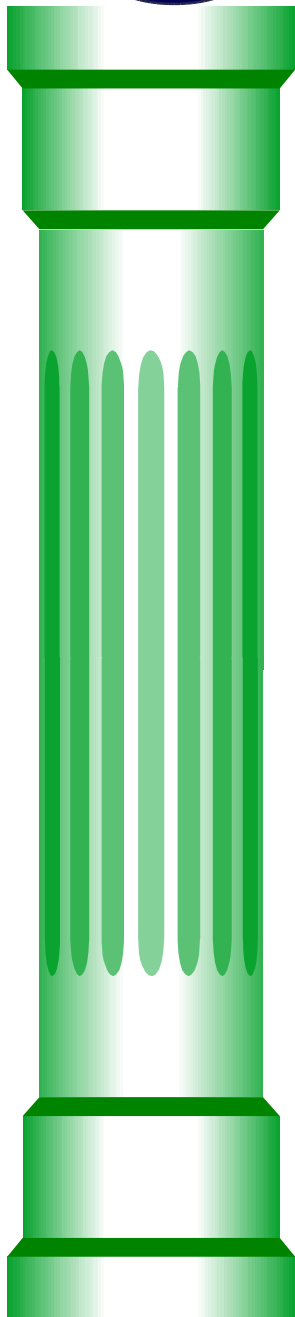




THE UNIVERSITY OF NEW MEXICO ♦ HEALTH SCIENCES CENTER
UNM HOSPITALS

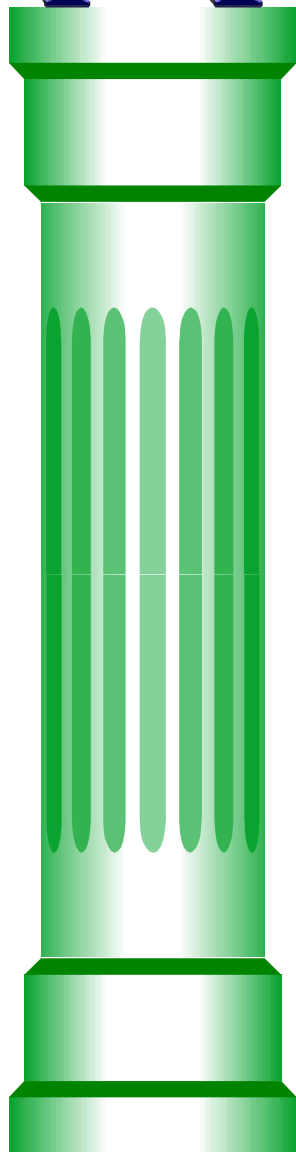
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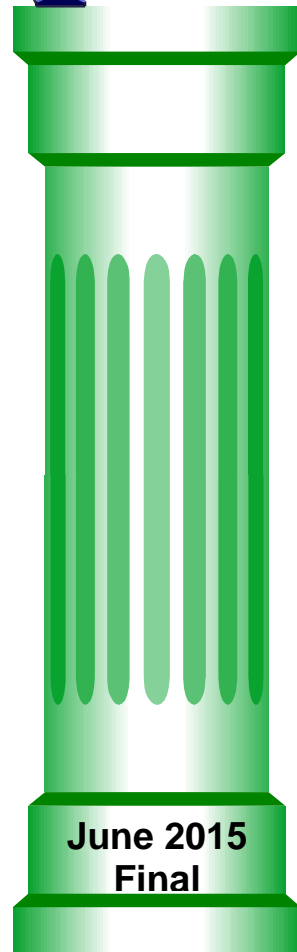
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ROGRAM



**June 2015
Final**

**University of New Mexico Hospitals
Division of Nursing - Clinical Operations
Clinical Advancement Program (CAP)**

Purpose:

1. To recognize/reward individual excellence in the UNM Hospitals Compass of Care, our professional practice model of nursing,
2. To encourage those with clinical expertise in advancing professional practice model of nursing.
3. To assist in recruitment and retention of nurses in a professional practice model of nursing.
4. To improve role satisfaction by enhancing autonomous professional practice through peer review.
5. To provide opportunities for professional growth and excellence through shared governance.

CAP Levels:

CAP is subdivided into five categories of professional criteria:

- Professional Accountability
- Professional Practice Competence
- Educational Growth
- Practice Excellence
- Research Utilization/Generation

Policy and Application:

1. The Clinical Advancement Program is voluntary.
2. The program is available to Registered Nurses (RNs) who are employed as 0.5 FTE, or greater, in a regular status and who deliver direct patient care.
3. The program is available from the date an employee becomes regular staff, if he or she meets all requirements.
4. All RNs entering the CAP program must have a performance that is satisfactory or above on his/her most recent evaluation, or within progress of orientation. If a nurse disagrees with the performance appraisal s/he has received, s/he may appeal through the applicable grievance process.
5. New graduate nurses are eligible for CAP after completing the requirements for CAP and obtaining their license.

6. CAP Level Criteria Overview:

CAP Level	Level Requirements Completion/maintenance of Cap I and II required for Levels III, IV & V.	Compensation
I	New Employees: CBO/Orientation, Annual Competencies & Life Support Incumbent Employees: Annual Comps, On-line Comps, Life Support & Unit Changes	\$2.00/hr over base pay
II	Professional Practice Portfolio required to change levels: update every annually. AND Accountability for Professional Practice Competence: 1. Peer Review, 2. Just Culture, 3. Shared Governance & 4. Professional Practice Model.	\$4.00/hr over base pay
III	National Approved Nursing Certification, OR Bachelors in Nursing, OR In school for BSN (Three-year time limit, One time).	\$6.00/hr over base pay
IV	National Approved Nursing Certification, AND Bachelors in Nursing, OR In school for BSN (Three-year time limit, One time).	\$7.00/hr over base pay
V	National Approved Nursing Certification, AND Masters in Nursing, OR In school for MSN (Three year time limit, One time), AND One Pertinent Project annually approved by the area Executive Director.	\$8.00/hr over base pay

7. The Employee is responsible for completing a professional practice portfolio.
8. The Employee is responsible for maintaining their on-line database and updating annually.
9. The Unit Director maintains accurate CAP records for their employees.
10. The Unit Director holds accountability for monitoring and must sign all CAP application forms.
11. The Unit Director will indicate at the bottom of the CAP verification form that the employees received a satisfactory or above performance appraisal rating on the most recent evaluation.
12. If at any time the CAP participant's performance appraisal falls below satisfactory, the employee will be removed from CAP via a personnel action, until such time as the performance has improved via documentation in the form of the participant's annual or special performance appraisal.

Verification:

1. The verification form is used to confirm that all activities have been completed or maintained within the last 12 months. Evidence of completion may include verification of necessary documents by the Unit Director.
2. Notification of CAP status will occur via the Unit Director. If all requested documentation for verification was not included, level cannot and will not be approved. The employee may resubmit complete documentation to the Unit Director.

3. Pay increases will become effective at the start of the *first pay period following verification* of CAP enrollment and personnel change. CAP status will be in effect for the next 12 months.

Maintaining CAP:

1. To maintain current CAP status, the employee must complete requirements, accumulate the appropriate standards within each level, and successfully carry out goal development/achievement (performance appraisals).
2. It is the employee's responsibility to maintain certification. Lapses in certification result in a CAP readjustment. Failure to renew a nursing license jeopardizes CAP continuity.
3. If at any time the CAP participant's fails to maintain their school status, the employee will be removed from CAP via a personnel action.

Upgrading CAP:

1. An employee may request upgrade CAP status at any time. S/he must submit an application to the Unit Director.

Management Responsibilities:

1. The Unit Director or designee will complete a personnel action to change the status of the employee entering, changing, or leaving CAP status via the appropriate HR system. The personnel action will be effective at the start of the *first pay period following verification* of CAP enrollment or disenrollment.

Program Administration Policies:

1. The Nurse Executive Council has the responsibility for evaluating CAP annually.
2. The Nurse Executive Council is charged with the administration of CAP.
3. The established standards of CAP shall not be part of the collective bargaining agreement.
4. It is the responsibility of the Nurse Executive Council to establish or modify, as needed, the standards of performance for attaining, progressing and maintaining positions in the various levels of the program.
5. The Nurse Executive Council shall be consulted for its input concerning the adoption or modifications of standards prior to any changes being implemented. This council shall also have the sole authority, under the direction of the Chief Nursing Officer, to administer and interpret the standards of this program as well as any disputes that may arise concerning its application. The final responsibility and ultimate approval for standards and modifications rests with the Chief Nursing Officer.

NOTE:

Employees entering the program in no way relinquish their rights to representation, grievance and arbitration as provided in the collective bargaining unit in other matters.

Professional Accountability

Benner: Novice	Minimum Requirements		CAP 1
<p>The Registered Nurse demonstrates:</p> <ul style="list-style-type: none"> The ability and willingness to promote his/her own professional practice through personal accountability for the learning and demonstration of essential elements to advance skills and knowledge level. 	<p>New Employee Nurse starts:</p>	<ul style="list-style-type: none"> Current RN License On-line competencies completed CBO/Equivalent Initiated Basic Life Support completed. Demonstrates accountability for identifying own learning needs and seeking knowledge where needed. Demonstrates accountability for receiving Unit/Department communication of Policies, Procedures and/or Guidelines. 	<p>\$2.00/ hr</p>
<p>The Registered Nurse demonstrates:</p> <ul style="list-style-type: none"> The ability and willingness to promote his/her own professional practice through personal accountability for the learning and demonstration of essential elements to advance skills and knowledge level; The knowledge of, and participation in, a Culture of Safety. 	<p>Incumbent Nurse maintains:</p>	<ul style="list-style-type: none"> Current RN License On-line competencies completed CBO/Equivalent is completed within first year. Annual skills competencies completed -Skills verified by UBE/CNS/Educator consistent with Patient Care Plan Highest level of age-appropriate Life Support based on Patient Care Plan for Unit/ Department completed. Demonstration of accountability for identifying own learning needs and seeking knowledge where needed. Demonstration of accountability for Unit/Department communication of Policies, Procedures and/or Guidelines. Demonstration of participation in a Culture of Safety, as evidenced by development, support, and adherence to Safety Systems. 	

Professional Practice Competence

Benner: Advanced Beginner	Minimum Requirements	CAP 2
<p>The Registered Nurse demonstrates:</p> <ul style="list-style-type: none"> • The ability to set professional goals; • The ability to incorporate professional standards into the practice environment; • The ability to monitor professional practice competence in key standards. 	<p>The Registered Nurse completes and maintains::</p> <ul style="list-style-type: none"> • Professional Practice Portfolio (Updated annually 60 days prior to evaluation) <p style="text-align: center;"><u>AND</u></p> <ul style="list-style-type: none"> • Maintains Accountability for Professional Practice Competence by documenting participation in Unit, Clinic, Area, or Hospital activities that reflect competence in: <ol style="list-style-type: none"> 1. Peer Review, 2. Just Culture, 3. Shared Governance, & 4. Professional Practice Model (Compass of Care). <p><u>Activities* can include:</u></p> <ul style="list-style-type: none"> - reading journals, attending classes, scholarship to a Magnet or Pathways to Excellence conferences; - completing classes (on-line 1/1/16) on Peer Review, Just Culture, Shared Governance, PPM; - participating in a Unit, Clinic, Area, or Hospital Council that has a charter, minutes and outcomes; - participating in Patient Safety Rounds, RCA's, Town-halls; Nursing Staff Forum; - recognition for Daisy, Distinguished Nurse, Outstanding Preceptor, NMCNE awardee or other award; - serving on a Coordinating Council: Education, Research, Practice, Quality, or Peer Review; - serving on a Task Force: Preceptor, Hospital-acquired Condition, Infection Control; - leading/participating on a Unit, Clinic, Area, or Hospital PDSA, QA, PCMH or HAC initiative; - acceptance of a podium or poster for a conference or publication; - Other activities can be submitted to the CNO for Nurse Executive Council consideration. <p>*All activities must be journaled with supporting evidence and are good for the year in which the activity is accepted.</p>	<p>\$2.00/hr</p>

Educational Growth

Benner: Competence	Minimum Requirements	CAP 3
<p>The Registered Nurse demonstrates:</p> <ul style="list-style-type: none">• The promotion of professional practice by planning and providing for knowledge attainment using adult learning principles.• The ability to plan for care using the nursing process: assessment, diagnosis, intervention and evaluation of outcomes utilizing nursing art and science.• The ability to provide others in the profession with Peer Review to improve practice.• The practice of anticipatory care, alert to changing patient conditions prior to a critical incident.• The integration and support for patient safety systems into care, such that to “Do No Harm”:<ul style="list-style-type: none">- 7 rights of medication administration- Sepsis Surveillance- Chain of Command- High-alert Medication reviews- Pharmacist review- Bedside report checks- Hourly rounding- Time-outs	<p>The Registered Nurse achieves any <u>ONE</u> of the following:</p> <ul style="list-style-type: none">• National Approved Nursing Certification (see list in Appendix);• Bachelors in the Science of Nursing;• In-school for BSN (Three-year time limit for CAP, One time). <p>Notes:</p> <p>Refer to “The Institute of Medicine: Future of Nursing” Report, October 2010. Nursing roles in the years to come will be dependent on additional knowledge and skills.</p> <p>Refer to works by Aitken, M. et al. “Additional educational preparation for Nurses saves patient lives. BSN and Certification have a protective effect on Patient Outcomes.”</p>	<p>\$2.00/hr</p>

Practice Excellence

Benner: Proficient	Minimum Requirements	CAP 4
<p>The Registered Nurse demonstrates:</p> <ul style="list-style-type: none"> • The promotion of proficient professional practice by evaluating his/her own practice and evaluating patient outcomes. • The ability to plan for care proficiently using the nursing process: assessment, diagnosis, intervention and evaluation of outcomes utilizing nursing art and science. • The ability to provide others in the profession with proficient Peer Review to improve practice. • The practice of proficient anticipatory care, alert to changing patient conditions prior to a critical incident. • The proficient integration and support for patient safety systems by role-modeling for others, such that to “Do No Harm”: <ul style="list-style-type: none"> - 7 rights of medication administration - Sepsis Surveillance - Chain of Command - High-alert Medication reviews - Pharmacist review - Bedside report checks - Hourly rounding - Time-outs 	<p>The Registered Nurse achieves <u>both</u> of the following:</p> <ul style="list-style-type: none"> • National Approved Nursing Certification, <u>AND</u> • Bachelors in Nursing, <u>OR</u> • In school for BSN (Three-year time limit for CAP, One time). <p>Notes:</p> <p>Refer to “The Institute of Medicine: Future of Nursing” Report, October 2010. Nursing roles in the years to come will be dependent on additional knowledge and skills.</p> <p>Refer to works by Aitken, M. et al. “Additional educational preparation for Nurses saves patient lives. BSN and Certification have a protective effect on Patient Outcomes.”</p>	<p>\$1.00/hr</p>

Research Generation/Utilization

Benner: Expert	Minimum Requirements	CAP 5
<p>The Registered Nurse demonstrates:</p> <ul style="list-style-type: none"> • The promotion of expert professional practice by evaluating his/her own practice and evaluating patient outcomes. • The ability to plan for care expertly using the nursing process: assessment, diagnosis, intervention and evaluation of outcomes utilizing nursing art and science. • The ability to provide others in the profession with expert Peer Review to improve practice. • The practice of expert anticipatory care, alert to changing patient conditions prior to a critical incident. • The expert integration and support for patient safety systems by role-modeling for others, such that to "Do No Harm". • The expert leadership of research utilization and generation by investing in the development of others, • The application of expertise in the improvement for the best in patient care, • The ability to contribute to the profession's knowledge by valuing the discipline to bring organizational nursing excellence to the institution. 	<p>The Registered Nurse achieves <u>ALL</u> of the following:</p> <ul style="list-style-type: none"> • National Approved Nursing Certification (see list in Appendix); <u>AND</u> • Master's in the Science of Nursing, <u>OR</u> • In school for MSN (Three-year time limit for CAP, One time). <u>AND</u> • Leads <u>ONE</u> Unit-based HAC, NPSG, CM or other care improvement project for the unit, with responsibility for planning, staff education, implementation, monitoring, evaluation and TCAB presentation. Project approved by area ED or CNO. <p>Notes:</p> <p>Refer to "The Institute of Medicine: Future of Nursing" Report, October 2010. Nursing roles in the years to come will be dependent on additional knowledge and skills.</p> <p>Refer to works by Aitken, M. et al. "Additional educational preparation for Nurses saves patient lives. BSN and Certification have a protective effect on Patient Outcomes."</p>	<p>CAP 5</p> <p>\$1.00/hr</p>



Clinical Advancement Program Verification Record

Unit: _____

Date: _____

Name: _____

Mobile Phone Number: _____

Anniversary Month: _____

Current Step: _____

Proposed Step: _____

RN Supervisor: _____

Is this upgrade in status occurring prior to anniversary date? Yes No

Category/Criteria

CAP Level	#	Met	Element
Professional Accountability	1		RN License Current
"	1		New Employee: CBO Started/Incumbent Complete, documented in LC
"	1		On-line competencies completed
"	1		New Employee: BLS/Incumbent BLS/ALS
"	1		Demonstrates accountability for identifying own learning needs and seeking knowledge where needed.
"	1		Demonstrates accountability for receiving Unit/Department communication of Policies, Procedures and/or Guidelines.
Practice Competence	2		Professional Practice Portfolio Updated
Journal Required	2		Peer Review Activity
Journal Required	2		Just Culture Activity
Journal Required	2		Shared Governance Activity
Journal Required	2		Professional Practice Model Activity
Educational Growth (Any 1)	3		Certification or BSN or In-school
Practice Excellence (Both 2)	4		Certification (Unexpired Certification Copy in Desk file)
"	4		BSN (Degree in Desk file)
"	4		In-school for BSN (Tuition Reimbursement current in Desk file)
Research Utilization/Generation	5		Certification (Unexpired Certification Copy in Desk file)
" (All 3)	5		MSN (Degree in Desk file)
"	5		In-school MSN (Tuition Reimbursement current in Desk file)
"	5		Unit Project

CAP for school: Three year Window: starts: _____ ends _____. This is year 1 – 2 – 3 (circle one).

NOTE:

Other than CAP I, must attach photocopy of Journal, First-time Certification or Degree, Current Tuition Request, Outline of project in Desk files.

Employee's last evaluation was satisfactory or above. _____

Signature of Unit Director