



Clinical Advancement Program Requirements
Clinical Level 4-Competent

Minimum Requirement: Equivalent of at least 2 years of full-time RN experience

Instructions: The descriptions below serve as examples of the level of evidence that must be provided to demonstrate the applicant is practicing at a Clinical Level 4 within the Upstate CAP. Using the application materials provided and the interview process, the nurse will provide examples of how they have met the requirement of three out of the five values listed **proving active participation in programs/initiatives that impact unit and nursing department goals and outcomes.**

Value 1 Collaboration (Communication, Teamwork, Therapeutic Relationships):

Performance Standards	Behavioral Characteristics	Measurable outcome examples	Outcomes assessment
Works with others (e.g, patients, families, healthcare providers) in a way that promotes/encourages each person's contributions toward achieving optimal patient outcomes.	Willing to be taught, coached, and mentored; participates in meetings and discussions regarding patient care and practice issues, is open to various team members contributions to optimal patient outcomes.	-HCAHPS scores -Patient Satisfaction surveys -Unit turnover and vacancy rates -NDNQI Nursing Satisfaction scores	*Present measures and discuss how your day to day practice impacts these outcomes. *Discuss shared governance work and how it contributed to collaboration and teamwork. *Demonstrate examples of collaborating in patient care and how that has improved outcomes.

Value 2 Professionalism (Leadership, Evidence-Based Practice, Shared Governance):

Performance Standards	Behavioral Characteristics	Measurable outcome examples	Outcomes assessment
The process of questioning and evaluating practice and providing professional practice; creating practice changes through research utilization and experiential learning. Clinical reasoning, which includes clinical decision-making, critical thinking and global grasp of situation, coupled with nursing skills acquired through a process of integrating formal and informal experiential knowledge and evidence-based guidelines.	Follows standards and guidelines; implements clinical changes and research-based practices, recognizes need for further learning to improve patient care; recognizes changing patient condition; seeks input to identify patient problem. Collects basic level data; follows algorithms, decision trees and protocols with all populations; matches formal knowledge with clinical events to make decisions.	-Policy development/change -Evidence based practice improvements -Committee goals met -Application of Situational Leadership	*Present policies, practice improvements, committee outcomes, or an example of situational leadership, and discuss how you apply them to practice.

Value Holistic Environment (Caring, Complementary/alternative therapies, Patient/Family Engagement & Advocacy):

Performance Standards	Behavioral Characteristics	Measurable outcome examples	Outcomes assessment
Nursing activities that create a compassionate, supportive and therapeutic environment for patients, families and staff. The sensitivity to recognize, appreciate and incorporate differences into the provision of care. The ability to represent the concerns of the patient/family and nursing staff.	Focuses on the needs of the patient, bases care on standards and protocols, maintains a safe physical environment. Assesses cultural diversity. Works on behalf of the patients, and self assesses personal values. Aware of ethical conflicts/issues that may surface in the clinical setting and makes decisions based on rules, represents patient when patient cannot and aware of patient rights.	-Unit HCAHPS and Press Ganey scores -Patient First rounding outcomes -Complementary or alternative therapies -Shortened length of stay -Quality initiatives	*Present unit HCAHPS and Press Ganey scores and discuss how your practice affects these scores. *Demonstrate the method by which you perform Patient First Rounds and how it impacts outcomes. *Discuss alternative therapies or initiatives that have improved quality outcomes or shortened patient days.

Value 4 Resources (Defined Nursing & Support Roles, Stewardship, Technology):

Performance Standards	Behavioral Characteristics	Measurable outcome examples	Outcomes assessment
Using a body of knowledge and tools that allow the nurse to manager whatever environmental and system resources exist for the patient/family and staff.	Uses a limited array of strategies; begins to recognize pieces and components; sees patient and family within the isolated environment of the unit; sees self as key resource.	-Unit or department budget -Quality measures -Staffing plans -Use of OT or sick calls on unit - Value Analysis project related to materials/supplies	*Present units budget and staffing plan and discuss how OT use and sick calls impact this. *Discuss a quality improvement and how it impacted patient care outcomes.

Value 5 Education (Patient/Family Education, Community Education, Professional Development):

Performance Standards	Behavioral Characteristics	Measurable outcome examples	Outcomes assessment
The ability to facilitate learning for patients/families, nursing staff, and other members of the healthcare team and community; includes both formal and informal facilitation of learning.	Follows planned educational programs; delivers patient/family education; focuses on nurses' role in delivering patient/family education.	-Core measures -Value based purchasing -Press Ganey scores -Education to the unit/department -Education to the community -Publication	*Speak to our core measures, value based purchasing, or Press Ganey scores and discuss how the care you deliver impacts these measures. *Give an example of education brought to your unit/dept. and how it improved quality of care.