

Peer Review for Clinical Advancement Process

Portfolio Review and Leveling: Level RN1 to Level RN2

Professional Overview (Required):

- + CV/Resume
- + Letter of Intent
- + Letter of Support from UD
- + CE credits earned
- + BLS- submit copy of card
- + ACLS (unit-based)- submit copy of card
- + PALS (ER only)- submit copy of card
 + New Grad Day participation- succes
- + New Grad Day participation- successful completion with instructor sign-off
- + Attend Preceptor Workshop
- + Attend Charge Nurse Workshop

Domains of Practice:

In the following section mark any of the examples provided or add others in the blank spaces.

An example from each competency in each domain is the minimal expectation to move to a level RN2. (Unless otherwise specified)

Proficiency in each can be demonstrated in one or more of the following ways (unless specified within the individual section):

- + Exemplar
- + Official Document
- + Letter from Patient, Peer colleague, Supervisor, Physician, etc.

Professional Practice Model Domain

Demonstrated proficiency in all of the below areas required:

Relationships and Caring

I have signed and have been able to meet the expectations defined in the code of conduct.

I am able to coach assistive personnel while maintaining an effective relationship.

I am capable of collaborative interaction within my care delivery team.

I Participate in conflict resolution that enhances team relationship. (provide example)

I have and show respect and sensitivity toward diverse cultures and/or vulnerable populations.

Relationships and Caring

Demonstrated proficiency in all of the below areas required:

expectations defined in the

I have signed and have

been able to meet the

I am able to maintain

coaching of assistive per-

sonnel while maintaining

an effective relationship.

I am capable of collabora-

tive interaction within my

I participate in community

or volunteer experience through ROPH.

I have and show respect

and sensitivity for diverse

cultures and/or vulnerable

I serve as role model for

interpersonal communi-

populations.

cation

care delivery team.

code of conduct.

e-Based Practice Technical Expertise

Demonstrated proficiency in all of the below areas required:

I have developed and/ or used evidence-based research for patient care.

Demonstrated proficiency in all of the below areas required:

I provide effective patient education.

I am able and willing to help my co-workers while still completing my own work.

I use ROPH policies in care decisions.

Critical Thinking Leadership

Demonstrated proficiency in all of the below areas required:

Demonstrated proficiency in all of the below areas required:

I adapt care plans to

use exemplar.)

meet changing needs of

patients. (Submit a screen

shot of a care plan. ER can

I am a Committee/Council member who attends my meetings regularly. (Provide evidence of attendance)

I participate in conflict resolution during patient care and/or within my team.

I am able to delegate responsibilities effectively and consistently.

Describe how you are making progress toward your annual goals.

Portfolio Review and Leveling: Level RN2 to Level RN3

Professional Overview (Required):

- + CV/Resume
- + Letter of Intent
- + Letter of Support from UD
- + CE credits earned
- + BLS- submit copy of card
- + ACLS (unit-based)- submit copy of card
- + PALS (ER only)- submit copy of card
- + Attend Preceptor Workshop
- + Attend Charge Nurse Workshop

Certification: Specialty certification as determined by your UAC is required within one year after leveling to RN3.

+ If you transition to another specialty area, in order to maintain RN3 status, you must take the new area's approved certification within 1 year of elibility to maintain RN3 status.

Domains of Practice:

In the following section mark any of the examples provided or add others in the blank spaces. An example from each competency in each domain is the minimal expectation to move to a level RN3. (Unless otherwise specified)

Proficiency in each section can be demonstrated in one or more of the following ways: (unless specified within the individual section)

- + Exemplar
- + Official Document
- Letter from Patient, Peer colleague, Supervisor, Physician, etc.

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Demonstrated proficiency in one or more of the below areas required: Poster/podium presentation

- internal or external

EBP, QI or research project

team member or leader
Policy or standards devel-

Manuscript /abstract sub-

mission and/or publication
ROPH Grand Rounds

opment/revision

Unit or Hospital-based Evidence –Based Project

Literature Review

presentation

Technical Expertise

Professional Practice Model Domain

Demonstrated proficiency in all of the below areas required:

I provide effective patient education.

I am able and willing to help my co-workers while still completing my own work.

I use ROPH policies in my patient care decisions.

I am a "Super-User" or Unit Expert in some clinical area.

Approval checklist letter from UAC

Critical Thinking

Demonstrated proficiency in all of the below areas required:

I adapt care plans to meet changing needs of patients. (submit a screen shot of a care plan. ER can use exemplar)

I have participated in the development of educational materials. (eg, bulletin boards, in-services, journal club)

I have been a PI/QI project team member.

I support less experienced staff in management and review of complex patient situations in order to identify practical solutions.

Leadership

Demonstrated proficiency in all of the below areas required:

I am a committee/council member who attends my meetings regularly. (provide evidence of attendance)

I lead in conflict resolution that enhances team relationship.

I am able to delegate responsibilities effectively and consistently.

Describe how you are making progress toward your annual goals.

I am a member in a professional organization. (submit copy of membership card)

I function as a regular charge nurse or preceptor. (for either staff or students)

I am/have been part of a Unit-based/hospital innovation. (eg., teambuilding, recognition, new practices)

Unit-based/hospital inno-

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recognition, new practices)

Portfolio Review and Maintenance of RN3 Status

Professional Overview (Required):

- + CV/Resume
- + Letter of Intent-What you've done in the past year and what you plan to do in the upcoming year.
- + Letter of Support from UD
- + CE credits earned
- BLS- submit copy of card
- ACLS (unit-based)- submit copy of card
- PALS (ER only)- submit copy of card
- Attend Preceptor Workshop
- Attend Charge Nurse Workshop
- Letter of approval and/or suggestions from prior portfolio submission

Certification: Specialty certification as determined by your UAC is required within one year after leveling to RN3.

+ If you transition to another specialty area, in order to maintain RN3 status, you must take the new area's approved certification within 1 year of elibility to maintain RN3 status

Domains of Practice:

In the following section mark any of the examples provided or add others in the blank spaces. An example from each area is the minimal expectation to maintain a level III RN. (Unless otherwise specified)

Professional Practice Model Domain

Evidence-Based Practice Technical Expertise Relationships and Caring Critical Thinking Leadership Demonstrated proficiency in all of the below areas required: Demonstrated proficiency in all of the below areas required: Demonstrated proficiency in all of the below areas required: Demonstrated proficiency in all of the below areas Demonstrated proficiency in two or more of the below areas required: required: Meet the expectations Poster/podium presentation I am a "Super-User" or I have participated in I am a committee/council member who attends my Unit Expert in some clinical defined in the code of internal or external the development of educational materials. (eg, meetings regularly (provide conduct. EBP, QI or research project bulletin boards, in-services, evidence of attendance) Approval checklist letter I participate in community team member or leader journal club) and active involvement. from UAC or volunteer experience Policy or standards devel-I support less experienced I am a current member in a through ROPH. 20 CEU's per year opment/revision staff in management and review of complex patient professional organization. I have and show respect (submit copy of member-Manuscript /abstract suband sensitivity for diverse situations in order to idenship card) mission and/or publication cultures and/or vulnerable tify practical solutions. I function as a regular populations. **ROPH Grand Rounds** charge nurse or preceptor. presentation Letter from a colleague (for either staff or or member of the students). Unit or Hospital-based interdisciplinary team Evidence -Based Project I am/have been part of a displaying how you embody

Proficiency in each section can be demonstrated in one or more of the following ways: (unless specified within the individual section)

+ Exemplar

the workplace.

Official Document

relationships and caring in

Letter from Patient, Peer colleague,

Supervisor, Physician, etc.

+ The examples must be current and from the past fiscal year.

Portfolio Development

Here are some examples of documents you might use to fulfill the requirements for the different categories in the clinical advancement process. Additionally, the suggestions below will help you to organize your portfolio.

Literature Review

Designing your Portfolio – Tips	Section 1 Introduction and Professional Overview	Section 2 Relationships and Caring	Section 3 Critical Thinking	Section 4 Technical Expertise	Section 5 Evidence Based Practice	Section 6 Leadership	Section 7 References
+ Development of Portfolio begins when you get your license and continues throughout your career. + Present in Formal Presentation Binder + Keep in mind- moving up the ladder means that you are already showing some evidence of proficiency at the level that you wish to move to. + Use your Annual Performance Evaluation Journal to daily track your caring and profes- sional stories + When presenting patient stories, please be careful to not describe any patient identifiers, which would violate HIPAA.	+ CV/Resume + Letter of Intent to Advance + Copy of current level of education and proof of enrolled continuing education + Proof of Certification + Other items list- ed in professional overview section of clinical advance- ment requirements	+ Letters of recommendation from colleagues, patients, families, preceptors, faculty + Stories of Interactions within Care Delivery team of advocacy and compassion + Award nominations describing your interactions with others + Any involvement within the community or volunteer experience utilizing nursing expertise + Required exemplars and documents from clinical advancement process	+ Stories of complex patient situations, expert assessment skills + Development of Education- Inservices, Bulletin Boards, Journal Clubs to assist fellow staff and students in critical thinking and problem solving + Involvement in Quality Improvement Projects/Audits + Required exemplars and documents from clinical advancement process	+ Any Continuing Education Proof, Credits Earned, Topics, Content Utilized on Unit + Any Preceptor or Charge Workshops at- tended, as well as other workshops- EKG, ACLS, etc. + Proof of "Super user" or "Expert" Status on unit- skin, palliative care, Epic, etc. + Performance evalua- tion and Peer Review + Required exem- plars and documents from clinical advancement process	+ Your Projects and any future EBP projects that you do with references and slides and outcomes + Your involvement in development or revision of any nursing standards of practice or care and any related education or presentation + Use of EBP to drive unit quality improvement or nursing practice projects- with examples + Required exemplars and documents from clinical advancement process	+ Active engagement in charge or preceptor role and proof of such + Involvement in unit committees, care rounds, Unit/Clinic Advisory Committee, Department Advisory Committee, NSGO Standing Committees or other institutional groups + Involvement in Professional Organizations and proof of information sharing to unit from such + Any innovations to unit not listed in projects as above, especially those that denote leading of staff from unit towards new practices, communication techniques, teambuilding exercises, recognition practices + Required exemplars and documents from clinical advancement process	+ ExtrasAny articles you have written, membership listings, things not listed above