

CLINICAL EXCELLENCE FOR THE REGISTERED NURSE

Policy Type: Nursing	Policy Description: Clinical Excellence
Developed: February 2016	Reference Number:
Review Date: August 2019	Standard:
Scope: Nursing Staff	Effective Date:
Developed By: Clinical Excellence Subcommittee	Retired: Nursing Clinical Excellence Program (v.2)

PURPOSE

The retention of professional nursing staff is a major focus of the Methodist Healthcare System (MHS). The development of Clinical Excellence Program for staff nurses is one approach to meet this goal. The concept of the Clinical Excellence Program reinforces the MHS utilization of the Caring Model that will assist in promoting and defining professional growth. The adaptation of the Caring model and the utilization of I-CARE values in everyday practice promote the advancement of nurses clinically focused on bedside nursing through levels based on criteria for education, experience and professional development. The program promotes evidence based professional practice, knowledge and skills, interpersonal relationships, commitment to patient perception of quality of care and leadership qualities. The Department of Nursing provides support in several ways to aid the nurse in his or her career advancement.

Cara, C. (2003). *A Pragmatic View of Jean Watson's Caring Theory*, www.humancaring.org (under "continuing education")

Watson, J. (2008). *Nursing: The Philosophy and Science of Caring* (rev. ed.), Boulder: University Press of Colorado.

Dempsey C (2014). *Compassion, Connected Care: Nurse Leaders must strive for clinical perfection while concentrating on improving the patient experience*. Advance for Nurse.

<http://nursing.advanceweb.com/Features/Articles/Compassionate-Connected-Care.aspx>

OBJECTIVES

The objectives of the Clinical Excellence Program are to:

1. provide an advancement choice that encourages nurses to remain at the bedside
2. differentiate between different levels of professional advancement
3. provide a mechanism for professional growth, recognition, accountability and succession planning
4. facilitate increased autonomy and accountability for the nursing staff in the clinical role
5. serve as a primary means of motivation for staff to maintain and increase their knowledge, skills and professional behaviors through advanced education and certification
6. promote staff development and education programs
7. promote job satisfaction
8. positively impact the quality of care delivered in the organization
9. promote the hospital mission
10. promote the efficient use of resources
11. recognize and reward staff for participation in Quality initiatives
12. serve as a philosophy and guidelines for the organization to provide a consistent approach to career enhancement in clinical areas
13. promote nursing research and evidence-based practice

DEFINITION

RN Level I – The Level I nurse is a new graduate or RN with little or no previous experience. The nurse is enrolled in an individualized orientation program or residency. This program provides an extended general classroom/unit orientation focusing on knowledge and skills needed to practice within the hospital. Upon completion of the orientation period, the Level I RN advances to the Level II RN.

RN Level II – The Level II Nurse seeks educational programs for clinical development appropriate to their specialized interests. The Education Department provides clinical in-services and certification reviews to assist in this process. These programs will help the nurse to advance in the system, as well as accept more responsibility on their unit. Upon meeting basic requirements for the department, the Unit Leader will guide the RN to begin the clinical excellence program.

RN Level III - The Level III Nurse has at least six (6) months experience as an RN, is off any orientation program, and has developed clinical and technical skills that prepare them for an expanded role in their unit as a mentor and resource for staff and patients. They are active participates on committees, able to utilize resources to investigate new practices, and present materials to their peers. Minimum requirements are met prior to application for this level.

RN Level IV-The Level IV RN has at least six (6) months experience as an RN and has obtained national certification in at least one area of nursing or acquired a BSN. The Level IV RN should be acting in a leadership role in their department. The Level IV RN is expected to seek additional educational opportunities to enhance personal professional growth as well as promoting team members. Minimum requirements are met prior to application for this level.

A. ELIGIBILITY REQUIREMENTS

The applicant must:

- Be a full or part time RN involved in direct patient care the majority of the time. Assistant Nurse Managers assigned to patient care duties for 40% of scheduled hours are eligible to advance in the Clinical Excellence Program.
- Be a staff member in good standing: No written warnings, final written warning or suspension within 12 months prior to letter of intent date to be eligible to apply. Employees who receive a written warning, final written warning or suspension through the portfolio review date are not eligible for approval. It is the responsibility of the Nurse Director to inform the committee and request the portfolio be returned immediately.
- Annual evaluation reflects that the applicant meets or exceeds in all categories.
- Complete yearly mandatory requirements for department/position (i.e. ACLS, PALS, E-Day, Ethics and Compliance Training).
- Provide a letter of intent and obtain the support of their Nurse Director.
- Be responsible for ensuring completion of clinical excellence program portfolio by providing **mandatory documentation**.
- Accumulate the minimum number of points:
 - I. **Education**
 - II. **Experience**
 - III. **Professional Development-Role Model**
(Refer to attached program scoring tool)
- Retain a copy of their portfolio prior to submission to Human Resources.

An employee who feels he/she has had their eligibility for application to the clinical excellence program denied by the manager due to a factor not stated in the Letter of Intent (e.g. harassment, discrimination) shall have the right to appeal the manager's decision by contacting the Clinical Excellence Chairperson via email and providing a detail discussion of issue. The chairperson will work with committee and senior leadership support toward resolution for this appeal.

B. THE APPLICATION PROCESS

The applicant must first meet with the Department Director to discuss their desire to apply. The Director must sign a Clinical Excellence Program Letter of Intent for the applicant. Newly hired RN's (with a minimum six months previous experience as an RN) can submit their Letter of Intent after the initial 90 days of employment with the plan to submit a portfolio within the given timeframe. Assistant Nurse Manager portfolio must include a Director's letter of support documenting that at least 40% of scheduled hours in are in direct patient care and/or charge nurse duties.

All application packets/portfolio's, must be completed in full. Applications must be submitted in a three-ring binder with dividers separating each section and **must be typed or neatly written**. The applicant must use the program's templates, provided within this policy, to assure that all required documentation is submitted. The portfolio must have the appearance of a professional document. Based on the documentation the council may approve a lower level, if criteria for upper level is not met.

Registered Nurses may be hired on any Level of the ladder that they meet or will meet criteria within the first nine months of hire. (if for any reason, the newly hired nurse must take a leave of absence during the first nine months, the amount of time taken will be added to the nine months to allow for enough time to meet the criteria. Ex: RN is hired on January 1 at a Level III, after working for 4 months must take a LOA for medical reason and is out for 2 months, the new date would be December 1 instead of October 1.) In this case, it is the responsibility of the Director to alert the Clinical Ladder Committee and their immediate supervisor (VP, CNO) of the delay.

C. THE CLINICAL EXCELLENCE PROGRAM & REVIEW COMMITTEE

The purpose of the committee is to maintain consistency and quality of the program throughout the Nursing Department. The committee is empowered to approve and/or deny applicants based upon portfolio submissions.

The committee consists of a senior nursing leadership representative and liaisons from all facilities that serve as a resource for staff applying or validating a level. Any changes or questions regarding the Clinical Excellence Program/policy or eligibility requirements will be addressed as needed.

The Clinical Excellence Program Committee will meet quarterly to review packets. Once the review process is completed and the portfolio is either denied or approved, letters will be sent out within set timeframes.

D. THE CLINICAL EXCELLENCE PROGRAM APPEAL PROCESS

If the clinical excellence program committee denies an application or approves at a lower level the applicant may appeal the decision. The appeal shall be submitted in writing to the chair within fourteen (14) calendar days from notification of the decision, and contain specific rationale for the appeal. Appeals should include rationale consistent with the clinical excellence program policy under which the portfolio originally submitted. The committee will hold denied portfolios until the appeal deadline is complete to assure that the portfolio can be reviewed in its original condition. No changes are allowed from the original portfolio prior to the conclusion of the appeal process. The applicant should refer to their copy of their portfolio for review if needed for the appeal process.

Step One:

The chair will forward the written appeal to the committee Senior Nursing Leader and the Director of the applicant's department. The Senior Nurse Leader will review the appeal and portfolio, and within 14 calendar days forward a decision to the chair whether to accept or reject the appeal.

Step Two:

If the appeal is accepted by the Senior Nurse Leader representative, the committee chair will submit the clinical excellence program portfolio and written appeal letter to a sub-committee for review. The subcommittee will consist of at least five committee representatives in addition to the Senior Nurse Leader, chair and co-chair of the committee. Within a 30-day timeframe, the sub-committee will meet to discuss the portfolio in question. The letter of appeal must be present with the portfolio. The decision of the Clinical Excellence Program sub-committee will be the final decision in the appeal process. In the event of a tie vote, the committee's Senior Nurse Leader representative will cast the deciding vote.

Step 3:

The subcommittee's final decision will be sent to the applicant, the applicant's Nurse Director and the Chief Nursing Officer of the applicant's facility in addition to the committee Senior Nurse Leader representative.

If the review demonstrates the original decision was in error, the Nurse Director from the date of the packet's original review date timeline will request retro pay.

The committee will maintain utmost confidentiality with all work regarding applications and decisions made.

E. MAINTENANCE/VALIDATION PROCESS

It is the responsibility of the staff nurse to maintain a record in the form of a portfolio of his/her activities and achievements. The staff member is encouraged to work with the Nurse Director or committee liaison to assure that all documentation meets the program standards prior to the review. The Nurse Director, with the assistance of unit liaison(s) will review and validate that the staff member is meeting criteria. Validation for staff participating in the program will be every two years. Transition process is detailed in this policy.

The staff member must be in good standing: meets or exceeds all categories on the review template, no written warnings, final written warning or suspension within 12 months. If the staff member receives a written warning, final written warning or suspension twelve months prior to the portfolio review the staff member is not eligible for this program. The Director is responsible to assess if re-leveling is appropriate. The Director will inform the Clinical Excellence committee if a staff is re-leveled.

F. AUDITING PROCESS

A registered nurse that is participating in the program is subject to an audit. The Clinical Excellence Committee will perform audits each quarter starting September 2019. Audits will be randomly selected from the combination of the HCA facilities within the San Antonio Market. An amount no greater than 10% of the total participants will be randomly selected for auditing by the subcommittee. If selected, a letter will be sent to the program staff member and the staff member's Director 60 days in advance of the auditing due date. The committee will review the portfolio to confirm maintenance. If a staff member is selected for audit during the annual evaluation period, the audit can serve as the maintenance confirmation.

If the staff member cannot submit the portfolio within the 60-day timeline in order to confirm maintenance a letter to the Director, Chair of committee, and CNO must be sent in an effort to resolve the issue immediately and prevent re-leveling. Assistance of the department liaisons and committee chair/co-chair may be obtained for guidance.

If a nurse is selected for the auditing process and has completed this they are exempt from being pulled a second time for a period of three years.

G. TRANSITION

For new applicants the transition period from the old program to the new program will be 9 months from the policy's approval date. The new program will be in full effect at that time. All future review quarters will only accept portfolios utilizing the new program.

For transition: Staff members currently in the program will submit a letter of Intent to the Unit Director within nine (9) months of the policy's approval date. The Director will maintain the letter of Intent and Program Scoring Tool in the employee's unit file. The staff member will submit a portfolio with supporting documentation for points as discussed in the original Letter of Intent for final submission. This record and portfolio will be subject to audit by the Clinical Excellence Committee if selected.

The unit director, Senior Leader Representative, and CNO may consider re-leveling for those individuals that do not meet minimum requirements for this specific area. The 9 month timeframe allows for the individual to apply for National Certification testing and/or enrollment into a BSN program.

LETTER OF INTENT

Employee Name

, meets the eligibility requirements, has attended all mandatory in-service training for the prior year, has a satisfactory performance evaluation and is an exemplar of all aspects of the caring model. Patient satisfaction has become an important indicator of quality care. The employee understands the importance of the Caring Model philosophy and its role in quality patient care as evidenced by incorporating the seven uniquely defined concepts and behaviors in the MHS I-CARE values:

1. The nurse introduces himself/herself to the patients and explains role in caring for them during visit.
2. The nurse addresses the patient by name of preference.
3. The nurse spends time at the bedside with the patient to help them better understand the care they receive.
4. The nurse demonstrates empathetic behaviors and serves as a patient advocate.
5. The nurse uses MHS's mission, vision and value statements to enhance the planning of patient care.
6. The nurse has had no written warning, final warning or suspension within 12 months of this letter of intent.
7. The nurse has demonstrated knowledge of quality indicators specific to their facility.

The employee is eligible to submit an application for the Methodist Healthcare System Clinical Excellence Program.

Approved

Declined / Reason _____

Director/Manager Signature

Date

Employee Signature

Date

I am applying to obtain/maintain (circle one) RN Level III

RN Level IV

I understand that if I do not meet the criteria for the level I am applying for, it is possible for me to receive a lower level if I fulfill those requirements.

Employee Email Address: _____

Employee Physical Home Address: _____
Address City Zip Code

Attention Applicant: Complete this form and photocopy. Include a copy in your portfolio and submit the original to your Department Director.

Department Director: Place completed form in the employee's unit specific file.

MHS Clinical Excellence Applicant Checklist

Name: _____ Date of Hire: _____

Contact information: _____
Phone number Email address

Facility: _____ Mailing Address: _____

Director Name: _____ Department: _____

Liaison Name: _____ Contact Number: _____

Circle one: Full-time Part-time Applying for Level: III IV

Basic Eligibility Checklist

1- Current Licensure	
2- Director's signed Letter of Intent	
3- Continuous employment either full-time or part-time	
4- Absence of any disciplinary actions	
5- Annual evaluation meets or exceeds categories on/or previous evaluation	
6- Registered Nurse delivering direct patient care	
7- Complete yearly mandatory requirements for department/position (i.e. ACLS, PALS, E-Day, Ethics and Compliance Training)	
8- Points must be achieved in all three categories: Education, Experience, and Professional Development	

Basic Requirements

<u>Category</u>	<u>RN Level III</u>	<u>RN Level IV</u>	<u>RN Checklist III/IV</u>
Years of RN Experience	Six (6) months	Six (6) months	
Contact Hours	10 contact hours	20 contact hours	
Education	Diploma, ADN, BSN	BSN or Specialty Certification required	
Participation in evidence based practice (EBP)	Participation in one (1) Evidence Base Practice (EBP) activity	Participation in two (2) Evidence Base Practice (EBP) activities	
Committees	Participation in one (1) committee	Participation in two (2) committees	
Total Points	<u>26 points</u>	<u>42 points</u>	_____
Professional Development/Role Model	*Minimum 50% of additional points must come from professional development <i>See category III in Scoring Tool*</i>		

Program Scoring Tool

Program Criteria	Max Points	Final Points	Leader Initials
I. EDUCATION: Continuing-Enrolled-Certification			
A. Advance nursing education/related degrees <i>(Academic Credit must be nursing related)</i> BSN enrolled= 2pts, completed= 4pts. BS in related field= 2pts. MSN enrolled = 2pts, completed= 5pts. MS in related field = 4pts. Doctorate enrolled= 2pts, completed= 8 pts. Doctorate in related field= 6pts.	8 pt. max		
B. Contact hours: (* see policy for details on points claimed with academic credit) 1 contact hour = 1 pt. 1 semester hour of academic credit = 15 hours of nursing continuing education, Academic credit can be used for section a or b , but cannot be duplicated.	20 pt. max		
C. Nationally Recognized RN Certification 5 points for current certification specialty area, 1 point for each secondary certification	7 pt. max		
D. Certified Instructor i.e. ACLS, BLS, PALS, TNCC, NRP, Tele., etc. = 3 pts each	6 pt. max		
E. Specialty Course Completion <i>(courses taken that are not required for current position):</i> i.e. ACLS, PALS, Chemo, Pears, PICC, etc. = 2 pts each	6 pt. max		
II. EXPERIENCE			
A. Service Loyalty: (years of experience at an HCA facility as an RN) 1-5yrs = 4pts, 6-10yrs = 5pts, 11-15yrs = 6pts, 16-20yrs = 7pts, 21-25yrs = 8pts, 26+ yrs = 10 pts	10 pt. max		
B. Prior RN healthcare experience: (excluding HCA years of experience) 1-10yrs = 2pt, 11-20yrs = 3pts, >20 = 4pts	4 pt. max		
C. Past LVN/CNA/Technician experience within a healthcare facility: 1-5yrs = 0.5pt, 6-10yrs = 1pt, 11-15yrs = 1.5pts, 16-20yrs = 2pts, 21-25yrs = 2.5pts, 26+ yrs = 3pts	3 pt. max		
D. Prior EMT/RT experience: 1-5yrs = 0.5pt, 6-10yrs = 1pt, 11-15yrs = 1.5pts, 16-20yrs = 2pts, 21-25yrs = 2.5pts, 26+ yrs = 3pts	3 pt. max		

Program Criteria	Max Points	Final Points	Leader Initials
III. Professional Development-Role Model			
A. Evidence Based Nursing Practice - (Requirement: Level III - one activity, Level IV two activities)			
1. Poster: Unit = 6 pts, Facility= 8 pts, System = 10 pts, Regional = 12 pts, National = 14 pts Podium Presentations: Local = 8 pts, State = 10 pts, National = 12 pts.	No Max		
2. Article Contribution/Publication: Facility/Newsletter = 8 pts, Local = 10 pts, National Journals = 12 pts			
3. Projects to include "process improvement projects": Unit = 4 pts, Facility= 6 pts, System = 8 pts / Team Lead will receive additional 2 pts.			
4. Teaching/In-Services: Unit = 3 pts, Facility= 6 pts, System = 9 pts			
5. Clinical Policy Development/Review: 6 points			
6. Development of Patient Education Materials: 6 points			
7. Journal Presentation: Unit = 3 pts, Facility= 6 pts, System = 9 pts, Regional = 12 pts, National = 15 pts			
B. System/Facility/Unit Based Councils/Committees -(Requirement: Level III/1 committee, Level IV 2 committees)			
1. Chair: Unit = 3pts, Facility = 4pts, System = 6pts	20 pt. max		
2. Co-Chair: Unit = 1pt, Facility = 2pts, System = 3pts			
3. Committee/Council Participation: Unit = 2pts, Facility = 3pts, System = 4pts			
C. Professional Nursing Organization:			
1. Membership Only: Initial = 2 points & 1 point for each additional membership	No Max		
2. Active Member: 2 points per activity			
3. Chair, Board Member, or Officer: 5 points for each office held			
D. Expanded Role:			
1. Charge Nurse/Team Lead: Permanent Charge = 5 pts, Relief Charge = 7 pts* * A minimum of 10 shifts/year for Relief Charge Nurse. If Relief Charge Nurse does not meet 10 shifts/year, an accumulation of 0.5 pts will be given per shift worked with 7 point max.	7 pt. max		
2. Coach/DEU/Immersion/Capstone:			
a. Completion of System Preceptor Development Course = 2 points	2 pt. max		
b. Preceptor Employee/Student: 36-40 hours = 1pt, 41-80 hrs = 2pts, 81-120 hrs = 3pts, 121-160 hrs = 4pts, 161-200 hrs = 5pts, >200 hrs = 6pts	6 pt. max		
3. Mentorship Program = 2 points for each RN	6 pt. max		
4. Cross Training/Teamwork:			
a. Cross Training = 1 point per shift (must be outside of float requirements)	6 pt. max		
b. Teamwork = 0.5 point per shift (additional shifts within department)	3 pt. max		
5. Advanced Practice Skills: 2 points each (i.e. CRRT, VAD, ECMO)	No Max		
6. Formal Superuser/Resource: 1 point per activity (i.e., eMar, Infusion pump, Meditech, CPOE, etc)	3 pt. max		
7. Preparing or assessing yearly competencies approved by director: Assessment = 1 point, Preparation = 2 points	5 pt. max		
8. Quality Auditing: 1 point per audit (i.e. handwashing, chart reviews, restraints)	6 pt. max		
9. Scheduling: 0-6 months = 1 point; > than 6 months = 2 points	2 pt. max		

Program Criteria	MAX POINTS	FINAL POINTS	LEADER INITIALS
III. Professional Development-Role Model			
E. Community Service:			
1. Health care related or hospital sponsored: 1 hour = 1 point	7 pt. max		
2. Non-Health related: 1 hour = 0.5 point	5 pt. max		
3. Military Service: 1 point	1 pt. max		
F. Service Excellence/Award Winner:			
1. Recognition = 1 point each	3 pt. max		
2. Award Winner/Nomination: Recipient = 3points, Nominee 2 points	3 pt. max		
	Total Points		

Employee Signature: _____ Date: _____

Liaison Signature: _____ Date: _____

Director Signature: _____ Date: _____

Points are validated using the following templates:

I. EDUCATION: CONTINUING-ENROLLED-CERTIFICATION (INCLUDE DATES WHEN APPROPRIATE)

A. Advanced Educational Nursing Degrees (8 points max):

Baccalaureate Degree in Nursing _____ 4 points

Baccalaureate Degree in Related Field _____ 2 points

(I.e. Science fields, Nutrition, Psychology, Social Work)

Master's Degree in Nursing _____ 5 points

Master's Degree in Related Field * _____ 4 points

Doctorate Degree in Nursing _____ 8 points

Doctorate Degree in Related Field* _____ 6 points

Enrolled in Baccalaureate, Master's, Doctorate programs _____ 2 points

*** Required Documentation: Attach letter of enrollment or transcript ***

B. Contact Hours (20 points max):

1 Contact Hour = 1 Point

1 Semester Hour of Academic Credit = 15 Contact Hours

Academic credit can be used for section A or B, but cannot be duplicated.

***Required documentation: Attach a list detailing activity Date of Completion, Title and CEU earned in addition to certificate of completion and/or MHS Healthstream transcript.*

C. Nationally Recognized RN Certification (7 points max):

Certification in current specialty area = 5 points

Non-Specialty/Secondary National Certification = 1 point each

***Required documentation: (Attach copy of **current** Certification)*

Certification Title: _____

Certification Title: _____

Certification Title: _____

D. Certified Instructor (6 Points max):

BLS, ACLS, PALS, Fetal monitoring, NRP, Child Birth Classes, Tele instructors, TNCC – 3 points each

***Required Documentation: Attach copy of card per certification. List activity below*

E. Specialty Course Completed within review timeline and NOT required by job description (6 Points max):

Examples: ACLS, PALS, Chemo, PEARS, PICC = 2 points each

***Required Documentation--Attach copy of card/certificate. List course title below*

II. Experience – See grid below -- ** Required documentation--provide name of facility, title held, and dates of employment**

A. Service Loyalty - years of experience at an HCA facility as an RN. (10 Points max)

Date of Hire: _____ Total years: _____

B. Prior healthcare experience (excluding HCA nursing experience). (4 Points max)

Facility: _____ Dates at Facility: _____ Total years _____

Facility: _____ Dates at Facility: _____ Total years _____

Facility: _____ Dates at Facility: _____ Total years _____

Facility: _____ Dates at Facility: _____ Total years _____

Facility: _____ Dates at Facility: _____ Total years _____

Total years practicing as an RN in an Acute Care setting prior to HCA employment. _____

C. Past LVN/CNA/Technician experience within a healthcare facility (3 Points max)

Facility: _____ Dates: _____ Total years _____

D. Prior EMT/RT experience (3 Points max)

Facility: _____ Date: _____ Total years _____

For A	
1- 5 years _____	4 points
6 – 10 years _____	5 points
11 – 15 years _____	6 points
16 – 20 years _____	7 points
21 - 25 years _____	8 points
26+ years _____	9 points

For B	
1-10 years _____	2 points
11-20 years _____	3 points
>20 years _____	4 points

For C & D	
1-5 years _____	0.5 points
6-10 years _____	1 point
11-15 years _____	1.5 points
16-20 years _____	2 points
21-25 years _____	2.5 points
26+ years _____	3 points

III. PROFESSIONAL DEVELOPMENT-ROLE MODEL SUMMARY (include dates when appropriate)

A. Evidence-Based Nursing Practice Activities

No maximum for Evidence Based Nursing Practice Activities. Reference scoring tool for point values

Every RN must document participation in Evidence-Based Practice per level requirements.

All of the following options must be accompanied by evidence base reference(s).

1. Poster - Complete a poster that highlights current evidence-based nursing practice. Posters that are viewed outside your department require approval of Director/Educator. *Include the following in your documentation:*
 - Relevancy/objectives of topic to department/practice
 - Copies of evidence-based sources
 - Sign-in sheet of viewer with date on activity
 - Picture of poster
2. Article Contribution/Publication – *Include the following in your documentation:*
 - Publication of evidence based nursing related articles assure that date is on documentation
 - Copy of publication or abstract
3. Projects (includes process improvement projects) – *Include the following in your documentation:*
 - Relevancy/objectives of topic to department/practice
 - Copies of evidence-based sources
 - Sign-in sheet of viewers assure that date is clearly documented
 - Project outline
 - Identify team lead and/or participants

If project is a “process improvement project” **** Required documentation: Attach documentation/explanation to support project improvement goal. Include month, day and year of activity****

4. Teaching/In-services – Conduct a teaching/in-service using at least one Evidence-Based reference(s).
Include the following in your documentation:
 - Relevancy/objectives of topic to department/practice
 - Copies of evidence-based sources
 - Sign-in sheet of viewers assure that date is clearly documented
 5. Clinical Policy Development/Review - Revise and implement a clinical policy or participate in a review using evidence-based practice literature or research.
Include the following in your documentation:
 - Original policy or procedure. Assure that completion date is included in documentation
 - Evidence-based sources used in the revisions/review
 - Department approval for unit-specific revisions or approval of the hospital’s Practice Council for hospital wide revisions. This must be done before implementation.
 - Revised policy and procedure
 6. Development of Patient Education Materials - Develop and implement a patient education resource or edit and implement an existing patient education resource using evidence-based practice literature or research. *Include the following in your documentation:*
 - Need for the new or revised education resource
 - New or revised education resource
 - Copies of evidence-based sources
 - Date of Department Director/Educator approval
-

C. Professional Nursing Organizations

(All membership, activities, and offices held must be within review timeline)

**** Required documentation: submit a current membership card. For activities, include dates.**

Name of Organization: _____

Name of Organization: _____

Name of Organization: _____

1. Membership Only

2 points for the first membership – no maximum

1 point for each additional membership

****Additional required documentation - Attach copy of current membership card**

2. Active Membership - (2 points per activity – no maximum)

Provide a description of membership activities. For example: participate in conferences, volunteering with local chapter, subcommittees of organization.

****Required Documentation: Submit copy of attendance record, official letter or other documentation support. Assure that dates are clearly stated)**

3. Chair, Board Member, or Officer - (5 points for each office held - no maximum)

Briefly describe the office held and responsibilities

(Must submit official validation from organization with dates clearly stated):

D. Expanded Role

1. Charge Nurse/Team Lead (7 points max):

- Permanent charge nurse = 5 points

- Relief Charge Nurse = 7 points, for 10 charge shifts per year.

If relief charge nurse does not meet 10 shifts per year, an accumulation of 0.5 points will be given per shift worked with a 7 point maximum.

*****Required Documentation: Provide dates below; include Month, date and year.**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Mentorship Program (6 points max):

Formal mentorship program for new staff = 2 points for each RN.

**** Required documentation: Attach letter of verification or validation from Program Chair Signature below ****

Program Chair Signature: _____

Date	Name	Job title
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Cross Training/Teamwork:

Cross Training/Outside of float requirements = 1 point per shift (6 points max).

****Required documentation List dates below (month, day and year)**

** Examples for this can include: Surgical RN floats to ED, ED nurse floats to ICU, Oncology floats to Medicine, PEDI floats to Adult, etc.*

_____	_____	_____
Department/Date	Department/Date	Department/Date
_____	_____	_____
Department/Date	Department/Date	Department/Date

Teamwork indicates additional shifts within department = 0.5 point per shift (3 points max).

**Team work is anything scheduled above FTE designation or called in on scheduled day off.*

****Required documentation: List dates below (month, day and year).**

_____	_____	_____
_____	_____	_____

5. Advanced Practice Skills (2 Points each/no max):

Examples: (CRRT, VAD, DIEP, ECMO, CHEMO, etc.)

Advanced Practice Skills: _____

Leader/Educator Signature: _____

****Required documentation: Attach documentation, i.e., competency or return demonstration form****

6. Formal Superuser/Resource (1 point per activity/3 point max):

Examples include IV/PCA Pump, Glucometer Point of Use, EMR/CPOE, Cardiac Monitoring, Epidural, Wound Vacs, etc.

Activity title: _____

Activity title: _____

Activity title: _____

7. Preparing or assessing yearly competencies approved by director (5 Points max):
1 point for assessment 2 points for preparation

Competency Title: _____ circle one: Assess Prep Date: _____

Competency Title: _____ circle one: Assess Prep Date: _____

Competency Title: _____ circle one: Assess Prep Date: _____

Competency Title: _____ circle one: Assess Prep Date: _____

**** Required documentation: Attach a copy of the competency****

8. Quality auditing (6 points max): 1 point per audit **completed for at least 6 months**

Examples can include: hand hygiene, chart reviews, fall prevention, central line, restraints, Foley care, post pain assessments, SCIP, etc.

****Required Documentation: Title of activity and date completed.**

_____ Name of audit	_____ Date of participation	_____ Total months
_____ Name of audit	_____ Date of participation	_____ Total months
_____ Name of audit	_____ Date of participation	_____ Total months
_____ Name of audit	_____ Date of participation	_____ Total months
_____ Name of audit	_____ Date of participation	_____ Total months
_____ Name of audit	_____ Date of participation	_____ Total months

9. Completes Staff schedule 2 points max

0-6 months = 1 point

> that 6 months = 2 points

Dates: _____

****Required documentation: validated by Directors initials on point menu****

E. Community Service

1. Health care related or hospital sponsored (7 points max): 1 point per every 1 hour
Examples: American Heart Association, American Cancer Society, United Way, etc.
2. Non-health related (5 points max): 0.5 point per every 1 hour.

****Required documentation for 1 & 2: Applicant must attach letter of acknowledgement or certificate regarding participation. Assure that the date is clearly stated on the document or letter.**

Definition: Active involvement in event – not just a donation to the event.

3. Military Service: 1 point

****Required Documentation: Retired/copy of discharge papers, Active duty copy of Active duty card.**

F. Service Excellence/Award Winner (6 points max)

1. Recognition: Must be from a family, another department, or supervisor of another Department: one point each, 3 points max.
 - Submit communication received from patients and families to validate example.
 - Communication via email from supervisor or written note can be submitted.
 - Rewards or recipient recognitions may also be submitted.
 - Assure that the dates are clearly on the these documents
2. Award winner/nomination: Examples include Daisy, Nurse of the Year, Employee of the Year/Quarter, Clinical Excellence award, Seahorse)
 - Recipient = 3 points
 - Nominee = 2 points

****Required Documentation** Attach email, certificate, or nomination form for validation. Assure that the dates are clearly on the these documents ****
