



Feedback Collection Tool

This feedback collection tool is meant to guide regulated members in the collection and comprehension of feedback related to their own nursing practice.

The Regulation states¹ that feedback must be part of the regulated member's assessment of their own learning needs and the development of their learning plan to meet the annual requirements of the continuing competence program.

You will still need to enter the feedback you collect into MyCCP. Keep in mind that confidentiality extends to information about your colleagues as well as your clients/families. Do not use full names or any information that might identify an individual.

Preparation for collecting feedback

1. Reflect on your practice to help you prepare your questions. Is there something in your practice you would like to improve? Is there an opportunity for growth in your practice?

2. What are some of your strengths in your nursing practice? Can any of those areas be developed further?

¹ Registered Nurses profession Regulation 19.1(1)a-b

3. What are some of the areas in your nursing practice you identified for improvement?

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4. Have I ever received any suggestions for ways to grow or improve my nursing practice? If so, are any of them still applicable?

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5. Consider the following questions when selecting someone to collect feedback from about your practice:

- Are they familiar with your current practice?
- Are they familiar with the scope of your practice?
- Have you given them the option to decline?
- Have you selected an appropriate time and place for your discussion?
- Have you clearly explained the purpose of the feedback you are asking them for?
- Have you provided examples (where possible) of what you hope to learn about your practice?

6. Carefully consider who you would like to receive feedback from. List possible feedback sources:

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Collecting feedback	
The following prompts may help guide you when you are collecting feedback:	
<ol style="list-style-type: none"> 1. Here are some areas I have identified for growth or improvement in my practice. Do you have any suggestions or further feedback about those? 2. I've identified this potential area for growth in my practice. Can you suggest a specific learning need for me to focus on? 3. Specifically, I would like to know what you think about [this aspect] of my nursing practice. 	
Area to record feedback:	
I collected this feedback on this date:	Based on this feedback, I want to grow or improve my practice in regards to: Responsibility and accountability Knowledge-based practice Ethical practice Service to the public Self-regulation
My feedback was collected*: in a formal written performance review by a manager or supervisor as informal feedback from a manager or supervisor from a colleague familiar with my practice, after they made a comment that made me reflect on something I wanted to learn more about from an RN colleague from an NP colleague from another health professional from a non-health colleague from a client/client's family	

**Please do not include any personally identifying information when entering your feedback into MyCCP.*