Clinical Advancement Practice Guidelines

Clinical Advancement Program
For Registered Nurses
Scotland Health Care System

I. Purpose

Scotland Health Care System has established a system to provide registered nurses with opportunities for professional growth, personal satisfaction, recognition, and economic reward based on professional contributions to quality patient care. This system is known as the Clinical Advancement Program (CAP) and is based on the possession of critically required knowledge and skills at specified levels of the ladder. Specific objectives of the Clinical Ladder are:

- To recognize and reward clinical competence and professionalism.
- To attract and retain nurses who are committed to deliver quality care required by a variety of patient needs.
- To provide high-quality, cost-effective patient care through effective utilization of qualified nursing personnel.
- To provide career advancement opportunities with related pay increases.
- To promote empowerment by holding professional nurses responsible and accountable for practice.

The responsibility and accountability for professional practice mentioned above is operationalized by the CAP Committee. The CAP Committee is responsible for the design, revision and management of the clinical ladder. The ladder enables nurses to advance on a clinical track.

II. Eligibility

All full-time and part-time A registered nurses who’s primary job responsibility is providing direct patient care will be enrolled in the Clinical Advancement Program ladder.

Clin I (Novice)
Novice nurses are encouraged to progress to a greater level of increased knowledge, clinical competency, teamwork skills, and hospital and community involvement. All new hire RNs are automatically enrolled as a Clin I.

For RNs with less than 12 months experience, unit specific orientation requirements must be completed within 180 days. Satisfactory preceptor evaluations must be provided within the 90 day evaluation period. To maintain clinical advancement requirements, a total of 150 points must be obtained and presented during annual performance evaluations. Failure to maintain clinical advancement requirements will result in a 30 day action plan. Clinical ladder associates have the specified time frame based on the
action plan to complete advancement requirements. Failure to complete requirements may result in termination.

**Clin II (Competent)**

Competent Nurses demonstrate evidence of the pursuit of increased knowledge, excellence in clinical practice, teamwork, and hospital and community involvement. The competent nurse acts as a role model and mentor in the areas of clinical skills and instructions. A nurse at this level can serve as an agent of change while assisting with implementing evidence based practice guidelines and/or assisting with quality patient care projects.

For RNs with more than 12 months experience, unit specific orientation requirements must be completed within 90 days. Satisfactory preceptor evaluations must be provided within the 90 day evaluation period. Upon successful 90 day evaluation completion, the associate is advanced to a Clin II. To maintain clinical advancement requirements, a total of 250 points must be obtained and presented during annual performance evaluations. Failure to maintain clinical advancement requirements will result in a 30 day action plan. Clinical ladder associates have the specified time frame based on the action plan to complete advancement requirements. Failure to complete requirements may result in termination.

*All RNs are required to advance from Clin I to Clin II with the specified timeframes as indicated above. Further advancement to Clin III is strongly encouraged but not mandatory.*

**III. Clinical III Advancement**

**Clin III**

The nurse who chooses to participate in the Clinical Advancement Program at this level must demonstrate evidence of the pursuit of increased knowledge, the highest standard of professional practice and clinical excellence, the ability to lead others via role modeling and mentoring, teamwork, and hospital and community involvement. At this level, the nurse implements evidence based practice, research development, process improvement, and education of staff.

Progression to this level requires a minimum of 5 years RN experience, or 4 years + BSN or certification, or 3 years + MSN. Total number of points required for initial application and annually is 400 points. Initial verification of points must be submitted in a portfolio along with application, proof of eligibility, Clin III Advisor letter of recommendation, Peer Support Request Forms (3), and Director/Manager Support Form.

**Incentive**

- Salary per scale for Clin II +
- 5% of the maximum of the RN pay scale
- Recognition letter from the Nursing Leadership Team
Clinical Advancement Practice Guidelines

- Name recognized in the Newsletter
- Recognition during the Annual Nurse of Distinction Awards Program
- Pin and/or ID indicating clinical advancement

**Department Transfer**
Transfers will be under a Grandfather Clause for six months. At the end of the six months, the Clin III must have met unit specific competency requirements. Failure to complete requirements may result in relinquishment of the Clin III status.

**Restricted License**
- If the associate is a Clin III at the time the restriction is implemented, the associate will be demoted to Clin II.
- The applicant, with approval of the Director/Manager may reapply for Clin III six months after licensure reinstatement.

**Written Counseling**
If the associate is a Clin III at the time of the written counseling action the associate will be demoted to Clin II.

**Clin III Suspended- Steps for reinstatement**
- The associate with the approval of their Director/Manager may reapply for Clin III in six months
- Complete and submit portfolio validating 400 points.
- An action plan based on reason for counseling that includes purpose of counseling and innovative strategies to prevent this action in the future.
- Once reinstated, if associate receives another write up they will not be eligible to reapply for one year depending on the discretion of the CAP Committee.

**Promotion**
Should a Clin III be promoted to a management position active status of Clin III will no longer apply.

*A Status Change Form should be completed by the Director/Manager at the time of the change in clinical advancement status and forwarded to HR.*

**Responsibilities for Clin III Applicants:**
- Have a preliminary conference with Director/Manager to inform of interest to apply for Clin III and present eligibility requirements including verification of points in a portfolio to Director/Manager. Receive approval to apply.
- Select and meet with Advisor (current or previous Clin III with a minimum of 2 years of accomplishment).
- Submit portfolio with all requirements to advisor for approval.
Clinical Advancement Practice Guidelines

- Submit approved portfolio to Organizational Development by the quarterly due date (January 1, April 1, July 1 or October 1). Late submissions will be forwarded to the upcoming review period.
- If Director/Manager or peers (minimum of 3) do not support applicant then associate can request coaching and/or appeal to the Chair of the Clinical Advancement Program Committee.
- If portfolio is not approved, the associate can meet with the advisor and Director/Manager for remediation and then resubmit as early as the next six months.

**Director/Manager Responsibilities:**
- Participate in initial meeting with associate for approval to apply (ensure requirements have been met).
- Post and/or email intent along with peer review forms to peers and ask for peer review. Please solicit confidential peer reviews from multiple departments as applicable.
- Allow peers two weeks from the time of the request to respond. Must have at least 3 peer supports.
- Submit confidential peer reviews to Organizational Development.

**Advisor Responsibilities:**
- Meet with the Clin III applicant to ensure eligibility requirements and verification of points are met.
- Assist and provide feedback/guidance as needed.
- Provide a letter of recommendation for Clin III applicant.

**Record Keeper- Organizational Development Responsibilities:**
- Receive peer reviews from Directors/Managers and applications from Clin III applicants no later than the quarterly deadline.
- Arrange meeting for CAP Committee for application reviews
- Arrange and notify qualified applicants of interview
- Notify applicant(s) of CAP Committee’s decision and attach copy of decision to associate’s application. Forward applications to Directors/Managers.
- For approved applicants, forward approval letter to HR. For denied applicants, a confidential declination letter with reasons for denial will be provided to the applicant and a copy forwarded to the Director/Manager.
IV: Clinical Ladder Criterion Tool: Categories and Explanations

A: Clinical Excellence: Quality Improvement

A1: Develop and Implement an Action Plan Based on Chart Review Outcomes
Must be pre-approved by participant’s nurse manager. The applicant must develop and implement an action plan based on chart review outcomes. Documentation of chart reviews, deficiencies, plan development, and implementation is needed. (Must have supporting documentation)
50 points for each action plan

A2: Case Study or Exemplar (Age specific, Patient Safety, Cultural Diversity)
Must be a minimum of two typed pages (double spaced). The applicant must demonstrate an evidence based practice nursing process through documentation of patient care. The nurse must illustrate assessment, planning, implementation and evaluation using evidence based practice. The exemplar must be based on Benner’s Novice to Expert Theory. (Must have supporting documentation)
Limit 2 separate case studies (20 points for each case study)

A3: Risk Reduction Initiative
Must be pre-approved by participant’s nurse manager. A summary of the completed project must be submitted. (Must have supporting documentation) (Examples: Pressure Ulcer, Fall Prevention, Catheter Associated Infection)
50 points for risk reduction initiative

A4: Unit Change Project
Must be pre-approved by participant’s nurse manager. A summary of the completed project must be submitted. (Example: Improving/changing a system or workflow in your unit). (Must have supporting documentation).
50 points for each unit change project process or workflow

A5: Process Monitoring
Must be pre-approved and assigned by participant’s nurse manager. A summary of the completed project must be submitted. (Example: hand-hygiene monitors, fall risk protocol monitoring, patient ID process monitoring, focus monitoring). Process monitoring should be documented at least on a monthly basis. (Must have supporting documentation).
Limit 2 (15 points for each process monitoring)

A6: Research
Develop, implement, and participate in a research study approved by the Clinical Ladder Committee.
(Must have supporting documentation)
75 points for developing, implementing, and participating in a research project; 25 points for completing a literature review presented as a research paper

**A7: Core Measure Super User**
Serves as a resource for core measure quality indicators. Shares information related to core measures with staff and may assist with chart reviews related to core measures. Points for process monitoring are provided separately.

**30 points**

**B. Clinical Excellence: Clinical Achievement**

**B1: Policy Revision**
Must be pre-approved and assigned by participant’s nurse manager and/or Nurse Practice Council. Provide final version with review date on typed policy. (Must have supporting documentation)

**5 points per policy**

**B2: Policy Development**
Must be pre-approved and approved upon completion by participant’s nurse manager and/or Nurse Practice Council. (Must have supporting documentation of the policy developed with evidence based references)

**20 points per policy**

**B3: Advanced Skills**
Must be pre-approved and approved upon completion by participant’s nurse manager. Attach documentation of current certificate or transcript including expiration date. Examples: ACLS, TNCC, PALS, NRP. (Must have supporting documentation)

**25 points for each advanced skill**

**B4: National Board Certifications**
Attach documentation of current certification. Must include expiration date. (Must have supporting documentation).

**50 points for each national certification**

**B5: Committee Participation**
Must be hospital sanctioned committee. Must show proof of active participation. Active participation is based on Committee Chair.

**25 points for each committee**

**B6: Professional Organization Membership**
Nurse must be a member of a professional Health Care organization. A copy of the membership card must be included as proof of membership. Proof of activities must be provided (Must have supporting documentation)
Clinical Advancement Practice Guidelines

25 points for each organization, webinars 10 points each, conferences 50 points each)

**B7: Presentation at a Continuing Education Activity**
Must be pre-approved by participant’s nurse manager. Submit flyers, agenda, brochures and/or other supporting documentation for proof of presentation. (Must have supporting documentation and verification that course offers CE Credits)
**50 points each**

**B8: Article in National Journal or Hospital Publication**
Submit a copy of the article or letter from the peer-reviewed journal’s editor stating intent to publish. Publish date needs to be within a year. (Must have supporting documentation) **(25 points for In-House Publication, 50 points for national publication).**

**B9: Continuing Education Credits**
Participant must obtain continuing educations credits beyond the licensure requirement. (Must Have Supportive Documentation) A copy of certificate with activity and date must be attached.
Each CE above the annual requirement for NCBON (7.5) is worth 1 point.

**C: Clinical Excellence: Education**

**C1: In-service Presentation**
Must be pre-approved by participant’s nurse manager. Presentations must be a minimum of 10 minutes. (Must have supporting documentation of attending personnel)
**15 points per presentation**

**C2: Precept for Student/New Associate**
The applicant may precept students/new associates. Documentation of the specific dates/hours of precepting is required. (Must have supporting documentation).
**5 points per shift**

**C3: Instructor for BLS, ACLS, PALS, NRP, TNCC, ONS Chemotherapy**
Must submit copies of rosters including dates for proof of classes taught. (Must have supporting documentation)
**Instructor certification is 20 points/classes taught are 20 each**

**C4: Undergraduate and Graduate Nursing Courses**
Must obtain at least a “C” in undergraduate courses and a “B” in graduate courses (Must submit final grades as verification).
**10 points for each semester hour for undergraduate studies, 15 points for each semester hour for graduate studies. No limit**
**C5: Member of Rapid Response Team or Code Team**
Participant must be member of RRT for at least one year. (Must have supporting documentation) For proof, copy of RRT schedule or verification letter from Nursing Office Manager must be attached.

10 points for per year served

**C6: Technology/Informatics Super User**
Must be pre-approved by participant’s nurse manager. (Must have supporting documentation) Validation by manager to be currently serving as TSU is necessary for each annual submission and rosters of associates taught as applicable.

30 points

**C7: Competency Validation Verification**
Must be pre-approved by participant’s nurse manager or validator serves as a Charge Nurse or Preceptor. Must have supporting documentation from Manager/Director indicating applicant validated a sufficient number of competencies based on departmental needs.

(25 points)

**C8: New Product Super User**
Must be pre-approved by participant’s nurse manager or validator serves as a Charge Nurse or Preceptor. Must have supporting documentation for in-services provided based on departmental needs.

(30 points, 15 points per product)

**C9: EKG, Rhythm, and/or Medication of the Week**
Provide submission of EKG, Rhythm and/or Medication of the Week. (Must have supporting documentation).

(1 point per submission)

**C10: Case Studies**
Provide submission of Case Study. Case studies may be developed by Director, Clinical Educator or designated RN. (Must have supporting documentation).

(10 points per submission, 25 points for development of Case Study)

**C11: Education Posters**
Review education poster in designated area(s). Attendance/verification of participation is recorded on sign in sheet.

(5 points per review)
D: Leadership and Team Development

D1: Nurse of Distinction Award, Nurse Excellence Award, or equivalent (Must have supporting documentation) (50 points, no limit- Previous winner- 30 points). Employee of the month, Nominee for Nurse of Distinction, Nominee for Nurse Excellence Award, Nominee for Award of Excellence or equivalent (10 points)

D2: Present In-service on Teamwork or Leadership
Must be pre-approved by the participant’s nurse manager. Must be at least 10 minutes in length, summary of presentation and handouts must be submitted (Must have supporting documentation)
20 points each

D3: Develop Bulletin Board on Performance Improvement, Teamwork, or Leadership
Must be pre-approved by participant’s nurse manager, A picture or copy of the project must be submitted (Must have supporting documentation)
Limit 2 (15 points each)

D4: Safety Spotter
Nurse must be selected by participant’s nurse manager to serve as a Safety Spotter in his/her clinical area. This nurse will receive instruction by his/her Director/Manager or Patient Safety Officer for this role and must fulfill expectations of role for the entire year in order to continue receiving credit (points). He/she will reinforce the use of safety management and error prevention techniques on their respective unit and serve as a resource to peers. (Must have supporting documentation). Proof must be provided that the participant performed required duties.
(50 points)

D5: Shared Governance (Unit Based Council) Representative
Must be pre-approved by participant’s nurse manager. Must show proof of active participation. (Committee chair will need to sign off). Active participation is based on Committee Chair’s discretion.
(30 points + additional 20 points for officers)

E: Organizational Engagement and Patient Satisfaction

E1: Patient Satisfaction Initiative
Develop an initiative for your unit to improve patient satisfaction. Must be pre-approved by participant’s nurse manager. A brief summary of the project must be provided. (Must have supporting documentation)
No limit (50 points each)
E2: Associate/Town Hall Forums Attendance
Attend Town Hall Forum. Present information to unit staff for additional points. (Must have supporting documentation).
**Attendance 5 points, presentation 10 points (A brief summary of the forum and rosters must be provided).**

E3: Service Excellence Commendation
Copy of written commendation from physicians, patients, family members, and peers for going above and beyond expectations of job/role. Participant must be specifically named along with service(s) provided and submissions must be dated. (Must have supporting documentation)
**5 points per commendation**

E4: Additional Shifts/Special Duty:
This is designed as an extra shift, double shift, and/or taking additional call above department requirements, etc. Back up Charge RN is also considered a special duty. (Must have supporting documentation). Must provide schedule with additional shifts.
**Maximum of 100 points (1 point per hour worked)**

E5: Actively volunteering and involved in Community Organization
Must provide proof of activity, hours, and duties. An attachment must be signed by the organizer or a member of the organizing team.
**A minimum of 20 hours total is required (15 points per 20 hours). Limit 45 points.**

F: Well-Run Organization: Fiscal Responsibility and Operational Excellence

F1: Cost Savings Initiatives
All categories must be preapproved by participant’s nurse manager. A written summary must be attached. (Must have supporting documentation). Identify a cost saving initiative of at least $2500 annual savings and implement initiative.
**No limit (25 points)**

F2: Retention
Nurses employed at Scotland Health Care System will achieve points for the following years of service .(Must have supporting documentation).
(3 years- 15 points, 5 years- 25 points, 8 years- 35 points, 10+ years- 50 points)

F3: Recruitment Effort
Associate must have Human Resources provide verification that the new associate was recruited by the applicant. This recruit only counts one time. This recruit must be a Full Time RN who completed the probationary period before points are awarded. (Must have supporting documentation).
Clinical Advancement Practice Guidelines

20 points each RN with no limit

F4: Grant Writing
Grant must be pre-approved by participant’s nurse manager. Grant purpose must include improving the health care system. (Must have supporting documentation). A copy of the grant application with grant writer’s signature must be attached.
No limit (25 points for each grant application, 50 points for each approved grant)

F5: Serve as a Clin III Advisor
Participant must be approved by nurse manager. The participant assists Clin III applicants with the application and approval process and verifies eligibility. (Must have supporting documentation). A copy of advisor letter of recommendation must be presented.
Limit 3 (15 points per Clin III applicant)

F6: Operational Excellence Participation
RIE participation- 50 points
Team Leader for RIE- 25 additional points
Standard Work and/or Projects (Development, training and follow up) - 25 points
Participate in Report Out- 10 points

IV: Review of Application

Clin I to Clin II advancement
- The Director/Manager of an Associate will make the decision based on requirements (evaluation, preceptor reports, and points).

Clin II to Clin III advancement
- CAP Committee will review applications for Clin III.
- CAP Committee members will receive a copy of the portfolio(s) submitted for review.
- A review meeting will be held to discuss applications.
- Applicable candidates will be contacted for an interview.
- Following the interview process, the committee will vote to determine if the applicant advances to Clin III level.
- If approved, compensation will be effective the pay date closest to the 1st day of the following month.
- At the end of the CAP Committee meeting, decisions will be forward to Human Resources for further processing.

V. Clin III Maintenance
Clinical Advancement Practice Guidelines

Total number of points required annually is 400 points. Verification of points must be submitted by September 30th of each year to the Department Director. Maintenance begins after the first evaluation as a Clin III. Failure to complete requirements may result in relinquishment of the Clin III status.

VI. Benner’s Domains of Nursing Practice with Objectives

A. The Helping Role
B. The Teaching-Coaching Function
C. The Diagnostic and Monitoring Function
D. Effective Management of Rapidly Changing Situations
E. Administering and Monitoring Therapeutic Interventions and Regimens
F. Monitoring and Ensuring the Quality of Health Care Practices
G. Organizational and Work-Role Competencies

VII. Attachments

1. Clinical Advancement Program Calendar
2. Application
3. Peer Support Request Form
4. Peer Support Form
5. Director/Manager Support Form
6. Annual Performance Evaluation: Portfolio Face Sheet
7. Clinical Ladder Criterion Quick Reference
Calendar: Attachment 1

Clinical Advancement Application Due Dates:

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<td>January 1st</td>
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<td>April 1st</td>
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<td>July 1st</td>
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<td>October 1st</td>
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*Late applications will be held until the next review period.*
Clin III Application: Attachment 2

Clinical Advancement Application: Portfolio Face Sheet

Name: _________________________________   Dept: _________________________________

Contact Number: ______________________

SHCS Current Hire Date: ____________________   Graduation Date: __________

___ Resume

___ Performance Evaluation

___ Director/Manager Support Form

___ Peer Support Form (3)

___ Letter of Recommendation from Advisor

___ Exemplar of Service Excellence (1-2 pages double spaced that includes the organization’s mission, vision, and values). This exemplar does not count toward points

___ Verification of points (400 points)
Peer Support Request Form: Attachment 3

To: ______________________________________________

(Person to complete the peer interview)

From: _____________________________________________

(Director/Manager)

Regarding: _________________________________________

(Clin III Applicant)

Enclosed you will find a Peer Review Form. Please complete and return to me within 2 weeks ________________ (Requested return date).

To ensure confidentiality, please place the Peer Review Form in a sealed envelope with your signature on the back across the envelope flap.

If you have any questions or concerns, please contact me at:

________________________________________________________________________

(Director/Manager’s contact information)
Peer Support Form: Attachment 4

_____________________________ is applying for Clin III status. The nurse who chooses to participate in the Clinical Advancement Program at this level must demonstrate evidence of the pursuit of increased knowledge, the highest standard of professional practice and clinical excellence, the ability to lead others via role modeling and mentoring, teamwork, and hospital and community involvement. At this level, the nurse implements evidence based practice, research development, process improvement, and education of staff.

Please indicate if the person has demonstrated the following skills on a consistent basis by circling yes or no:

Yes or No  Clinical performance
Yes or No  Communication skills
Yes or No  Mentoring
Yes or No  Teamwork
Yes or No  Positive leadership during change
Yes or No  Serves as a resource within the department
Yes or No  Conflict management and/or resolution
Yes or No  Customer service

Comments: ______________________________________________________
______________________________________________________________
______________________________________________________________

Signature_______________________  Date________________

Please remember to return this form to the Director/Manager in a sealed and signed envelope by the specified date.
Director/Manager Support Form: Attachment 5

I recommend ______________________ as a Clin III applicant. The nurse who chooses to participate in the Clinical Advancement Program at this level must demonstrate evidence of the pursuit of increased knowledge, the highest standard of professional practice and clinical excellence, the ability to lead others via role modeling and mentoring, teamwork, and hospital and community involvement. At this level, the nurse implements evidence based practice, research development, process improvement, and education of staff.

He/she has demonstrated consistent exceptional performance in all of the following areas.

Yes or No  Clinical performance

Yes or No  Communication skills

Yes or No  Mentoring

Yes or No  Teamwork

Yes or No  Positive leadership during change

Yes or No  Serves as a resource within the department

Yes or No  Conflict management and/or resolution

Yes or No  Customer service

If no, please comment: _____________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Additional comments: _____________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature______________________ Date________________
Evaluation Checklist: Attachment 6

Annual Performance Evaluation: Portfolio Face Sheet

Clinical Ladder Level:  1       2        3  (circle)

Name: _________________________________       Dept: _____________________________

___Orientation Packet (as applicable)

___ Competency Validation Form

___ Net Learning Transcript for fiscal year (Oct-Sept)

___ Verification of points

Clin I- 150 points required with satisfactory preceptor evaluations  
Clin II- 250 points required with satisfactory preceptor evaluations  
Clin III- 400 points required with no disciplinary write ups or action plans

Failure to maintain clinical advancement requirements will result in a 30 day action plan. Clinical ladder associates have the specified time frame based on the action plan to complete advancement requirements. Failure to complete requirements may result in termination or relinquishment of the Clin III status.

__________________________  ____________________
Director’s Signature of Approval       Date

Comments:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Clinical Ladder Criterion Quick Reference: Attachment 7

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<th>Points</th>
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<td>Development &amp; Implement an Action Plan</td>
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<td>Case Study or Exemplar</td>
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<td>Risk Reduction Initiative</td>
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<td>Unit Change Project</td>
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<td>Process Monitoring</td>
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<td>Research- Project, Paper</td>
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<td>Core Measure Super User</td>
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<th>B: Clinical Advancement</th>
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<td>Policy Revision</td>
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<td>Policy Development</td>
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<td>Advanced Skills</td>
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<td>National Board Certification</td>
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<td>Committee Participation</td>
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<td>Professional Organization Membership</td>
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<td>Presentation at CE Activity</td>
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<td>Article in National Journal, Hospital Publication</td>
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<td>Continuing Education Credits (Beyond NCBON annual requirement of 7.5)</td>
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<th>C: Education</th>
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<td>In-service Presentation</td>
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<td>Precept for Student/New Associate</td>
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<td>Instructor for Advanced Skills, Courses Taught</td>
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<td>Undergraduate/Graduate Courses</td>
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Clinical Advancement Practice Guidelines

<table>
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<tr>
<th>Category</th>
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<td>Member of RRT or Code Team</td>
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<tr>
<td>Technology/Informatics Super User</td>
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<td>Competency Validation Verification</td>
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<td>New Products Super User</td>
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<td>EKG, Rhythm and/or Medication of the Week</td>
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<td>Case Studies (Submission, Development)</td>
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<td>Education Posters</td>
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<td><strong>D: Leadership and Team Development</strong></td>
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<td>Service Excellence Award</td>
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<td>Teamwork &amp; Leadership In-Service</td>
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<td>Safety Spotter</td>
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<td>Unit Department Council</td>
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<td><strong>E: Engagement &amp; Patient Satisfaction</strong></td>
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<td>Patient Satisfaction Initiative</td>
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<td>Town Hall Attendance</td>
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<td>Service Excellence Commendation</td>
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<td>Additional Shifts or Special Duties</td>
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<td>Volunteer</td>
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<td><strong>F: Fiscal Responsibility</strong></td>
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<td>Cost Saving Initiative</td>
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<td>Retention</td>
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<td>Recruitment Effort</td>
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<td>Standard Work or Project</td>
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</tr>
<tr>
<td>Report Out</td>
<td>10</td>
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