial:**	**Date:**

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Signature of Employee   Date Completed

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Signature of Peer Reviewer   Date Completed

Peer Reviewer Comments

APRN Comments

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Developmental plan for scores < 2.

Domain (I- IX)	Competency Number	Developmental Plan:

_____

Signature of Employee   Date Completed

_____

Signature of Peer Reviewer   Date Completed

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