

# **REGISTERED *PROFESSIONAL NURSE* *CLINICAL CAREER LADDER***



**Effective February 17, 2020**

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Additional / Separate Tools
Charge Nurse Competency
Preceptor Competency
Evidence Based Practice Algorithm
PDSA Project- obtain from your manager, director or Organizational Development <ul style="list-style-type: none"> <li>• PDSA 2019</li> <li>• Phelps Blank Indicator File Version 3.5</li> </ul>
Peer Appraisal of Professional Practice (for advancement only)
Clinical Ladder Level Requirements Grid

## **Maintenance and Advancement Instructions**

### **Maintenance:**

1. Each RN is responsible for fulfilling the requirements of their current career ladder level.
2. Become familiar with Clinical Career Ladder Level Requirements.
3. Ensure ongoing compliance with requirements for current level over the course of each year.
4. For new employees and transfers, a minimum of 1 year at your hired / transferred level is required before you are eligible for advancement to the next level.
5. **Complete portfolio and attach needed items for the level you are maintaining.** Utilize tools in packet for documentation of validation of activities.
6. For PI, EBP, research projects, complete Phelps EBP Template.
  - Present the project proposal to the New Knowledge Shared Governance Council
  - Approval will be provided and mentor assigned by Nurse Researcher, Magnet Program Director and/or New Knowledge Council.
7. Submit education projects to Organizational Development for approval and compliance with ANCC education guidelines.
8. **If requirements are not met or maintained, you will be moved to the appropriate lower ladder level.** You may be eligible to re-apply after **6 months** in the lower level.

### **Advancement:**

1. Review your previous performance appraisal. If anything is in need of improvement, you need to improve upon that and have a subsequent performance appraisal reflecting that improvement before seeking advancement.
2. Ensure you are compliant for the past year with the time and attendance policy; i.e., consistently on time at shift start time and not exceeding unplanned PTO.
3. Make appointment with Nurse Manager and discuss plan to advance.
4. If Nurse Manager agrees, ask the Nurse Manager to assign two of your peers to complete a peer appraisal. Obtain Nurse Manager Signature on eligibility attestation.
5. Complete portfolio and attach needed items for the level to which you are requesting advancement. Utilize tools in packet for documentation of validation of activities.
6. Complete the Self-Appraisal of Professional Practice.
7. For projects, complete Phelps EBP Template.
  - a. Present the project proposal to the New Knowledge Shared Governance Council

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- b. Approval will be provided and mentor assigned by Nurse Researcher, Magnet Program Director and/or New Knowledge Council.
8. Use leadership logs to provide evidence and documentation of leadership activities.
9. Submit education projects to Organizational Development for approval and compliance with ANCC education guidelines.
10. If you are considering skipping a level, please follow instructions.
11. Send completed Portfolio, Eligibility Attestation, Statement of Professional Goals, Self-Appraisal of Professional Practice, and supporting documentation (as applicable) to the Nursing Credentials Council member for your unit. This representative will assist you in the advancement application process. Your unit representative will forward your documents to the Credentialing Council chairperson.
12. Depending on the review of your application, you will receive one of three emails: Advancement Recommendation, Incomplete Submission, or Advancement not recommended. If you receive an advancement not recommended email, you may follow the appeal process or reapply 3 months after the date of the email.

## Portfolio

Name:	ID #:	Department:
Hire Date:	Length of Service in current department:	
Degree(s):	Current Level:	Level for which applying:

### Include the following in your Clinical Career Ladder Portfolio:

1. Current resume
2. Signed copy of current NYS Nursing Registration
3. Copy of current BLS, ACLS, PALS, NRP card (as applicable)
4. Copies of last 12 months of HealthStream and iLearn Transcripts
5. Copy of workshop completion certificates for level required:
  - a. Conflict and Delegation Workshop
  - b. Evidence Based Practice (EBP) Workshop
  - c. Being in Charge: A Professional Development Workshop
  - d. Preceptor Workshop
6. Copy of current Specialty Certification Certificate(s)
7. Evidence of required number of contact hours for level (transcript or certificates)
8. List shared governance council or hospital committee membership(s), role, & **evidence** of 60% attendance -Level II; 70 % attendance - Level III; 75% attendance - Level IV.
9. Provide evidence of the leadership activities with which you are involved.
10. Evidence of national professional organization(s) membership, recommended for levels II and III; required for level IV
11. **Professional** award(s) / recognition you have received within the past year (for example, nomination or winner of Phelps Rising Star or Nurse of Distinction award, nursing professional organization recognition or award.
12. Statement of professional development goals- properly formatted SMARTS (specific, measureable, achievable, relevant / realistic, time based, strategic) goals, type written summary. Identify short term and long term professional development goals and current activities that are moving you toward meeting those goals.
13. Self-appraisal completed.

### For advancement only: Manager Eligibility Attestation

Advancement eligibility:	Manager Signature and Date:
All criteria on current performance appraisal scored no less than ("M") meets expectation and there has been no discipline within past year.	
I attest that this employee consistently demonstrates professional behaviors and complies with all policies.	
I attest that this employee is in compliance with the HR time and attendance policy; twelve month report attached.	
As requested by applicant I have assigned peer appraisal #1.	
As requested by applicant I have assigned peer appraisal #2.	

### Skipping a Level Instructions:

- Complete all aspects of the portfolio.
- Complete the self – appraisal for each level; the level being skipped and the level for which the applicant is aspiring to achieve.
- Request the manager assign **2** peer appraisals for the level being skipped **and 2** peer appraisals at the level for which the applicant is applying. For instance, if the applicant is applying to move from a level I to a level III and is skipping level II, they will need 2 peer appraisals for level 2 and 2 peer appraisals for level 3.
  - The applicant must have worked with the peer appraisers for a minimum of 6 months.
- The applicant must satisfy all the requirements for the level for which they are applying and the leadership activities for the level skipped and the leadership activities for the applied level, **without overlap**.

Applicant name / title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print)

[illegible]

7

Applicant name / title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print)

[illegible]

8



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Leadership- **Champion Log** - Below is a log of my experiences as a Champion.

Applicant name / title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print)

Dates	Shift	# Hours	Specific type of Champion activity (Skin, Transfer Mobility Coach (TMC) Organ Donor). Document specifically what was performed.	NM, ANM, Education Specialist, or Clinical Educator Signature

Total Hours: \_\_\_\_\_

Leadership- **Competency Station Log** - Below is a log of my competency experiences.

Applicant name / title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print)

Dates	Shift	# Hours	Competency Station- list specific activity related to competency station (researched and developed station, provided station session, etc.)	NM, ANM, Education Specialist, or Clinical Educator Signature

Total Hours: \_\_\_\_\_

Applicant name / title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print)

[illegible]

11

Applicant name / title: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print)

[illegible]

12

**Committee / Task Force Attendance Validation**

Date: \_\_\_\_\_

To Nursing Credentials Council:

From: \_\_\_\_\_  
(print name, title, unit/dept.)

I validate that (print applicant's name) \_\_\_\_\_

is a member in good standing of \_\_\_\_\_

(committee / task force name) and has attended \_\_\_\_\_percentage of  
meetings held in the past year.

\_\_\_\_\_  
Signature and Title of Chairperson

**Leadership Education Project(s) Attestation**

Date: \_\_\_\_\_

To Nursing Credentials Council:

From: \_\_\_\_\_  
(Print name, title, unit/dept.)

I validate that (print applicant's name) \_\_\_\_\_

has participated in \_\_\_\_\_ (education  
activity) and has performed (list all components of activity in which individual has  
participated):

Attach approved lesson plan

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Signature and Title Organizational Development Education Specialist

### **Leadership Project(s) Attestation**

Date: \_\_\_\_\_

To Nursing Credentials Council:

From: \_\_\_\_\_  
(Print name, title, unit/dept.)

I validate that (print applicant's name) \_\_\_\_\_

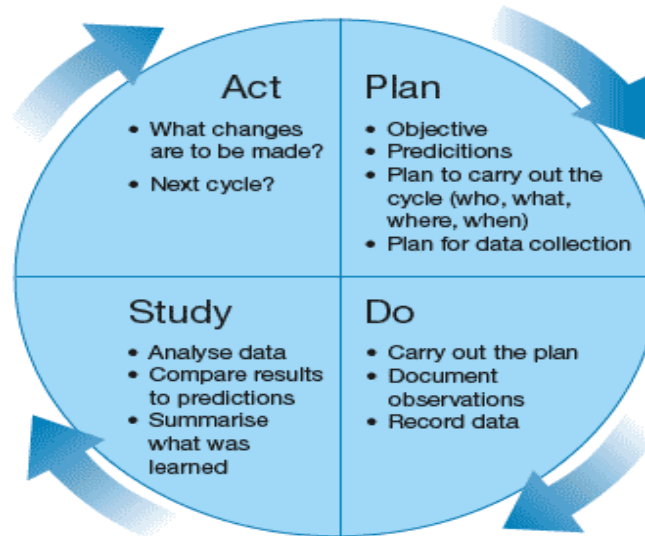
has participated in \_\_\_\_\_ (leadership project) and has performed: (list all components of activity in which individual has participated, including goal, plan, activity implementation and outcome; please ensure director approves project before beginning. It is required that either the Phelps Indicator File Version 3.5 or the PDSA 2019 tool be used for PI projects.

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Signature and Title of Manager or Director

## Plan, Do, Study, Act (PDSA) Overview

This Plan, Do, Study, Act (PDSA) overview provides the guidelines to use for performance or process improvement.



<b>Plan, Do, Study, Act (PDSA) Overview</b>	
Plan- identify goal. The goal should answer:	<ul style="list-style-type: none"> <li>• What are we trying to accomplish, state the question you want to answer, <i>the objective</i></li> <li>• How will we know that change has occurred and is an improvement, <i>the prediction</i></li> <li>• What change can we make that will result in improvement, <i>the plan to carry out the change (who, what, when, where and how)</i></li> <li>• Identify plan for data collection and develop tools as needed for data collection</li> <li>• <b><i>Collaboratively with your manager or director, select either the Phelps Indicator File Version 3.5 or the PDSA 2019 tool for documentation and tracking of the project. These tools are available from your nurse manager, director or organizational development.</i></b></li> </ul>
Do- carry out the plan.	<ul style="list-style-type: none"> <li>• Document observations</li> <li>• Collect and record data</li> </ul>
Study- analyze data	<ul style="list-style-type: none"> <li>• Compare results to predictions; <i>was the goal accomplished</i></li> <li>• Summarize data and reflect on what was learned</li> </ul>
Act- what changes need to be made	<ul style="list-style-type: none"> <li>• If goal was not accomplished, identify needed changes and plan for running another PDSA</li> <li>• If goal was accomplished develop plan to sustain and continue monitoring</li> </ul>



## **For Advancement- Appraisal of Professional Practice**

Self and peer appraisal are part of the credentialing process. Self-appraisal provides an opportunity for the nurse to validate his/her own level of professional practice and teamwork. Peer appraisal provides an objective means to obtain feedback from the nurse's peers about the applicant's professional practice and teamwork. It supports a system that encourages professional assessment and accountability.

Complete the Self-Appraisal of Professional Practice tool included in this packet. Then request that the Nurse Manager assign two peers at your level (or above) to complete a Peer Appraisal of Professional Practice. **The Peer Appraisal of Professional Practice Tool is a separate document found on the intranet.** The applicant's Nurse Manager will select two peers; when possible selection will include one peer from the same shift the applicant works and one from a different shift. Peers must be full time or part time Phelps' employees.

The questions on the Self and Peer Appraisal of Professional Practice Tools are designed to furnish nursing feedback regarding the applicant's demonstrated clinical competence in the following (5) categories, Diagnostic and Safe Clinical Patient Care, Communication, Professional Development, Teamwork and Service.

The rating scale is as follows; demonstrates behaviors:

- 90-100% of the time = 4
- 80-89% of the time = 3
- 70-79% of the time = 2
- 60-69% of the time = 1
- less than 50% of the time = 0

These tools are not used in any way for performance evaluation or merit considerations. All responses are confidential, limited to Nursing Credentials Committee review.

The criteria responses in each section will be summed and divided by the number of criteria to obtain an average score. Level specific criteria are in italics.

If the application is complete but:

1. Any criteria score is "0"
2. Any section is less than "2.0"
3. Any appraisal score is less than "2.5"

The applicant will receive a letter advising that the committee cannot make a recommendation for advancement at the time and the application packet will be returned.

If the application is complete and all appraisal scores are greater than 2.5, the applicant will be considered for advancement if other criteria are met.

## Self -Appraisal of Professional Practice

Name of employee seeking advancement: \_\_\_\_\_

Level to which seeking advancement (circle correct one):      2          3          4

Name of Nurse Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Criteria	0	1	2	3	4
<b>Diagnostic and Safe Clinical Patient Care</b>					
1. Performs and documents health assessments to identify symptoms of possibly undiagnosed conditions and / or complications.					
2. Develops, documents and implements and individualized Plan of Care utilizing knowledge of disease, evidence, and nursing process to establish realistic goals for patients / significant others.					
3. Documents evaluation of outcomes during care of assigned patients.					
4. Modifies and individualizes patient treatment plan as indicated by patient responses and / or conditions.					
5. Safely performs technical aspects of role as per standard.					
6. Accurately administers and documents medications and IVs as per MD orders with knowledge of actions, side effects and contraindications.					
7. Accurately documents infusion end time.					
8. Effectively delegates to peers and subordinates utilizing skill levels competency of work group and providing appropriate supervision.					
9. Based on learning needs, effectively creates, implements and evaluates education plans for patient / family.					
10. Collaborates with other members of the health care team in the assessment and coordination of patient discharge planning.					
11. Educates, counsels patients regarding maintenance of health and prevention of illness and / or complications.					
12. Prioritizes nursing interventions during shift of responsibility, responding to acute emergencies with sound judgment.					
13. Conducts purposeful rounding.					
<b>Also, answer the next 3 questions for level III and IV.</b>					
14. Identifies, analyzes and resolves complex patient care problems.					
15. Evaluates the implementation of the patient care delivery system.					
16. Coordinates comprehensive patient care.					
<b>Also, answer the next 3 questions for level IV.</b>					
17. Consults with nursing staff to develop, implement and evaluate a plan of care based upon assessment of patient needs and goals.					
18. Provides guidance to staff in the formulation and updating of patient care standards based on best practice.					
19. Provides direct and indirect care to an identified caseload of patients.					
<b>Committee Only Total Each Column</b>					
<b>Committee Only- Subtotal of this criteria</b>					

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Criteria	0	1	2	3	4
<b>Communication</b>					
1. Uses effective communication skills in a professional and appropriate manner.					
2. Begins shift report at the bedside, introducing and involving the patient.					
3. Maintains principles of confidentiality and privacy; protects personal health information (PHI) according to HIPAA guidelines.					
4. Uses I PASS the BATON for handoff and SBAR to report important patient care issues to peers or MD.					
5. Keeps patients/customers informed, minimizing patient anxiety and increasing customer satisfaction / patient experience.					
6. Acts as patient advocate by communicating plan of care to multidisciplinary team to meet patient needs.					
7. Effectively uses assertive and advocacy skills to ensure patient safety.					
<b>Committee Only Total Each Column</b>					
<b>Committee Only- Subtotal of this criteria</b>					
<b>Professional Development</b>					
1. Identifies self-educational needs and develops a plan to meet needs.					
2. Actively participates in the orientation of new staff to service and standards of care.					
3. Actively participates in committee activities and educational programs to promote development of staff as a group.					
4. Identifies learning and training needs for supervised staff and communicates to Nurse Manager.					
<b>Also, answer the next 5 questions for level III and IV.</b>					
5. Demonstrates leadership skills to support and motivate staff toward common goals.					
6. Acts as a resource for clinical staff; provides guidance pertaining to improvement of their observations, alertness to specific patient problems, and development of possible approaches to those problems.					
7. Effective as a clinical preceptor.					
8. Participates in the orientation of new employees; makes appropriate recommendations for learning plans for continued development of knowledge and skills.					
9. Effectively supervises team members.					
<b>Also, answer the next 5 questions for level IV.</b>					
10. Guides new employees through probationary period; evaluates performance; makes recommendations for learning plans for continued development of knowledge and clinical skills.					
11. Collaborates with Nurse Manager in the orientation and evaluation of employees; assists with planning and directing the learning process for nursing students and orientees.					
12. Demonstrates professional commitment through membership in nursing committees, institutional activities and specialty organizations.					
13. Initiates and develops teaching guidelines specific to area of expertise.					
14. Applies appropriate current theoretical concepts to implement changes in nursing practice.					
<b>Committee Only Total Each Column</b>					

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Criteria	0	1	2	3	4
<b>Committee Only- Subtotal of this criteria</b>					
<b>Teamwork</b>					
1. Demonstrates awareness about how own verbal and nonverbal behaviors effect team performance (identifies own strengths and development needs).					
2. Receptive and responsive to others' ideas and opinions; recognizes and supports other employees and departments.					
3. Demonstrates situational awareness and proactively collaborates with team members to develop an effective approach to service needs.					
4. Communicates effectively to support the efforts of the team.					
5. Offers task assistance to support co-workers to achieve department/hospital goals.					
<b>Also, answer the next question for level IV.</b>					
6. Role models effective team behaviors.					
<b>Committee Only Total Each Column</b>					
<b>Committee Only- Subtotal of this criteria</b>					
<b>Service</b>					
1. Effectively listens to the customer's perspective and needs. Uses CONNECT to quickly establish rapport, listen to customers concerns and rapidly respond.					
2. Uses personal energy and a positive attitude to influence customers.					
3. Takes personal responsibility for customer service outcomes (e.g., does not blame others or shift responsibility).					
4. Demonstrates a sense of urgency for resolving customer's problems. Applies LAST service recovery approach to achieve positive outcomes.					
5. Sensitive to cultural, emotional and spiritual needs of others.					
6. Embodies tactics to improve the Patient Experience and role models service excellence.					
<b>Also, answer the next 3 questions for levels III &amp; IV.</b>					
7. Demonstrates situational awareness.					
8. Demonstrates emotional intelligence.					
<b>Committee Only Total Each Column</b>					
<b>Committee Only- Subtotal of this criteria</b>					

Additional Comments:

**Appeal - Request for Clinical Career Ladder Review**

Date: \_\_\_\_\_

To: Credentialing Committee and Co-Chairpersons

From (print name, title, and unit/department):

\_\_\_\_\_

I respectfully request a review of the decision not to approve my Clinical Career Ladder Application for advancement to level II, level III, or level IV (circle which).

The evidence I am submitting that supports my request includes:

Thank you,

\_\_\_\_\_

Print Name

\_\_\_\_\_

Signature

## **References**

- Altmann, T. (2007). An evaluation of the seminal work of Patricia Benner: Theory or philosophy? *Contemporary Nurse*, 25(1-2), 114-123.
- Benner, P. (1984). *From novice to expert: Excellence and power in clinical nursing practice*. Meno-Park, CA: Addison-Wesley.
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- Tetuan, T., Browder, B., Ohm, R., & Mosier, M. (2013, May-June). The evaluation of a professional nurse contribution ladder in an integrated health care system. *Viewpoint*, 4-8.