



SPN Pre-Licensure Core Competencies, Second Edition 2023

Purpose

The Society of Pediatric Nurses' Pre-Licensure Core Competencies provides guidance for the development and revision of undergraduate nursing curricula specific to the practice of pediatric nursing: the science, art, and practice discipline devoted to the care of infants, children, adolescents, young adults, and their families. The document champions the five domains identified by the Society of Pediatric Nurses' [Pediatric Nursing Excellence Model](#), a conceptual framework aimed at clarifying the complex and interactional spheres that distinguish excellent pediatric nursing practice. Each domain represents an essential practice element in the preparation of the pediatric nurse. Individual domains are accompanied by a concept(s), conceptual definition(s), and prescribed competencies whose accomplishment demonstrate mastery of the core knowledge, skill, values, and attitudes to be achieved during the pre-licensure period. The development of the domains, concepts, conceptual definitions, and competencies was informed by the history, knowledge, science, trends, and issues affecting contemporary pediatric nursing practice and the moral, ethical, and legal contexts within which pediatric nursing care is provided. They reflect a desire to incorporate multiple perspectives into nursing practice and may evolve over time as changes in health care and nursing practice are observed. Numbering conventions used throughout the document are used for identification purposes only and do not delineate content order of importance.

Key Assumptions

1. The term pediatric patient is inclusive of the following recipients of pediatric nursing services: infants, children, adolescents, young adults, and adults impacted by congenital or neurodevelopmental disorders. Throughout this document the terms child, youth, and families are used to refer to this population.
2. The health of children and youth cannot be separated from the culture and status of the family unit, the condition of the environments in which they are born and inhabit, and the political climates of the day.
3. Family-centered and developmentally appropriate care are the foundation of pediatric nursing practice.
4. Pediatric health is the foundation of the health and well-being of future societies.
5. Undergraduate nursing curricula should include pediatric nursing specialty didactic instruction and direct care clinical experiences.
6. Pediatric student nursing clinical experiences should be inclusive of direct care settings that span the health care delivery continuum, including public health, acute care, ambulatory care, and long-term care. Direct care clinical experiences may be supplemented, not fully replaced, with adjunctive experiential learning modalities.


Goals

1. Define the core knowledge, skills, values, and attitudes that are essential to pediatric nursing practice.
2. Identify performance expectations characteristic of competent pediatric student nursing practice.
3. Provide an educational framework for the development and revision of pre-licensure pediatric nursing curricula.

Concept	Definition and Competencies
Developmentally Appropriate Care	<p>Developmentally appropriate care is a comprehensive approach to health care that encompasses the understanding of the variation and progression through developmental ages and stages to promote the optimal well-being of children and youth. This approach includes careful assessment of the specific physical, psychosocial, and cognitive levels of children, youth, and families.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Demonstrate the use of age and developmentally appropriate communication strategies 2. Describe various factors, including genetics and genomics, that affect growth and development. 3. Provide developmentally appropriate anticipatory guidance to a child or youth's family to promote health and prevent injury. 4. Perform a thorough assessment of the child or youth while considering variations in physiology, growth, and development.

1. Engagement 

1a. Collaboration	<p>Collaboration means building authentic, flexible, transparent, mindful, and durable partnerships between and among children, youth, their families, and the health care team. These partnerships are founded upon principles of ethical care. Clearly defined roles, communication practices, and decision-making procedures are necessary to support optimal collaborative efforts. Participation is balanced, and efforts and resources are coordinated to achieve mutually desired outcomes that are in the best interests of children, youth, and their families.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Describe qualities of effective teams. 2. Demonstrate an understanding of the roles and responsibilities of health care team members. 3. Discuss the impact of team dynamics on patient safety and outcomes. 4. Use structured communication processes to facilitate conflict management and share information in a professional, accurate, and time sensitive manner. 5. Collaborate with the health care team, including the child or youth, their family, and community partners, to establish mutual health care goals. 6. Engage in collaborative practice efforts that are within one's scope of practice and competency.
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1b. Professionalism	<p>Professionalism means demonstrating behaviors that give consideration to the moral and ethical dilemmas children, youth, and their families confront. Professional behaviors incorporate collaborating with others, maintaining accountability, upholding respect and integrity, and following the standard of practice to provide safe care.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Practice self-reflection of one's values, beliefs, and behaviors which influence practice. 2. Maintain confidentiality, anonymity, and privacy in interactions with children, youth, and families. 3. Develop communication skills, both verbal and non-verbal, that demonstrate an awareness of audience when engaging with children, youth, and families and the collaborative team.
1c. Professional Development	<p>Professional Development means engaging in lifelong learning, both formally and informally. Learning should be goal driven and supported through mentoring and role transition from a student to a practicing nurse.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Develop goals to guide one's development. 2. Actively engage in informal and formal mentorship processes by participating in goal development and role modeling professional behaviors. 3. Demonstrate a commitment to seeking out learning opportunities.
<h2 style="margin: 0;">2. Values </h2>	
2a. Advocacy	<p>Advocacy means acting or speaking on behalf of and in support of children, youth, and their families.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Describe the impact of social and health policies on achieving health equity for children, youth, and their families. 2. Evaluate policies that promote health equity for children, youth, and their families. 3. Act or speak on behalf of children, youth, and their families to support patient autonomy and promote optimal growth and development.

<p>2b. Ethics</p>	<p>Ethics means upholding and promoting the standards of the profession by practicing in accordance with a state-specific Nurse Practice Act, Pediatric Nursing: Scope and Standards of Practice, agency policies, evidence-based practice and research guidelines, and the Code of Ethics for Nurses.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Provide for special confidentiality and privacy needs that are age appropriate. 2. Adhere to the child, youth, and family's right to privacy and the protection of personal health information (PHI) in compliance with Health Insurance Portability and Accountability Act (HIPAA), Family Educational Rights and Privacy Act (FERPA), and Individuals with Disabilities Education Act (IDEA) standards, and human subjects' protections. 3. Recognize pediatric specific ethical concepts including surrogate decision making, best interest standards, consent versus assent, and the right to autonomy as it applies to minors. 4. Participate in interprofessional ethical collaboration to ensure that the care provided is consistent with the needs and values of the child or youth and their family and is within codes of ethical practice.
<p>2c. Quality of Life</p>	<p>Quality of life means promoting and optimizing the child or youth's well-being as defined by the child or youth and their family.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Engage with the child or youth and their family to identify facilitators and barriers to optimize their well-being based on cultural beliefs and values. 2. Recognize quality and safety in the focused environment to support the child or youth's physical, cognitive, psycho-socio-emotional skills, and interactions to enhance their quality of life.

3. Principles



<p>3a. Equity/ Diversity/ Inclusion</p>	<p>Equity, Diversity, and Inclusion means providing care to children, youth, and their families that ensures equitable access to health and well-being, values their diversity (including, but not limited to, race/ethnicity, language spoken, gender identity, sexual orientation, religious belief, education, and socio-economic status), and is intentionally inclusive.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Recognize systemic, societal constructed factors that may inhibit attainment of equity, diversity, and inclusion.2. Demonstrate respect for individual differences and diverse communities and populations.3. Recognize internal and external system processes and structures that perpetuate racism and other forms of discrimination in health care.4. Participate in the implementation of socio-cultural and linguistically responsive interventions.5. Consider the socio-economic impact of delivery of health care.
<p>3b. Holistic Care</p>	<p>Holistic Care is the provision of care to children, youth, and their families that is based on a mutual understanding of their developmental, physical, psychological, sociocultural, emotional, and spiritual needs to optimize wellness.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Assess children, youth, and families for developmental, physical, psychological, social, environmental, emotional, and spiritual needs.2. Recognize and include the unique experiences and values of children, youth, and families in planning for care.
<p>3c. Patient- and Family- Centered Care</p>	<p>Patient and Family Centered Care is an approach to care that is driven by and attends to the preferences, values, and needs of children, youth, and their families.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Engage in a relationship that focuses on the child or youth and their family.2. Uphold the dignity of the child or youth and their family.3. Demonstrate respect for the culture, characteristics, and practices of the child or youth and their family.4. Share information at all times to foster participation in decision making with the child or youth and their family.

4. Care Delivery

4a. Care Coordination	<p>Care coordination means organizing care to achieve the best outcomes for children, youth, and their families.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Engage with the health care team to optimize the child or youth's plan of care.2. Participate in family-centered rounding for care planning discussion.
4b. Care Planning	<p>Care planning is the process by which children, youth, their families, and health care team discuss, agree, and review an action plan to achieve mutually agreed upon goals of most relevance and concern to children, youth, and their families.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Use the nursing process to synthesize and prioritize health assessment data to create an individualized, family-centered, plan of care with goals that are specific, measurable, realistic, and timely.2. Prioritize patient focused action plans that are safe and effective in relation to available resources.3. Collaborate effectively with children, youth, their families, and other members of the health care team utilizing principles of health literacy to meet individual needs of children, youth, and their families.4. Share complete, unbiased, accurate information with children, youth, and their families (situationally and developmentally appropriate) in a timely manner to facilitate effective participation and ethical decision-making in the child or youth's care.
4c. Health Promotion	<p>Health promotion is the process of enabling children, youth, and their families to increase control over and to improve their health.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Engage in activities to promote, maintain, restore, and improve holistic health and to prevent illness and injury across the lifespan.2. Examine the impacts of technology resources, health policy, and environment on health promotion.

5. Continuous Improvement



<p>5a. Evidence-Based Practice</p>	<p>Evidence-based practice is an approach that draws upon research, theory, and an understanding of the individual needs and preferences children, youth, and families during health care delivery. It involves critically appraising the quality, relevance, and value of available data and incorporating applicable findings into the clinical decision-making processes that govern patient and family centered care.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Identify sources of evidence used to inform clinical practice.2. Differentiate between levels of evidence.3. Demonstrate an understanding of basic elements of the research process.4. Apply theoretical frameworks in clinical practice.5. Discuss characteristics that should be appraised when evaluating research.6. Critique evidence for use in clinical practice.7. Formulate clinical questions.8. Identify potential barriers to the application of evidence to practice.9. Communicate scholarly findings.
<p>5b. Outcomes</p>	<p>Outcomes are the results children, youth, and families value most when seeking care.</p> <p>Competencies:</p> <ol style="list-style-type: none">1. Analyze data to identify gaps and inequities in care and monitor trends in outcomes.2. Recognize the impact of health disparities and social determinants of health on care outcomes.3. Elicit the goals and priorities of the child or youth and their family during the initial encounter, and confirm or update those goals and priorities during subsequent encounters.4. Respect and support family strengths.5. Support participation in care decisions for children, youth, and families by providing informed choices when possible.6. Validate children, youth, and families' levels of health literacy.7. Empower children, youth, and their families to make informed care decisions.8. Examine impacts of technical resources, health policy, and environment on health and well-being.

<p>5c. Quality Standards</p>	<p>Quality Standards means the degree to which health care services for children, youth, and families increases the likelihood of desired outcomes and should be consistent with current knowledge and practice expectations.</p> <p>Competencies:</p> <ol style="list-style-type: none"> 1. Participate in quality improvement activities and measurement initiatives. 2. Assess and mitigate risk for harm from the care environment. 3. Demonstrate awareness of pediatric-specific quality and safety measures and indicators. 4. Demonstrate awareness of limited applicability of adult data to the care of children, youth, and their families. 5. Demonstrate awareness of current Healthy People priorities. 6. Recognize deviations from standards that pose a risk to patient safety and respond appropriately.
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