



CLINICAL LADDER

APPLICATION MANUAL

2022

**PLEASE READ THE MANUAL CAREFULLY PRIOR TO SUBMISSION
OF APPLICATION**

MISSION STATEMENTS

OH Mission: We Serve, Heal, Lead, Educate and Innovate

OH Vision: Ochsner will be a global medical and academic leader who will save and change lives. We will shape the future of healthcare through our integrated health system, fueled by the passion and strength of our diversified team of physicians and employees.

Core Values Patients First, Compassion, Integrity, Excellence, Teamwork

System Nursing Department Mission/Vision/Core Values

- System Nursing will adhere to the Ochsner Health mission statement which is “We serve, heal, lead, educate and innovate.”
- System Nursing Vision: Ochsner Nursing will provide a distinctive patient experience and superb outcomes through the pursuit of excellence fueled by the passion and strength of our diverse team.
 1. We believe that our patients are the purpose of what we do.
 2. We are committed to providing peace of mind by creating a caring and healing environment.
 3. We believe that at Ochsner, every nurse is a leader.
- The nursing team will demonstrate the vision through the following core values:
 1. Caring
 2. Professionalism
 3. Leadership
 4. Integrity
 5. Respect
 6. Teamwork
 7. Stewardship
 8. Relentless Pursuit of Excellence
 9. Innovation

Clinical Ladder Objective, Goals, & Philosophy

OH Nursing Clinical Ladder Program recognizes and rewards the application of clinical nursing expertise in direct patient care. The goals of the program are to:

- Establish professional development expectations
- Enhance professional practice
- Foster ongoing skill development
- Increase patient, staff, physician satisfaction
- Provide incentives for progression
- Increase participation in evidenced based practice
- Influence patient and community outcomes

We believe that by rewarding individuals for developing the various skills that enhance their professional nursing practice, our patients and communities will be better served.

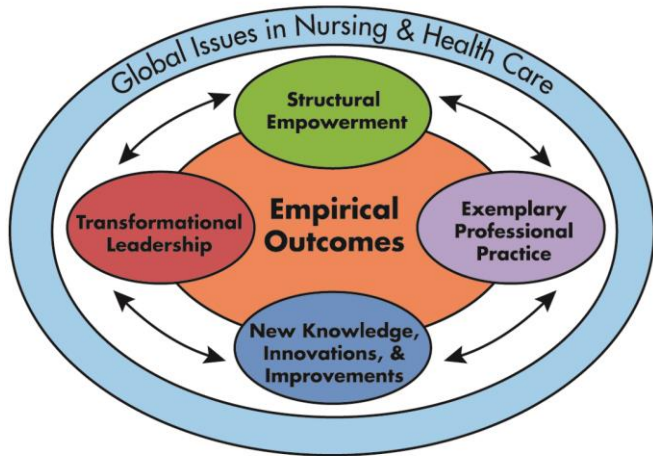
CLINICAL LADDER FOUNDATIONAL MODELS

The OH Clinical Ladder is based on three essential models for professional nursing development and practice. The Magnet Recognition Program® Model, the OH Professional Practice Model – Relationship Based Care and Benner’s Model “From Novice to Expert”. These three models are embedded into the OH Clinical Ladder through the structure of the levels of progression and the format and content for the activities that lead to points on the grid. Each model is discussed in detail below. A working knowledge of these models is essential for continued success in the professional development of our nurses. **Please refer to these models often while building your portfolio for application.**

Magnet Recognition Program® Model

The ANCC model for the Magnet Recognition Program® model serves as a road map for organizations seeking Magnet recognition and provides a framework for nursing practice and research into the future.

The model organizes the 14 Forces of Magnetism into 5 Model Components, with a focus on outcome measurement. Overarching the new Magnet Model Components is an acknowledgment of Global Issues in Nursing and Health Care. While not technically a Model Component, this category includes the various factors and challenges facing nursing and health care today.



Transformational Leadership

Today's health care environment is experiencing unprecedented, intense reformation. Unlike yesterday's leadership requirement for stabilization and growth, today's leaders must transform their organization's values, beliefs, and behaviors. It is relatively easy to lead people where they want to go; the transformational leader must lead people where they need to meet the demands of the future.

This requires vision, influence, clinical knowledge, and a strong expertise relating to professional nursing practice. It also acknowledges that transformation may create turbulence and involve atypical approaches to solutions.

The organization's senior leadership team creates the vision for the future, and the systems and environment necessary to achieve that vision. They must enlighten the organization as to why change is necessary and communicate each department's part in achieving that change. They must listen, challenge, influence, and affirm as the organization makes its way into the future.

Gradually, this transformational way of thinking should take root in the organization and become even stronger as other leaders adapt to this way of thinking.

The intent of this Model Component is no longer just to solve problems, fix broken systems, and empower staff, but to actually transform the organizations to meet the future. Magnet-recognized organizations today strive for stabilization. However, health care reformation calls for a type of controlled destabilization that births new ideas and innovations.

Structural Empowerment

Solid structures and processes developed by influential leadership provide an innovative environment where strong professional practice flourishes and where the mission, vision and values come to life to achieve the outcomes believed to be important for the organization.

Further strengthening practice are the strong relationships and partnerships developed among all types of community organizations to improve patient outcomes and the health of the communities they serve. This is accomplished through the organization's strategic plan, structure, systems, policies, and programs.

Staff need to be developed, directed, and empowered to find the best way to accomplish the organizational goals and achieve desired outcomes. This may be accomplished through a variety of structures and programs—one size does not fit all.

Exemplary Professional Practice

The true essence of a Magnet organization stems from exemplary professional practice within nursing. This entails a comprehensive understanding of the role of nursing; the application of that role with patients, families, communities, and the interdisciplinary team; and the application of new knowledge and evidence. The goal of this Component is more than the establishment of strong professional practice; it is what that professional practice can achieve.

New Knowledge, Innovations & Improvements

Strong leadership, empowered professionals, and exemplary practice are essential building blocks for Magnet-recognized organizations, but they are not the final goals. Magnet organizations have an ethical and professional responsibility to contribute to patient care, the organization, and the profession in terms of new knowledge, innovations, and improvements.

Our current systems and practices need to be redesigned and redefined if we are to be successful in the future. This Component includes new models of care, application of existing evidence, new evidence, and visible contributions to the science of nursing.

Empirical Outcomes (activities embedded throughout the 4 components listed above)

Today's Magnet recognition process primarily focuses on structure and processes, with an assumption that good outcomes will follow. Currently, outcomes are not specified, and are minimally weighted. There are no quantitative outcome requirements for ANCC Magnet Recognition®. Recently lacking were benchmark data that would allow comparisons with best practices. This area is where the greatest changes need to occur. Data of this caliber will spur needed changes.

In the future, having a strong structure and processes are the first steps. In other words, the question for the future is not "What do you do?" or "How do you do it?" but rather, "What difference have you made?" Magnet-recognized organizations are in a unique position to become pioneers of the future and to demonstrate solutions to numerous problems inherent in our health care systems today. They may do this in a variety of ways through innovative structure and various processes, and they ought to be recognized, not penalized, for their inventiveness.

Outcomes need to be categorized in terms of clinical outcomes related to nursing; workforce outcomes; patient and consumer outcomes; and organizational outcomes. When possible, outcomes data that the organization already collects should be utilized. Quantitative benchmarks should be established. These outcomes will represent the "report card" of a Magnet-recognized organization, and a simple way of demonstrating excellence.

The above description is a reproduction of the summary of the Magnet Recognition Program® from the ANCC website.

Within the OH Nursing Clinical Ladder Program, the components of Magnet comprise the 4 categories of activities on the points grid.

OH Relationship Based Care Professional Practice Model (PPM)

OH Department of Nursing has chosen an eclectic model that combines the organization's mission/vision and the nursing department's philosophy of care with the elements of relationship based care. We are calling it OH's Relationship Based Care Professional Practice Model (RBC PPM).

Components of the OH RBC Professional Practice Model

1. Patients and Family are the Center of all that we do.

I - Introduce yourself to patients and explain your role in their care that day.

C - Call the patient by his or her preferred name as a sign of respect.

C – Incorporate **Cultural** beliefs into the plan of care using appropriate resources.

A – Use **Appropriate** touch and/or acknowledge the emotional needs of the patient.

R - Review the plan of care, desired outcomes, and [respond to concerns and complaints] while sitting at the bedside, eye level, for 5 minutes including explanation of tests, procedures, & processes for the day/shift.

E - Every time care is provided, do it with our mission in mind [We are servants to our patients and we heal the physical, mental, spiritual, and emotional ailments of our patients and their loved ones].

2. Swanson's Theory of Caring: This theory was chosen because it fit with our culture and has practical applications.

- maintaining belief,
- knowing,
- being there,
- doing for, and
- enabling/informing

3. Relationship Based Care focuses on three important relationships:

- Nurse to patient/family (see component number one above),
- Nurse to team (see component number nine below), and
- Nurse to self.

This aspect of Ochsner's model is based on the book, *Relationship Based Care* by Mary Koloroutis (2004). It includes:

- Caring and healing environment,
- Caring leadership and teamwork,
- Professional nursing practice,
- Patient care delivery, and
- Resource driven care.

4. Improvement in Patient Outcomes is the ultimate goal. Improvements in nursing sensitive indicators should be seen in all departments.

5. Nursing's Core Values are the foundation of our philosophy & assist in accomplishing our mission.

- | | |
|-------------------------|--|
| • communication | • comfort and caring behaviors |
| • coordination of care | • evidence based practice and nursing research |
| • respect and diversity | • community involvement |



6. Professional Development: Nurses are encouraged to take responsibility for their development.
 - Involvement in professional organizations
 - Seeking higher education
 - Achieving specialty certification
 - Onsite and on-line educational programs
 - Participation in national and regional conferences
7. Shared Decision Making occurs through
 - Organizational and system level committees
 - Nursing department committees
 - Unit practice councils
 - Town hall meetings
 - Nursing procedure review
8. Meaningful Recognition: Recognition for the value that each brings to the work of the organization is provided by programs sponsored at the system level, such as the Ochsner Spirit Awards, the facility level, such as the Daisy Awards, and the unit level, such as posted lists of certified nurses, or those with perfect attendance.
9. Collaborative Practice: True teamwork and collaborative practice are essential to delivering safe, ethical, and efficient patient care.
 - Respect for the unique, individual functions and contributions of each team member
 - Function as inter-professional colleagues
 - Utilize the “Commitment to My Co-Worker”

Within the OH Clinical Ladder, competence in the components of the RBC PPM is essential for the Exemplary Professional Practice category on the grid.

In 2014, OH began the roll out a caring communication framework, which is captured in the acronym AIDET. Beside nurses and nurse managers attended the necessary training needed to facilitate the implementation of this customer service initiative.

A – Acknowledge (the patient by name; make eye contact 10/5, smile, & acknowledge everyone in the room)

I – Introduce (yourself, your skill set, your professional certification and experience)

D – Duration (give an accurate time expectation for tests, physician arrival, and identify/communicate next steps; when it is not possible, give a time in which you will update the patient on progress)

E – Explanation (explain step by step what will happen, answer questions, and leave a way to contact you – such as a nurse call button or phone number. Use language a patient can understand.)

T – Thank You (thank the patient. You may thank them for choosing your hospital, and for their communication and cooperation. Thank the family for assistance and being there to support the patient)

Benner’s Levels of Practice

The ladder levels are based on “From Novice to Expert: Excellence and Power in Clinical Nursing Practice” by Patricia Benner (1984). Benner has described stages in the progression of patient care expertise that can result from nursing experience. Listed below is a brief description of each stage:

Novice/Intern

The novice/intern is defined as an entry-level nurse who delivers fundamental knowledge-based care to assigned patients while developing technical competencies. The RN novice/intern begins to gain experience under direct or close supervision and depends on rules to guide actions.

Advanced Beginner/Competent

The advanced beginner demonstrates marginally acceptable performance and relies on basic theory and principles. Help is needed for priority setting. The competent practitioner is consciously aware of long-range goals and can engage in deliberate planning based on abstract and analytical consideration. As a result of this planning, the competent RN has a feeling of mastery and the ability to cope with contingencies and feels efficient and organized.

Proficient

The proficient RN perceives situations from a global perspective. They can interpret nuances in situations and recognize which aspects of the situation are most significant. This nurse functions independently and efficiently and demonstrates leadership through the management of complex patients and through some involvement in unit / organization activities.

Advanced Proficient

The nurse at this level has an in-depth knowledge of nursing practice achieved through 3-5 years experience, insightful practice, and continuous learning. This nurse relies on previous experience for focused analysis of problems and solutions. They can accommodate unplanned events and respond with speed, efficiency, and flexibility and confidence. An integrated, collaborative approach to care is evident. This nurse begins to assume a leadership position within the clinical practice area and often serves as role model, preceptor, and coach.

Expert

The expert nurse's perspective is intuitive and evidence-based. They have achieved a comprehensive knowledge base from typically 5 years or more experience. The expert nurse is self-directed, flexible, and innovative in providing care and has a deep understanding of the total situation to resolve complex issues. Other characteristics include: actively and positively influencing the team, fostering critical thinking in others and forming mentoring relationships with other nurses. The expert nurse participates and leads activities that improve systems, and serves as a change agent to challenge him/herself and others.

Within the OH Nursing Clinical Ladder Program, the last three stages will result in recognition and be classified as follows:

Proficient	Level I
Advanced Proficient	Level II
Expert	Level III

ADVANCEMENT PROCESS

The clinical ladder program at OH is a performance-based program for registered nurses providing direct patient care in acute care or ambulatory settings.

Who is eligible?*

Regular, full, part-time, or supplemental staff nurses with the following primary position titles:

RN Staff (Hospital & Ambulatory)

OC/CC

RN Administrative Coordinator

RN Nurse Clinician

RN Specialty Area

RN Special Weekend

RN Staff Weekend Work

RN Clinical Transplant Coordinator

RN Call Center

RN Clinical Lead

RN Endoscopy Scheduler

RN Clinical Care Coordinator

RN Employee Health

RN Rehab Liaison Nurse

RN First Assistant position in the OR

RN Bone Marrow/Oncology Clinical Consultant

RN Program Coordinator – Flight Care, Stroke and other disease entities

RN Health Coaches, Clinic RN, or Clinic RN Navigators

RN eICU

RN Arrhythmia Nurse

***NOTE:** If your job title is not listed, discuss with your Manager / Unit Director. A current job description will need to be brought to the **System Professional Development Council** for consideration. **Only job descriptions with at least 50% or more of direct patient care will be considered. Please see Clinical Ladder site for most up to date list of eligible jobs.**

Eligibility Requirements

To participate in the clinical ladder program, the RN must meet **all** of the following eligibility requirements:

Pre-Approval

- Must be an RN with organization for **3 month** and completed New Hire Orientation
- Must have worked a minimum of **250 hours** prior to requesting to participate in the clinical ladder program
- Must have with a **completed** initial new hire orientation
- Job descriptions must include at least 50% or more of direct patient care in acute care or ambulatory setting.
- Professional Membership card is **current** at the time of submission. (Level III applicants Specialty Certification must also be current).
- Must NOT have any documented progressive discipline on file within the rolling year of application. May not apply for Clinical Ladder until 12 months after being placed on progressive discipline.

Final Approval

- Have worked a minimum of **1000 hours** as an RN at OH in the year of application.
- Must have with a performance evaluation on file- Must have performed Developing or Higher on eval.
- Have **completed** all mandatory competencies and in-services required by OH and department before the final submission deadline.
- Job descriptions must include at least 50% or more of direct patient care in acute care or ambulatory setting.
- Must NOT have any documented progressive discipline on file within the rolling year of application. May not apply for Clinical Ladder until 12 months after being placed on progressive discipline.
- Professional Membership card is current at the time of submission. (Level III applicants Specialty Certification must also be current).

Mandatory Requirements.

In addition to the eligibility requirements above, the RN must meet mandatory criteria applicable to the level for which applying:

MANAGER MUST VERIFY THE CRITERIA BELOW			
must be completed by final approval/ submission			
Criteria	Level I	Level II	Level III
Years' Experience	At least one year RN experience	BSN or at least two years' experience as RN	BSN or at least three years' experience as RN
Points on Grid: (*Must have points in all 4 categories that total at least)	30 points	45 points	65 points
Professional Organization	Member of nursing professional organization (Current at time of submission) *Documentation must include : Full Name, Organization, and Expiration date!		
Certification			Recognized certification in area applicable to specialty

* Must be a nursing professional organization that advances the profession of nursing. Groups such as Student organizations (i.e. Student Nurses association) or "Coalitions" are not considered professional organizations that meet this requirement.

Other Requirements

- **Portfolio must be complete at submission.** No request will be made for additional information or signatures. Portfolio must be submitted electronically according to the due dates: **January 31, April 30, July 31, October 31 at 2359 pm**
- **Points are awarded for those activities completed within the application year.** Please contact PDC rep for guidance regarding current and future applications.
- **Points for activities with Tiers:** Tiers are designed to allow points for taking steps in the process towards improvements. For example, points may be taken in Tier 1, 2, and/or 3 if applicable. However, items within a single tier may not be taken together; they are usually either/or. For example, if tier 1 has an "a" and "b" component, points may be awarded for either "a" or "b", not both. Many of the items have a maximum number of points that may be taken on each tier.

TIPS FOR SUCCESS

- Quarterly submissions due: **January 31, April 30, July 31, October 31 at 2359 pm**
 - Inform your leader as soon as you know you are going to apply for Clinical Ladder. Pre-Approval is required!
 - ****Process change:**** There are now open enrollment dates! You must pre-enroll for the period you will be working on.
 - Schedule a meeting with your leader to discuss your portfolio content.
 - Do not wait until the last minute for anything
 - Late submissions are denied (application submission / department leader approval)
- *Any portfolio with fraudulent documentation will be referred to senior management for further review.**

Review Process

The Professional Development Council (PDC) at each campus is commissioned to review portfolios of nurses seeking progression in the clinical ladder program. Several panels of PDC members complete quarterly reviews. The panel assures congruence with professional nursing practice criteria for the levels.

The PDC panel makes recommendations for advancement to the Human Resources/Payroll Department. The nurse is notified of the decision within 60 days of the application deadline.

DENIED APPLICANTS MAY RE-SUBMIT IN THE FOLLOWING QUARTER.

Compensation

The RN participating in the clinical ladder program will be compensated for participation by a differential added to the base rate of their primary position (for worked hours – this does not include GPT, Orientation, Educational Leave, and “secondary positions,” etc.), and recognized with a pin as follows:

Level I	\$0.50	Blue Pin
Level II	\$1.50	Red Pin
Level III	\$3.50	Green Pin

Changes in compensation will be effective the first FULL pay period of the following quarter in which the application is submitted and approved by the PDC. For example, if an application is submitted by the February deadline and approved in the 1st quarter, the differential will go into effect the 1st FULL pay period in April (pay period with only April dates in it).

Appeal Process

Nurses may request an appeal to the decisions of the campus Professional Development Council. The following process should occur:

- 1) The nurse should discuss the decision with their Unit Director / Manager as soon as possible. If the issue is not resolved, then progress to next step.
- 2) Contact the Campus PDC Chair for clarification of outcome of the decision. If the issue is still not resolved, then progress to next step.
- 3) Submit a formal appeal letter along with supporting documentation to the campus PDC Chair, who will present the appeal to the System PDC Council.
- 4) The System PDC will review the appeal and render a final determination. The System CNO Council and applicant will be notified of the outcome.

****Denials for missing signatures or missing documentation may not be appealed. ****

Ongoing Evaluation/Progressive Discipline

Nurses must continue to demonstrate performance and meet criteria for their achieved level of practice throughout the year. If changes occur prior to the next reapplication (such as placement on progressive discipline), the nurse should notify the Unit Director/Manager and the chair of the PDC at your facility immediately. Clinical Ladder differential will be discontinued, and the person will not be able to reapply for 12 months from the time of notification to the clinical ladder administrator.

Renewal

The nurse must apply yearly to demonstrate meeting criteria at a particular level. It is the consistent demonstration of practice over time that indicates eligibility for advancement. You can advance every quarter if you choose, however you must re-submit a new portfolio.

Transfers

A nurse who transfers from one specialty to another will maintain his/her present level until the time of the next application. **Upon reapplying, it is possible that your status in the program may change (move down a level). This may be related to the time that is required to gain skills and to be considered proficient or expert in the new area.** *Please refer to compensation guidelines as transfer may require orientation and temporarily affect Clinical ladder award.* **Notify SNPD@ochsner.org of transfer to ensure award carries over. You will not get CL differential in Orientation (ORT).**

Program Evaluation

The Professional Development Council will be responsible for monitoring and evaluating the success of the program. Recommendations or feedback should be directed to any member of these groups and then shared with System PDC.

EXPLANATION FOR SPECIFIC CRITERIA WITHIN THE GRID **(PAGES 23-28)**

TRANSFORMATIONAL LEADERSHIP CATEGORY

Advocacy and Influence

Advocacy for needed resources (human or material/equipment) in your department must be tied to the department's goals or to the organization's goals or strategic imperatives (your manager or director should be able to assist with the selection of applicable goals). Examples of advocacy: LEAN Workouts, Kaizens, Six Sigma, Black Green or Yellow Belt, and 5S workouts usually result in advocacy for needed items.

Lean – is the set of "tools" that assist in the identification and steady elimination of waste. Lean also takes into account waste created through overburden and waste created through unevenness in workloads.

Kaizen – Japanese for "good change"; refers to activities that continually improve all functions and involve all employees from the CEO to the assembly line workers. It also applies to processes, such as purchasing and logistics, which cross organizational boundaries in the supply chain.

5S's - workplace organization method which describes how to organize a workspace for efficiency and effectiveness by identifying and storing the items used, maintaining the area and items, and sustaining the new order. (Sort, Straighten, Shine, Standardize, Sustain)

Capital budget requests, staffing grid changes, scheduling practice changes and Intake and Checkout process changes may result in advocacy for needed resources.

Mentoring

Mentoring can include providing information, advice, support and ideas from an experienced nurse who can be a strong force in shaping a nurse's (or other person's) identity as a professional. Mentors have a long-term (usually two years) relationship with the mentee. Precepting may be the beginning of this relationship but does not count for points in this category. Points for academic outreach should be claimed in recruitment and retention section. Attendance at the Mentor Academy is **required** to obtain points in this category, and annual update courses are strongly recommended for additional points. **A Mentor/Mentee agreement must be completed (with start date) and filed with the Mentor Coordinator. Mentor meetings must occur every 4 weeks. 1 pt. is awarded for each meeting, 6 pt. max per year per mentee. Mentor can only claim points for 2 mentees at a time.** Documentation must include: 1. A summary of topics discussed and issues being worked upon; 2. Signed monthly verifications by the mentee; 3. A copy of Mentor/Mentee agreement filed with the Mentor Coordinator; 4. Request Approval from the mentee's leader (manager/director). * No points will be issued if applicant has not attended the Mentor Academy. Examples of mentoring may be RN to RN, RN to LPN/PCT/MA.

Communication with Leadership

Direct care nurses' input should influence changes in the department/organization. Points may be awarded for any discussion with a nursing leader (OC/CC, UD, Manager/Director, Practice/ Program Coordinator, AVP/ CNO etc.) that resulted in a change in the way you practice nursing, in the work environment or that result in better patient satisfaction.

Examples: Nursing input in a LEAN workout leads to a change in the way patients are scheduled; sharing an idea about how to decrease patient wait time; sharing an idea or article with your supervisor leads to a better work environment; input into a staff meeting or task force working on ideas to improve employee engagement, etc.

Points are increased if your input/idea is to a Senior leader and/or brings about an improvement in a nursing sensitive indicator, patient satisfaction with nursing, NDNQI RN Satisfaction or Employee Engagement (EE) scores. Improvements in nursing sensitive indicators or patient satisfaction require several months/quarters of data showing before and after the change. RN Satisfaction and Employee Engagement require one before and one after data point.

Every Nurse a Leader

Points may be awarded for taking the time to answer hospital wide surveys such as the National Database of Nursing Quality Indicators (NDNQI) RN Satisfaction Survey, the Summer Pulse Engagement Survey, Ochsner Engagement and Culture of Safety Survey, OH Professional Development Survey, the Electronic Health Record Survey, the Care for the Caregiver Survey, (must show proof that the survey was taken – usually the print out of the “thank you” page). Does not include completion of course evaluations or answering questionnaires for research studies, or Pop-Up Just In time Surveys on Ochweb (research addressed in 4th category).

Years of Service

Years of Service as RN at OH (use the HR rules to determine - OHS.HR.603 – External Employment Mapping A Top Career In Healthcare [MATCH]; such as years as LPN are given ½ credit and years at Tenet have been grandfathered. Eligible employees of facilities which have been acquired, merged, or managed by OH **AND** had no break in service should calculate the Years of service based on their higher date with the original organization.

Perfect Attendance

Being on time, every time shows respect for patients, visitors and co-workers. It is also a sign of leadership and accountability. Points are awarded for perfect attendance during any of the 4 rolling quarters during your application period. Employees with an unscheduled absence or a tardy during the quarter are excluded. Employees with approved FMLA qualify for perfect attendance. Must request approval from your Unit Manager.

Peer Performance Evaluation/ Review / Interviewing – Serves as a member of a formalized team or group of employees in the department with expected responsibilities to formally interview potential new hires and / or provide feedback for employees' performance evaluations. Points for other activities such as chart audit/ reviews are earned in “Other Activity/ Event/ Projects.”

Super Users and Line Insertion Teams

RNs who are Epic or other computer or equipment superusers for the unit/department may apply for these points. Must be able to show continued service as a superuser. Staff nurses who are members of central line insertion teams may only apply for these points if they are certified for PICC insertion and PICC line insertion is not a part of their job description. The primary job description should be a direct care nurse to be eligible. For example, a staff nurse on a med/surg unit who also serves on a line insertion team several hours per week is eligible for these points.

Relief/Permanent Charge or Lead Nurse

Points not applicable to OC/CC and only available to nurses who act as occasional relief charge or who are considered permanent charge (but not an OC) or relief lead nurse (or relief Clinical Ops) in the clinic. Attendance the Charge Nurse Academy is strongly recommended for additional points. Leader Cafe Sessions are awarded points. If desiring to attend one of these cafes, one can visit the Ochsner Nursing Institute website – 1 point per session, MAX of 6.

STRUCTURAL EMPOWERMENT CATEGORY

Committee/ Council Involvement – Actively participates on a approved committee/ council or serves in a unit champion role (CAUTI, CLABSI, HAPI, Falls, Daisy, Patient Experience, Patient Safety, etc) for a minimum of 3 months prior to the application. (approved committees will be found in Staff Garden. Anyone seeking approval for committee please contact SNPD.) New committees/ councils which have not been in existence for minimum of 3 months are not eligible; this will allow time for committee/ council work to be done. Evidence of attendance at meetings should be obtained from the chairperson of the committee/ council using the Committee Involvement Verification Form. To apply for points for serving on a committee/council or as a Chairperson, provide a summary of your contribution to the committee (list accomplishments, progress toward goals, method used to disseminate information, etc.). Points may be obtained for both membership and chairperson involvement as long as these are different committees. Each committee/ council should be entered separately. Tier 7 provides for points for the work of a committee that shows an improvement. Example: Stroke committee work that shows improvement in the time to TPA indicator; Pain Resource Nurse Council that shows an increase in patient satisfaction with pain control; clinic committee that improves time to answering a phone or calling a patient back. Improvements in nursing sensitive indicators or patient satisfaction require several months/quarters of data showing before and after the intervention or change made by the committee. **Task force work is now applicable in Taskforce Category.*

Nursing Professional Organization Participation

Membership to a nursing professional organization is required to apply for the clinical ladder for all levels and membership verification should be submitted with the application – no additional points are provided for membership. Please contact your PDC rep for confirmation / verification of organization, if unclear. An example of an ineligible organization is Sigma Theta Tau International. This organization is an Honor Society and its membership is by “invitation only”, not open to all nurses. However, points may be awarded for participation in the activities of your professional organization such as attending meetings/educational events at least twice a year and/or being on a committee or board at the local, state, national/international level. ** Must be a professional organization that benefits a profession's area of practice such as Critical Care (e.g. AACN, GNOC-AACN). Groups such as Student organizations (i.e. Student Nurses association) are not considered professional organization that meets this requirement.*

Professional Organization Conference Attendance

Points may be awarded for attending a local/ state/ regional/ national healthcare conference in person or virtually. Must have proof of registration (via email or receipt). Points awarded for each conference date (minimum of 4 hrs per day). Additional points are awarded for synthesizing some of the education that you received and providing it to your co-workers in either a written or oral presentation. Further points are awarded if the education/best practice that you bring back from a conference is implemented in your department and shows an improvement in a nursing sensitive indicator, patient satisfaction with nursing, RN satisfaction/EE, or any patient related metric. Contact hours awarded at conference may be applied in CE category. May upload CE certificate as proof of attendance or please use validation form (Provided in link).

Preceptor

Serving as a preceptor for a consistent period of time (e.g. with a new hire - time invested must be continuous; student nurse preceptorship) is applicable for points in this category. Must be responsible for ensuring the orientation process for the new hire is completed (e.g. paperwork completed, etc.). Must include names of those precepted and a summary of the experience. A relief preceptor assists the primary preceptor and provides coverage when the primary preceptor is not available. To gain points for relief precepting, **at least 6 shifts** of employee precepting experiences must be cited.(does not have to be the same orientee, this does include buddy shifts with agency, or CSRC staff). Attendance at an initial Preceptor Course is **required**. *Proof of course attendance is required every year and may either be the original certificate or OLN transcript showing completion. Points will not be awarded if verification of attendance is not submitted with portfolio. For Tier 4: One point awarded per class, MAX of 2 points. (There are in-class offerings for 3-4 hours, or 30min-1 hour for online/ podcast offerings).

Community Involvement/ Humanitarian Acts

All activities claimed must align with Ochsner Core Values. Volunteer points for working in activities or events will be accepted only for those that you work **without pay**. Tier 1 includes donations of blood, hair, GPT (**minimum of 4 hours of donated GPT**, 4-8 hrs is 1 pt, 9-16 hrs 2 pt, > 16 hrs is 3 pts), Employee Giving, Holiday Hope, etc 1 point

each. Tier 2 activities allow for one point for volunteering for community event **OR** hospital sponsored activity, one point for 1-8 hours per date, two points for > 8 hours per date and three points for >16 hours per date, etc. with a maximum of five points. Tier 3 **Points may be awarded for donations to non-profit charitable organizations such as Good Will or Volunteers of America. Participating in the run/walk does not apply.** Tier 4 is for non-paid volunteer work that is on-going with a consistent schedule where an organization, or third party institution is relying on the committed service you provide (i.e coaching, scout leader, volunteer school nurse or librarian, volunteer fire fighter, nursing home/senior center volunteer, mission trips, etc). One point is awarded for every 8 hours up to a MAX of 12 points. The name and contact information must be provided on the form and random calls will be made to verify activities. Tier 5 is for serving in the military (current active, reserve, or guard.) *Ochsner Service Corp does not apply here because one is paid for their time. If activity does not fit, or you are maxed, consider “Other activity” and PDC will evaluate based on content/ description of activity.

Nursing Recognition

Recipients of Recognition: Tier 1 points will be awarded for recipient of Value on the Spot/ dated letter/email written by a patient/family member and/or specific Press Ganey recognition if approved by Unit Director that is received during the 12 months prior to the application. Colleague-to-nurse recognition of any form is limited to 2 points MAX of the total 4 points. HIPAA rules apply when submitting patient related or patient specific nominations or documents. Remove/ obscure patient identifying information or valuable material, eg image/ face, SS#, DOB etc. Tier 2 is awarded for recipient of a Good Catch. *Tier 3 is for Recipient of a written nomination for DAISY. If awarded for that nomination, then points apply in Tier 5.* Tier 4 is for Recipient of a written nomination for an external award (e.g. Great 100 or Nightingale) Tier 5 points are for any professional recognition that was awarded by an **internal** program (e.g. DAISY, Spirit of Caring, Employee of the Month, All Star Mentor Award, Patient Safety Champion) within the application period. **** Unit-based Employee of Month recognition programs are not eligible for points.** Tier 6 is any professional recognition from an external program (e.g., Great 100, Nurse Week, Nightingale Award, Jones Nurse Scholar Program etc.) awarded within application period. **Author of Recognition:** Tier 7 and 8 are for writing **internal** and external nominations. **Points would only be granted if: A copy or "screen shot" of the nomination is included in the submission and proof it was submitted.** The nomination must include an appropriate descriptive summary of the nomination (lack of sufficient “narrative” will not be accepted). Authoring a value on spot is not eligible.

Health Literacy (formerly known as Patient Education)

Health Literacy is an important issue when providing patient education. New techniques need to be learned and practiced to provide patient education in a way to ensure that the patient truly understands and can act upon the new knowledge. Points are awarded for attending classes on **how to provide patient education**, such as attendance at the Health Literacy Summit. Classes on content or what is taught to the patient is not acceptable. Classes may be non-CNE as well as CNE. Classes on providing patient education that credit CNE may also be listed in the CNE section of this application. Patient and Family Education Resources, Teachback: Empowering the Patient through Quality Education Delivery and Validation, and Nursing Discharge Education ARE eligible for points. The following courses are not eligible: Annual Regulatory Bundle and any course titled “SKILL- ...” are **NOT** eligible. Serving as Qualified Bilingual Employees (QBE) can claim points here and must provide Ochsner program’s official attestation.

Continuing Education

Contact hours must be awarded through an organization that is accredited as an approver of continuing education by the American Nurses Credentialing Center’s Commission on Accreditation. Credit for Continuing Medical Education will be awarded with appropriate documentation. **A copy of continuing education certificate or transcript from professional organization may be accepted. Submitting OLN Transcript alone is NOT acceptable since most items on the transcript are not CNE eligible, such as TM and ODT.** CNE for ACLS, TNCC, ENPC, PALS, NRP, etc., both initial and renewal, are acceptable for points. BLS is not acceptable. See the Degree Advancement section for claiming points for nursing school classes.

Teaching / Presenting

Points will be awarded for obtaining initial instructor status for a particular discipline (ACLS, BLS, PALS, NRP, CPI, TNCC, ENPC). Points can be also obtained for teaching (ACLS, BLS, PALS, NRP, CPI, TNCC, ENPC) courses, working at Skills Fair (attendance is not eligible), a special presentation at a staff meeting, etc. Must show proof of the education with an email from the CTC or SNPD for sponsored activities. **Must provide a roster/ sign-in sheet and summary of the program for staff meeting or other non-CNE presentations.** Classroom presentations to patients, such as Joint Class, Prenatal Classes, etc. may apply with Manager/Director signature as verification. Points may be obtained for presenting the material more than once. Impromptu education on the unit is no longer acceptable for points.

Specialty Certification

Definition: A process by which a nongovernmental agency or association certifies that an individual licensed to practice a profession has met certain predetermined standards specified by that profession for specialty practice. Its purpose is to ensure various publics that an individual has mastered a body of knowledge and acquired skills in a particular specialty (American Nurses Association, 1979, p. 67). Certifications for ability to perform clinical interventions, such as Advanced Cardiac Life Support (ACLS), Basic Life Support (BLS), Neonatal Resuscitation Program (NRP), Pediatric Advanced Life Support (PALS), and other similar types of certifications are not included.

Tier 1: Specialty Certification in your practice area is required to apply for the clinical ladder for level 3 and verification of certification with an expiration date should be submitted with the application – 4 points are provided for Specialty Certification in your practice area. Tier 2 Points may also be awarded for additional ANCC specialty certifications. Tier 3a is for completion of a certification prep course where points may be taken both here and in the CNE section, if CNE credits are available for that prep course.. Tier 3b is for test prep that was through a study group or class without CNE. Tier 3b may also be used if the class had CNE but it is not also listed in the CNE section.

Please remember that specialty certification must be in a recognized specialty– see ANCC specialty certification list on the Staff Garden platform Helpful links for a list of approved specialties.). If you do not see your specialty, please contact PDC chair.

Degree Advancement

Applicant must be currently enrolled in a BSN program or above (within application year). Transcript or letter showing completed credit hours from school is required and must show that classes taken are a part of a degreed curriculum. One point allowed for each credit hour if a **full-time employee** 1 point for every 2 credit hours if **part-time or SSP employee**. Points for program classes **may not** be included in the CNE section.

EXEMPLARY PROFESSIONAL PRACTICE CATEGORY

Relationship Based Care (RBC) Professional Practice Model

See page 5-6 for details about the practice model. Points may be awarded for activities related to the practice model according to the tiers. Tier 1 is for team building activities (care of the team). Tier 2 is for **work related** self care activities (care of self- for example, mindful meditation, care for the caregiver session, Schwartz Rounds, attend Nurse Café, and stress management). Tier 3 is for care of the patient also known as patient-centered care and may be seen through the consistent use of ICCARE or activities that meet the special needs of patients, families or populations. Individualizing the patient plan of care is a nursing expectation, and should be documented in the patient's medical record, and is not eligible for points. Providing consistent use of ICCARE or other unique patient centered activities, ie long terms patients receiving extra attention (i.e. to go outside), music therapy, nail painting, plan weddings, visiting patients after hours, attending funeral for deceased patient, etc. Projects related to ICCARE or population care should be documented on the RBC form. Tier 4 is showing an improvement in a nursing sensitive indicator, RN satisfaction/Employee Engagement or patient satisfaction scores.

Accountability and Autonomy: Review of Standards of Care

Nurses are responsible to incorporate regulatory and specialty standards and guidelines into their nursing practice for the delivery of care to their patients. Standards of care and clinical practice guidelines are developed by regulatory agencies and professional organizations for both general and specialty practice. These standards of care/guidelines are frequently updated and revised as new knowledge and best practices are implemented. Examples of standards of care/guidelines are the ANA codes of professional practice, code of ethics, practice principles, etc.; the Clinical

Practice Guidelines, the AORN standards of nursing practice, the SGNA standards of nursing practice, etc.; the Scope and Standards of Practice for Professional Ambulatory Care Nursing; and the state practice acts, Joint Commission standards, CMS regulations, etc. Since review and incorporation into practice of new and updated standards is a responsibility of professional nursing practice, points may be awarded for periodic review of your specialty's standards of practice and for incorporating revised standards into the nursing practice of your unit. Example, an endoscopy nurse can check the SGNA website once or twice a year to investigate the SGNA standards of care for any new or revised standards and report the finding to the UD. The review is documented on the appropriate form with the report to the UD attached (can be an email stating that nothing new was found at that time). If a revision is found, the nurse could work with the UD or a group of nurses in the unit to determine what changes need to be made to be in compliance with the revised standards.

Accountability and Autonomy: Review of Policies and Procedures

In addition to standards of care, policies and procedures need periodic review to assess compliance with the most current standards of care/guidelines. Points may be awarded for conducting these reviews when needed. If a new policy, procedure or clinical intervention guideline is needed, additional points may be given for the creation/development of these documents to meet the needs of nursing practice on the unit/department. Request approval from your unit manager.

Recruitment and Retention

Points may be awarded for participation in recruitment and retention activities. **Recruitment** refers to the process of attracting, screening, selecting, and onboarding a qualified person for a nursing position. Examples of specific activities may include speaking at a school or community event about choosing nursing as a career, allowing students to job shadow through academic outreach, going with a recruiter to a recruitment event or open house, and peer interviewing. **Retention** is the ability to keep employees at the organization. Some examples of activities that may be related to retention are allowing nurses to shadow you in an area different from their home base, planning a social function for the department, identify causes for turnover and/or stress in your area and work with manager or group of nurses to make changes and improvements in the environment, develop plan for scheduled meal relief and breaks, identify growth opportunities for the nurses and develop ways to recognize nurses for achievements in your area. Additional points are awarded if the unit has a decrease in the turnover or vacancy rates on the unit/department.. Ochsner Brand Ambassador program is dedicated to encouraging social media savviness in employees and sharing the great things happening all across the system with friends and peers on social media. Leaders attestation must be included.

Internal Experts/Consultants

An internal expert is a nurse whose skills/expertise are recognized in a specific nursing area. These nurses make themselves available to the other nurses in their area and/or to the facility to utilize their skills/expertise to enhance patient care or nursing practice. Examples are the pain resource nurses, the wound care resource nurses, geriatric resource nurses and Rapid Response RN. This could also be the go-to nurse on the unit for difficult IV sticks, or for troubleshooting equipment. This category will award 4 points for each skill set, MAX of 8 points.

Work Environment

Establishing and sustaining healthy work environments is a priority for nurses to make their optimal contributions in caring for patients. The link between healthy work environments and patient safety, nurse retention and recruitment is irrefutable. Points may be awarded for activities that relate to creating a healthy work environment such as spring cleaning, 5S Lean projects, morale boosting activities, commitment to my team activities, employee engagement action planning and implementation, initiatives to decrease workplace injuries such as decreasing needle sticks, etc. Refrigerator cleaning both in staff lounges or patient care areas at least 2 or more times a year may be claimed for only 1 point. However, entering work orders for repairs/improvements is a job expectation and does not qualify. Additional points may be awarded if the activities show an improvement in workplace injury rates and/or RN Satisfaction/Employee Engagement scores from the previous year (would need to show previous year's rate compared to current year on specific indicator).

Patient Safety

Keeping our patients safe is of paramount importance for nursing practice. Points may be awarded for serving as a unit champion (ex: CAUTI, CLABSI, HAPI, Falls, Patient Experience, Patient Safety, Progressive Mobility) and activities that lead to improved patient safety. Projects may include fall prevention, pressure ulcer prevention, decreasing CLABSI and CAUTI, medication error prevention, implementation of the National Patient Safety Goals, sweep sheet assessments, and reviewing and implementing actions based on nursing sensitive indicator data. Serving as a Hand Hygiene Secret Shopper is awarded points in this category- 1 pt for every 2 months with minimum data collection. Active secret shopper = minimum of 20 observations per month. Request Approval from you Campus Infection Preventionist for validation. If unsure of projects or opportunities at your campus please contact your manager.

Flexibility

Flexibility is assessed as an attestation from your supervisor that states that you help to meet the demands of the department by coming in extra when asked or taking voluntary on-call or are willing to change assignments in the middle of the day or work on a sister unit without complaint. (**Float Pool is excluded from points in Tier 2 of this category).

Cross-Training/Floating

Definition: Working in another practice area (1-2 other units) whereby clinical expertise differs from home unit (work in a totally different environment, such as peds to adult, M/S to CC, ambulatory to hospital). Leader of alternate unit must provide approval of cross training. Use validation form provided and upload into platform. Competency form/papers, or OAE for cross trained unit are no longer required for portfolio submission. Floating between similar areas is not considered "Cross-training/floating." A minimum of 40 hours in one year must be worked in these other areas to get 2 points (for floating to 1-2 units or working in a cost center that is different). A minimum of 80 hours in the past 12 months must be worked to get 4 points for floating to 2-4 units. Ambulatory: 2 points for working a different cost center or 4 points for covering a position vacancy as well as own job responsibilities. (**Float Pool is excluded from points in this category) See page 60 for the form.

NEW KNOWLEDGE, INNOVATIONS, & IMPROVEMENTS CATEGORY

Evidence Based Practice (EBP)

EBP is the basis of our professional practice as RNs and every nurse must be knowledgeable about it. Participating in journal clubs is a simple way to learn and practice the assessment of EBP and nursing research. Tier 1 points are awarded for completing full series EBP modules in OLN (5 modules) (not including the requirement in nursing annual curriculum). Tier 2 is awarded points for actively participating in journal club meetings and critiquing at least 2 articles during the 12 month application period. Providing the certificate of attendance AND the completed journal club critique in platform on each article is required. * If interested, or for more information on starting a journal club contact your campus educator. Tier 3 is awarded points for leading a journal club critique, must include roster/attendance. Tier 4 points are for conducting a literature review, reviewing at least 5 journal articles, synthesize the information and make a recommendation that leads to a revision of a current practice or identifies a new best practice related to safety, quality or cost reduction. Evidence includes the bibliography of the articles reviewed with a summary of the findings from each article and a recommendation of a best practice and validated/ approved by the person who oversees EBP at your facility. Tier 5a points are awarded for being an active member of the implementation team of an EBP project. This is where a group on your unit utilizes the literature review that was done as part of Tier 4 to put into practice the newly found EBP or best practice. The group will then need to measure an outcome to determine if the implementation has improved practice. Tier 5b points are awarded for leading the design and implementation of this EBP project. Tier 6 points (poster presentation) and 7 points (podium) are for disseminating the work that was done so that others can learn and perhaps implement the EBP as well. For opportunities at your campus, please contact Jessica Peterson at nursing.research@ochsner.org.

Nursing Research

Nursing Research is the next step when no evidence or best practices can be found for a topic or concern. Tier 1 is for taking the CITI Course entitled "Investigators and Clinical Research Coordinators" that teaches about human subject protection in research activities. This course is 15 modules.. This course is required for anyone participating in research at Ochsner. Please submit "Stage 1-Basic Course" or "Stage 2- Refresher Course" completion report, or completion certificate. Tier 2 - points are awarded for establishing a relationship with one of the nursing researchers

and shadowing a nurse engaged in research. Tier 3 Providing Nursing Research education to department in the form of a written or poster presentation based on your shadow experience. Tier 4 Oral presentation including a power point put together by you based on the shadow experience. Tier 5 Project implementation that evolves from education brought back from the shadow experience that shows improvement using pre and post data. Request Approval from the Center for EBP & Nursing Research (Jessica Peterson) Tier 6 - points must be pre-determined by the Center for Nursing Research based on the level of the participant's involvement in research-related activities. Participation is described as being a study coordinator, data collector, implementing nursing interventions, etc. Name is listed on the IRB application as being study staff. Points may also be awarded for a nurse-led inter-professional research protocol which is submitted and approved by the System Nursing Research Council (SNRC). Points are not awarded for gathering data for a medical and/or physician driven research project (see Other Activity/Event, page 18). Tier 7- points must be pre-determined by the Center for Nursing Research based on the complexity of the protocol. Points are awarded for being the principal or sub-investigator of a nursing or inter-professional research protocol. Tiers 8 and 9 - points are awarded for dissemination of the research that was done.

Innovation

Magnet's definition of innovation is a novel set of behaviors, routines, and ways of working that are directed at improving health outcomes, administrative efficiency, cost effectiveness, or users' experience and that are implemented by planned and coordinated actions. Think about the issues or concerns in your department and ways that they could be solved or improved. Tier 1 points are for having an innovative idea and bringing it to your manager. Describe the idea and how it's innovative according to the definition and show proof of how you presented it to your manager (email, meeting minutes, etc.). Tier 2 is taking the idea to the next level and assisting with the implementation of your idea. Tier 3 points are awarded if the implementation of your idea resulted in an improvement that can be measured (such as an improved outcome – nursing sensitive indicator, or RN satisfaction, administrative efficiency – lower LOS or hours per patient day, cost effectiveness – decreased supply cost or waste out effort, or users' experience – increased meaningful use with EPIC or increased pt satisfaction).

Technology Improvement/Change for Patient Experience

OHS utilizes a large amount of technology to care for our patients. Tier 1 points are awarded for completing a gap analysis on existing technology that we use on our patients and thinking of a way to use/ adjust/ find alternatives for what we have to improve the patient's experience. Proof of communication should be provided to Man/Dir. Example: You notice there are issues with CVP monitoring in your unit. You attended a conference and observed presentation regarding non-invasive CVP monitoring. You bring this idea to your unit leader to implement on your unit. Tier 2 points are awarded for being a part of a design/ implementation team for a new technology that enhances the patient experience. Share your action plan, and describe the activities that you completed. Example: you are a part of the team that implemented bar coding on your unit. Tier 3 points are awarded for changes in technology that shows an improvement in patient satisfaction. Example: In the example in tier 1, the new non-invasive product implementation demonstrates a decrease in the number of CLABSI and decrease length of stay in the following quarter.

Technology Improvement/Change for Nursing Practice

Same gap analysis of technology as stated above with the purpose of affecting nursing practice (rather than the patient experience). Tier 1 points are awarded for completing a gap analysis on existing technology that we use on our patients and thinking of a way to use/ adjust/ find alternatives for what we have to improve nursing practice. Example: You notice that the telemetry units on your unit are missing parts and stashed in a drawer. You organize them into a color-coded system to make it easier to initiate telemetry on new patients. Tier 2 points are awarded for being a part of a design/ implementation team for a new technology that enhances the nursing practice. Share your action plan, and describe the activities that you completed. Example: you are a part of the team that implemented end tidal CO2 monitoring on your unit to meet the latest sedation standards of care. Tier 3 points are awarded for changes in technology that shows an improvement in nursing practice. Example: The change to end tidal CO2 monitoring done in Tier 2 resulted in a decrease in sedation adverse events from 1.1% in the first quarter to 0.5% in the second, third and fourth quarter.

Work Flow/Process Improvements

Work flow is defined as the progression of steps (tasks, events, interactions) that compose a work process, involve two or more people, and create or add value to the organization's activities. In a sequential work flow, each step is dependent on occurrence of the previous step; in a parallel work flow, two or more steps can occur concurrently.

Examples of work flows are the admit process, administering a medication, performing a nursing assessment, starting an IV, etc. Lean Workouts are one of the many mechanisms to bring about improvements in work flows and processes. Tier 1 points are awarded for submitting idea to Manager/ Director to make a small to moderate changes in an existing work flow that enhances nursing practice. Example: You suggest an idea to assist with making a minor change to the intake process in the clinic or the admit process in the hospital that eases the workload of the nurse (less steps or redundancy in the process). Tier 2 points are awarded for being a part of a team that is changing or creating a work flow or process that affects the work of nursing. Example: You are a part of a Lean Workout that is changing the way multidisciplinary rounds are being done in the hospital. Tier 3 points are awarded for changes to work flows that show improvement in data related to nursing practice. Example: The Lean Workout that you are a part of succeeds in decreasing the length of stay or improves pressure ulcer prevention as seen in decreased rates on a monthly or quarterly basis during the year.

Space Planning

As we become more limited in the space that we have and create ways to expand, it is vital for nursing input into the set up, configuration, and organization of patient rooms, nursing stations, conference room space, clean and dirty utility rooms, etc. Space planning encompasses planning for new spaces as well as re-organizing current space to create more efficiency. Tier 1 points are awarded for submitting idea to Manager/ Director to work on minor to moderate change to the current space. Example: Re-organize your area in the clinic to eliminate duplicate supplies to be more efficient in moving patients through the visit, or reorganizing/ standardizing bedside supply carts unit wide. Tier 2 points are awarded for working in a team to design or implement new space changes. Example: Being a part of the team that is planning the opening of additional rooms or moving a unit or clinic to a new space (eg. Stand-up COVID unit or infusion space, creating patient space during or after disaster event) Tier 3 points are awarded for space planning changes that show improvements in data such as increased RN Satisfaction or Employee Engagement, decreased patient falls, or improved patient satisfaction.

Other Activity/Event/ Project – Tier 1: Point(s) may be awarded for some other activity/event/project/ audit deemed as appropriate by the manager that is not covered by any other category based on the time spent on the project. One (1) point can be awarded for 1 - 8 hours spent on the event/project, two (2) points for >8 hours spent on the event/project, three (3) points >16 hours spent on event/project, and above to a max of 5 points. (Examples: Special unit project for manager related to nursing, creating a bulletin board or unit newsletter, disaster recovery efforts, etc.). Tier 2: Participation in a physician-driven project or research protocol that is outside of your normal job or care of the patient.

Publications

Tier 1: Completed review of recognized nursing journal article as member of peer panel. Requested **peer review** of recognized nursing journal and or nursing textbooks. Tier 2: Points for **authoring** non-peer reviewed external publications such as magazine articles and Tier 3 for authoring book chapters related to nursing (journals such as Nursing Spectrum, RN, Nursing 2017, etc).

Project/Initiative/ Task Force- A task force is a time-limited group established to work on a single defined activity/project that results in change or improvement; and is dissolved upon completion of the project. The work of a task force is separate from committee work. Task forces do not duplicate committee work.

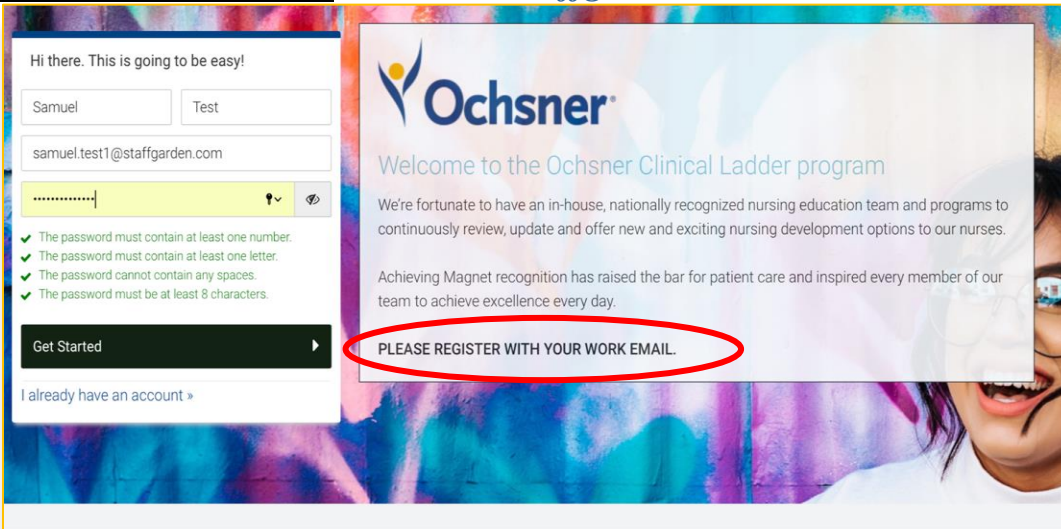
***NOTE: Points cannot be obtained for the same thing in two different categories or activities unless specifically stated above; All information submitted MUST be within 12 months application period.**

ONLY MOST CURRENT YEAR GUIDELINES WILL BE ACCEPTED.
Updates occur annually.

Any clinical ladder portfolio that fails to demonstrate Ochsner's Core Values or meet the criteria of established clinical ladder guidelines, may be referred to senior management for further review at the discretion of the campus PDC.

HOW TO SUBMIT YOUR PORTFOLIO

1. Registration Page URL ohsladder.staffgarden.com



Hi there. This is going to be easy!

Samuel Test

samuel.test1@staffgarden.com

.....

- ✓ The password must contain at least one number.
- ✓ The password must contain at least one letter.
- ✓ The password cannot contain any spaces.
- ✓ The password must be at least 8 characters.

Get Started

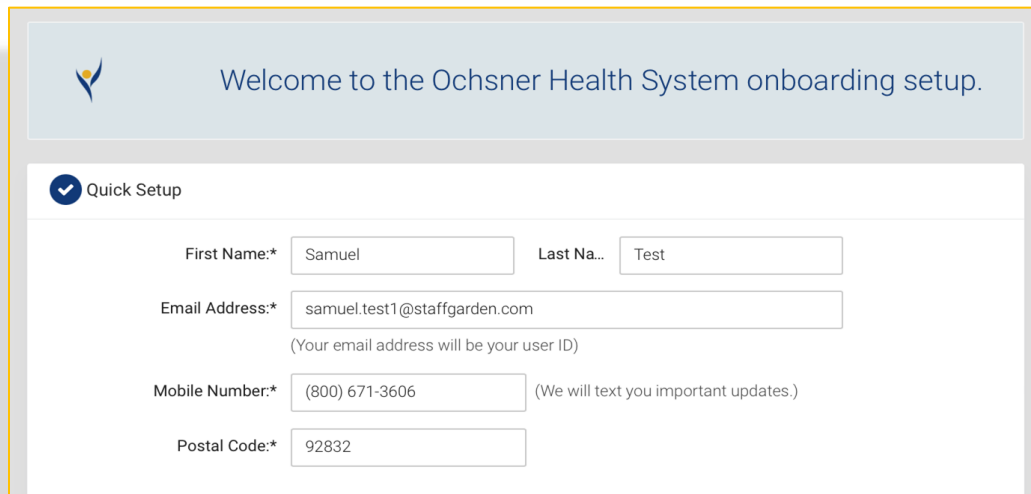
I already have an account »

Welcome to the Ochsner Clinical Ladder program

We're fortunate to have an in-house, nationally recognized nursing education team and programs to continuously review, update and offer new and exciting nursing development options to our nurses.

Achieving Magnet recognition has raised the bar for patient care and inspired every member of our team to achieve excellence every day.

PLEASE REGISTER WITH YOUR WORK EMAIL.



Welcome to the Ochsner Health System onboarding setup.

✓ Quick Setup

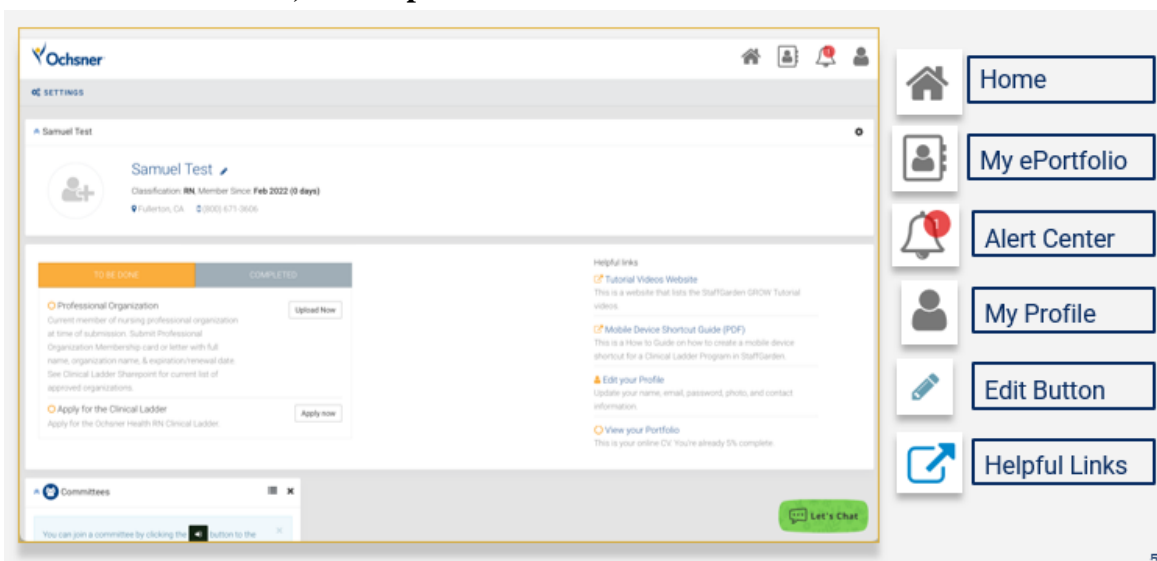
First Name:* Samuel Last Name: Test

Email Address:* samuel.test1@staffgarden.com
(Your email address will be your user ID)

Mobile Number:* (800) 671-3606 (We will text you important updates.)

Postal Code:* 92832

HOME PAGE, with important icons identified



Ochsner

SETTINGS

Samuel Test

Samuel Test

Classification: RN Member Since Feb 2022 (0 days)

Fultonton, CA (800) 671-3606

TO DO

- Professional Organization
- Apply for the Clinical Ladder

COMPLETED

Updated Now

Apply now

Helpful links

- Tutorial Videos Website
- Mobile Device Shortcut Guide (PDF)
- Edit your Profile
- View your Portfolio

Home

My ePortfolio

Alert Center

My Profile

Edit Button

Helpful Links

Let's Chat

**** Helpful Links:** Get acquainted with StaffGarden's GROW platform and the valuable resources provided by Ochsner's team. There are a series of **video tutorials** on the features and functions of GROW.

2. After Registration and entering information, select APPLY NOW.

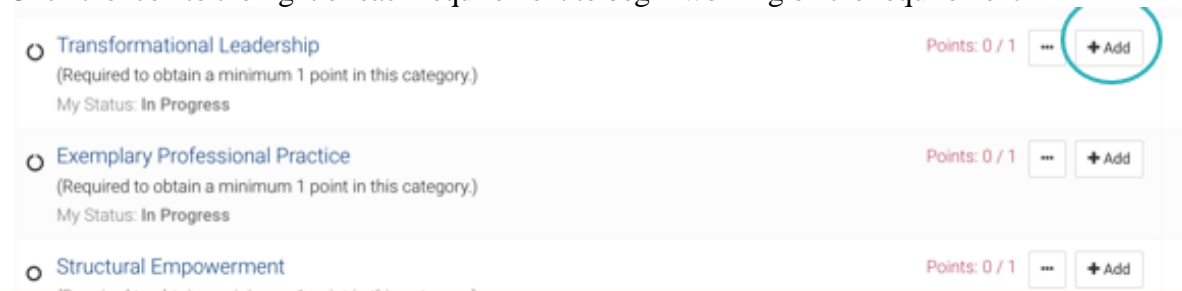


○ Apply for the Clinical Ladder
Apply for the Ochsner Health RN Clinical Ladder.

Apply now

3. Ensure you are selecting the correct program (quarter for submission). You should ensure that you currently meet the level requirements *before* selecting your level for your application.

4. Click the icon to the right of each requirement to begin working on the requirement



○ Transformational Leadership
(Required to obtain a minimum 1 point in this category.)
My Status: In Progress
Points: 0 / 1 ... + Add

○ Exemplary Professional Practice
(Required to obtain a minimum 1 point in this category.)
My Status: In Progress
Points: 0 / 1 ... + Add

○ Structural Empowerment
Points: 0 / 1 ... + Add

5. Points are required in all categories to submit portfolio.

- Only enter **ONE** activity in the first four categories
- **All remaining activities** should be listed in the “**Points in Any Category.**”

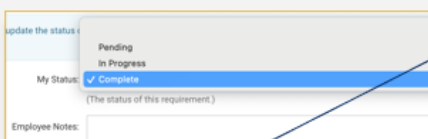
Why is this important? It is because of the way the platform is designed. It will only allow the application to advance if the minimum points are met in **EACH** category.

**Please note that points in one category DO NOT transfer to any other category. You must meet the minimum point in each requirement.*

6. Activity Status: Updating your Activity status to ‘Complete’ will increase your application percentage.
Do not complete until all requirements are met.

Choosing a Requirement Status

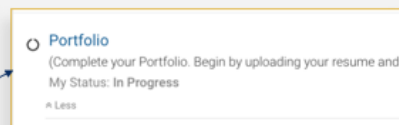
Click on the requirement’s name to edit the status.
Select from the My Status field and click save.



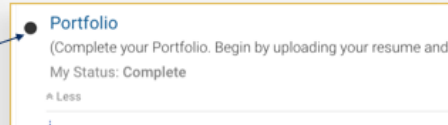
update the status
Pending
In Progress
My Status: **Complete**
(The status of this requirement.)
Employee Notes:

Pending or In Progress - you have not completed this requirement yet

Complete - you have finished this requirement



○ Portfolio
(Complete your Portfolio. Begin by uploading your resume and
My Status: In Progress
▲ Less

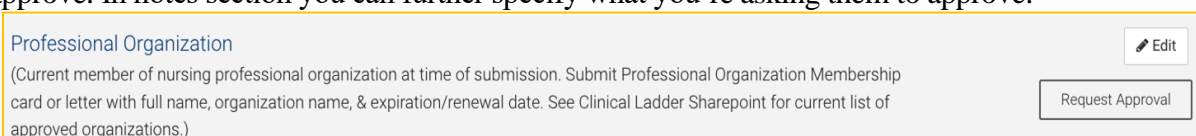


● Portfolio
(Complete your Portfolio. Begin by uploading your resume and
My Status: Complete
▲ Less

7. **Request Approval:** Some activities may ask for Request Approval.

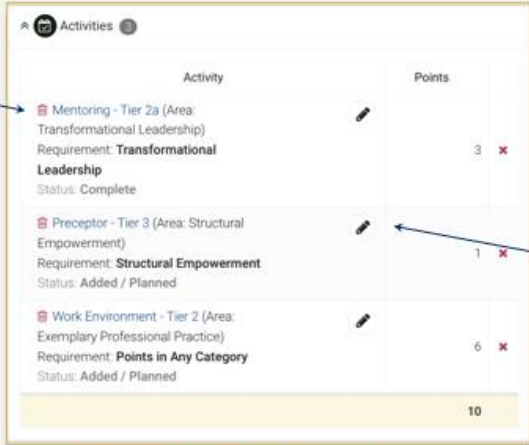
To request approval click on the Request Approval button and select the appropriate approver.

When requesting approval, the information you provide will be sent to the approver for them to review and approve. In notes section you can further specify what you’re asking them to approve.



Professional Organization
(Current member of nursing professional organization at time of submission. Submit Professional Organization Membership card or letter with full name, organization name, & expiration/renewal date. See Clinical Ladder Sharepoint for current list of approved organizations.)
Edit
Request Approval

8. Activities Edit Section



Delete →

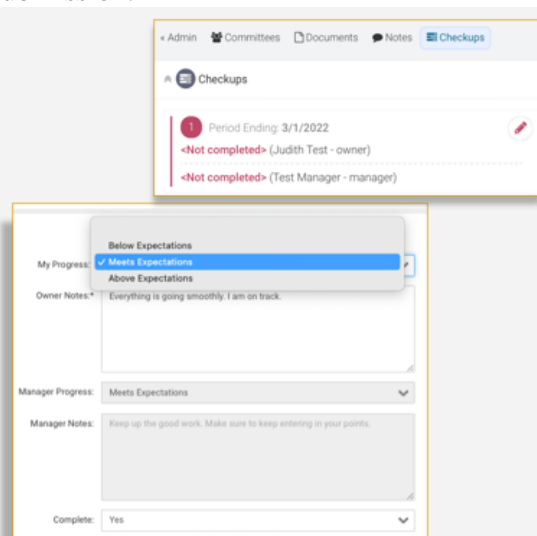
Edit →

To edit or delete selections, scroll down to the Activities section on the Application page.

- 9. Check ups:** 2 check ups required for each application period (1st for 1st 6 months, and 2nd for latter 6 months) Email will be sent to applicant and manager to complete check ups. This will drive your percent completion. Must be completed prior to final submission.

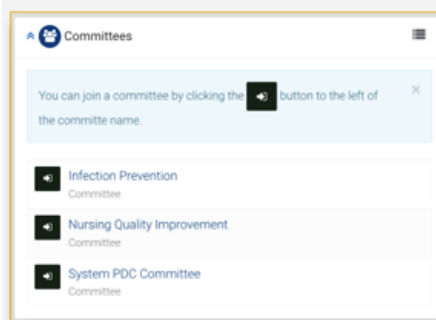
Checkups

1. From your ladder application page, click on 'Checkups,' on the upper right hand side pane.
2. Begin by clicking on the pencil icon.
3. Select from the 'My Progress' dropdown list.
4. Enter in your comments regarding the progress of your ladder application.
5. Press 'Save.'

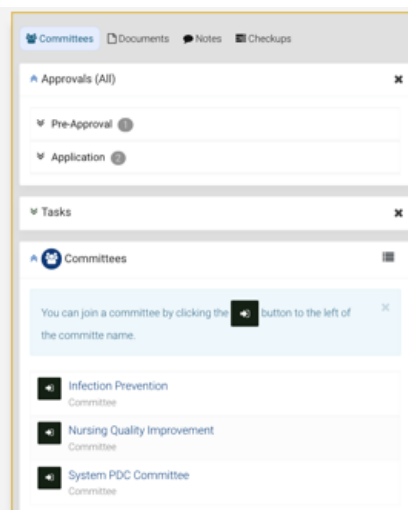


10. Committees

Committees



Find the committees section on the bottom of the home page (left) or on the right hand-side of the Application page (right).



Click on the button to the left of the committee name to join that committee.

11.

Submit for Approval

The screenshot shows the Ochsner application portal. At the top, there's a navigation bar with 'Ochsner' logo and user icons. Below it, a breadcrumb trail reads 'Select Activity / Activity / Application'. A secondary navigation bar contains 'REFRESH', 'PRINT', 'SUBMIT FOR APPROVAL' (highlighted with a red circle), 'HELP', and 'SETTINGS'. The main content area is titled 'Samuel Test - (95 % Complete) - Click to view Samuel's ePortfolio'. It displays program details for 'Ochsner Health RN Clinical Ladder 2023 Q1', user information, and a progress indicator showing '95 % Complete'. A 'Requirements' section lists 'Clinical Ladder Education Session' with a status of 'Complete'. On the right, a sidebar titled 'Approvals (All)' shows a list of approvals, including 'Pre-Approval' and 'Application' stages, with their respective statuses and approvers.

Submit for Approval indicates **ALL** of your program requirements have been fulfilled and ready to be reviewed by your organization.

28

As a reference, pages 23 through 28 outline the activities available for points. The “**grid**” of activities are categorized by the four pillars of magnetism. These pillars are:

- Transformational Leadership
- Structural Empowerment
- Exemplary Professional Practice
- New Knowledge, Innovation, and Improvements

Pages 29-40, provide details of each activity/ tier and the required information that the applicant must provide as evidence of the activity.

CRITERIA FOR ADVANCEMENT GRID

Circle points where applicable. Do not manipulate pre-printed numbers on grid designated for each item.

TRANSFORMATIONAL LEADERSHIP		Name _____
<p style="text-align: center;">ADVOCACY and INFLUENCE</p> <p><u>Tier 1:</u> Advocate for needed resources that is tied to unit/dept. or organizational goals. 1 Point per event – MAX=4</p> <p><u>Tier 2:</u> Advocate for resources that is tied to unit/dept. or organizational goals that was acted upon. (See page 10 for more details)</p>	<div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div> <p>3</p>	<p style="text-align: center;">PERFECT ATTENDANCE</p> <p>Being on time, every time shows respect for our patients, visitors and our co-workers and is sign of leadership. Points are awarded for perfect attendance during any of the 4 rolling quarters during your application period. 1 Pt for each quarter up to 4 pts. *Must request approval from you Unit Manager (See page 11 for more details)</p>
<p style="text-align: center;">MENTORING OF OTHER EMPLOYEES</p> <p><u>Tier 1:</u> Mentor must document a meeting every 4 weeks, 1 point per mtg / max 6 pts/ yr per mentee, max 2 mentees (max 12) <i>(*No points will be issued if applicant has not attended The Mentor Academy and documented a min of 6 interactions)</i></p> <p><u>Tier 2a:</u> Attendance of Mentor Academy</p> <p><u>Tier 2b:</u> Attendance of annual update mentor classes, or other similar mentor classes as approved by Nursing Professional Development personnel. (See page 10 for more details)</p>	<div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div> <p>3</p> <div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div> <p>2</p>	<p style="text-align: center;">PEER REVIEW</p> <p>Serves as a member of a formalized team or group of employees in the department with expected responsibilities to formally interview potential new hires and/ or provide feedback for employee's performance evaluations. (See page 11 for more details)</p>
<p style="text-align: center;">COMMUNICATION WITH LEADERSHIP</p> <p><u>Tier 1:</u> Communication with a unit nursing leader that led to change in your unit practice or in a patient's experience.</p> <p><u>Tier 2:</u> Communication with the CNO or other nursing leader that led to change in your practice or your environment.</p> <p><u>Tier 3:</u> Communication with the CNO or other nursing leader that led to change in your unit/ dept.'s practice through a nursing sensitive indicator, affected your pt satisfaction scores or improved your unit/dept.'s environment (RN Satisfaction or Employee Engagement score). Data required. (See page 10 for more details)</p>	<div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div> <p>2</p> <div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div> <p>6</p> <div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div> <p>12</p>	<p style="text-align: center;">SUPERUSERS and LINE INSERTION TEAM</p> <p><i>*Must not be a part of job description</i></p> <p>RNs who are EPIC or other computer or equipment superusers for the unit/department may apply for these points. Must be able to show continued service as a superuser. 4 Pts for each super user, MAX of 8 Pts. (See page 11 for more details)</p>
<p style="text-align: center;">EVERY NURSE A LEADER</p> <p>As part of OMC's nursing philosophy, every nurse is a leader and leaders are engaged in the welfare of the organization: Points for completing hospital-wide surveys. 1 point for each completed survey, MAX – 4 Pts. (See page 11 for more details)</p>	<div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div>	<p style="text-align: center;">RELIEF/PERMANENT CHARGE or LEAD NURSE</p> <p><i>(Tier 1 and 2: not applicable to OC/CC)</i></p> <p><u>Tier 1:</u> If designated as a relief or permanent charge nurse/ lead nurse in the clinic.</p> <p><u>Tier 2:</u> Attendance at the Charge Nurse Academy</p> <p><u>Tier 3:</u> Attendance at Leadership Café Sessions; 1 pt per session, MAX of 6 (See page 11 for more details)</p>
<p style="text-align: center;">YEARS OF SERVICE</p> <p>as RN at OH</p> <p>2-5 years of service</p> <p>>5 years of service</p> <p>>10 years of service</p> <p>>15 years of service</p> <p>>20 years of service</p> <p>>25 years of service</p> <p>>30 years of service</p>	<div style="border-top: 1px solid black; width: 50px; margin: 0 auto;"></div> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p>	
Total TL Points		

MUST HAVE POINTS IN ALL 4 CATEGORIES: Level I: at least 30 pts Level II: at least 45 pts Level III: at least 65 pts

STRUCTURAL EMPOWERMENT		Name _____
<p>COMMITTEE/ COUNCIL INVOLVEMENT</p> <p><u>Tier 1:</u> Committee involvement at the unit/ clinic based. level (such as UPC, CUSP, unit Champion Roles) 3 pts ea</p> <p><u>Tier 2:</u> Chair of a unit/ clinic based. committee 4pts ea</p> <p><u>Tier 3:</u> Committee/ sub-committee involvement at the facility level (such as PDC, IPC, Ignite, Daisy) 5 Pts each</p> <p><u>Tier 4:</u> Chair of a facility level committee 6pts ea</p> <p><u>Tier 5:</u> Involvement an org/ region/ system committees (such as Infection Control, Integration Councils) 6 Pts</p> <p><u>Tier 6:</u> Chair of an org/ region/ system committee 7 Pts</p> <p><u>Tier 7:</u> Contribution from being on the committee led to an improvement – need data to show the improvement (examples, pt education, nursing sensitive indicators, core measures, NICHE, Vermont Oxford data, etc) 6 Pts each</p> <p><i>*Member (Tier 1, 3, 5)- Must request approval from committee chair</i> <i>*Chair (tier 2, 4, 6)- Must must request approval from co-chair, or manager if no co-chair.</i> (See page 12 for more details)</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>PRECEPTOR</p> <p><u>Tier 1a:</u> Relief preceptor. 2</p> <p><u>Tier 1b:</u> Permanent preceptor of at least one person in 12 months 3</p> <p><u>Tier 1c:</u> Permanent preceptor of at least three people in 12 months 6</p> <p><i>*Must provide initial Preceptor Academy proof with each application year</i></p> <p><u>Tier 2:</u> Attendance at Preceptor Academy within application year. 3</p> <p><u>Tier 3:</u> Attendance at annual update preceptor classes/ forum. 1 pt per class/forum, max 4 pts.</p> <p><u>Tier 4:</u> Professional development classes pertinent to precepting There are in class offerings for 3-4 Hours, and 30min-1 hr for online/ podcast offerings. 1 Pt for every 4 hours of classes to MAX of 2 Pts. (See page 12 for list and more details.)</p>
<p>NURSING PROFESSIONAL ORGANIZATION PARTICIPATION</p> <p><u>Tier 1:</u> Attendance at Prof Org meetings (at least two per year). 2</p> <p><u>Tier 2:</u> Board or committee member of a local Prof org. 4</p> <p><u>Tier 3:</u> Board or committee member of a state Prof org. 6</p> <p><u>Tier 4:</u> Board or committee member of a national Prof org. 8</p> <p>(See page 12 for more details)</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>COMMUNITY INVOLVEMENT/ HUMANITARIAN ACTS</p> <p><u>Tier 1:</u> Donations (Blood, Hair, tiered GPT, Employee Giving, Holiday Hope) – 1 pt, MAX 4</p> <p><u>Tier 2:</u> Volunteering for community event OR hospital sponsored activity, (ie. Univ of Queensland Mock Patient, King Cake Festival, Pediatric Fall Parade, Ochsner Run, Second Harvest Food Bank). 1 point for every 1-8 hours per date – MAX 5</p> <p><u>Tier 3:</u> Donations to non-profit charitable organizations. 2</p> <p><u>Tier 4:</u> Points for on-going community involvement work. 1 point for every 8 hours – MAX 12</p> <p><u>Tier 5:</u> Military service – 2 Pts (See page 12 for more details)</p>
<p>PROFESSIONAL ORGANIZATION CONFERENCE ATTENDANCE</p> <p><u>Tier 1:</u> Attendance at a local /state/ regional/ national professional organization conference (in-person/ virtual). 1 pt per conference date (min 4 hrs/day), MAX 4 pts</p> <p><u>Tier 2a:</u> Points for bringing back education to department in the form of a written or poster presentation. 3</p> <p><u>Tier 2b:</u> Oral presentation including a power point put together by you from the conference. 4</p> <p><u>Tier 3:</u> Project that evolves from education brought back from a conference that shows improvement with data showing the before and after data. 6</p> <p>(See page 12 for more details)</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>NURSING RECOGNITION</p> <p><u>Tier 1:</u> Recipient of Written praise, nomination or acknowledgement from pt/family or colleague, 1 Pt each, max 4 (Colleague to RN recognition of any form, max 2 of 4 total)</p> <p><u>Tier 2:</u> Recipient of Written nomination from colleague for Good Catch 1 Pt each, MAX 4</p> <p><u>Tier3:</u> Recipient of written nomination for DAISY, 1 pt for, max of 4.</p> <p><u>Tier 4:</u> Recipient of written nomination for an external award Great 100 or Nightingale 2</p> <p><u>Tier 5:</u> Recipient of Internal Awards: Daisy, Spirit of Caring, Mentor award, The Power of One Employee of the Month, Patient Safety Champion of the Month Award. 3Pts</p> <p><u>Tier 6:</u> Recipient of External Awards such as Great 100, Nightingale. 5 Pts</p> <p><u>Tier 7:</u> Writing a nomination for an internal award. 2 Pts each MAX 4</p> <p><u>Tier 8:</u> Writing a nomination for external award. 3 Pts MAX 6 (See page 13 for more details)</p>

MUST HAVE POINTS IN ALL 4 CATEGORIES: Level I: at least 30 pts Level II: at least 45 pts Level III: at least 65 pts

EXEMPLARY PROFESSIONAL PRACTICE		Name _____	
<p>RELATIONSHIP BASED CARE PROFESIONAL PRACTICE MODEL</p> <p><u>Tier 1:</u> Care of the Team: Points for team building activities (such as planning social outings, coordinating group team building exercises, coordinating Holiday Hope, etc). 2 Pts each, MAX=4</p> <p><u>Tier 2:</u> Care of Self: Points for promoting self-care (setting up serenity room, developing system for taking lunch breaks, etc.) or attending Schwartz Rounds or Nurse Cafe. 2 Pts each, MAX=6</p> <p><u>Tier 3:</u> Care of the Patient: Team member of project related to consistent use of ICCARE or other patient centered activities including providing for the unique needs of a patient (weddings, visiting patients after hours, etc.) 2 Pts each, MAX=6</p> <p>(See page 14 for more details; also see pages 5-6)</p>	<p>_____</p> <p>_____</p> <p>_____</p>	<p>WORK ENVIRONMENT</p> <p><u>Tier 1:</u> Points related to improving the work environment, such as hospital sponsored Spring Cleaning, cleaning refrigerator on unit (at least 2x/yr), 5S, morale boosting. 1 Pt, MAX=4</p> <p><u>Tier 2:</u> An improvement in rates is noted from the activity (show data). 6 Pts, MAX=12</p> <p>(See page 15 for more details)</p>	<p>_____</p> <p>_____</p> <p>_____</p>
<p>ACCOUNTABILITY and AUTONOMY: REVIEW OF STANDARDS OF CARE</p> <p><u>Tier 1:</u> Reviewing the nursing specialty organizational standards of practice. 2 Pts, MAX=4</p> <p><u>Tier 2:</u> Points for incorporating changes to the standards into the unit/dept.'s practice. 4 Pts, MAX=8</p> <p>(See page 14 for more details)</p>	<p>_____</p> <p>_____</p>	<p>PATIENT SAFETY</p> <p><u>Tier 1:</u> Champion Role, 3 Pts per role</p> <p><u>Tier 2:</u> Projects that improve pt safety (must show data).</p> <p><u>Tier 3:</u> Hand Hygiene Secret Shopper 1 Pt for every 2 months with minimum data collection, MAX of 6 Pts. *Request Approval from your Campus Infection Preventionist.</p> <p>(See page 16 for more details)</p>	<p>_____</p> <p>6</p> <p>_____</p>
<p>ACCOUNTABILITY and AUTONOMY: POLICY AND/OR PROCEDURE REVIEW</p> <p><u>Tier 1:</u> Volunteer for and complete a review of an operational policy or procedure. 1 Pt, MAX=4</p> <p><u>Tier 2:</u> Develop/create an operational policy or clinical intervention guideline. 6 Pts, MAX=12 *Request approval from Unit Manager</p> <p>(See page 15 for more details)</p>	<p>_____</p> <p>_____</p>	<p>FLEXIBILITY</p> <p><u>Tier 1:</u> Flexible in staffing/scheduling to meet department needs, including voluntary on-call.</p> <p><u>Tier 2:</u> Willing to change assignment in the middle of day without complaint to meet the needs of the department.</p> <p><u>Tier 3:</u> Works on a sister unit without complaint.</p> <p>(See page 16 for more details)</p>	<p>_____</p> <p>2</p> <p>_____</p> <p>3</p> <p>_____</p> <p>3</p>
<p>RECRUITMENT AND RETENTION</p> <p><u>Tier 1:</u> Participating in recruitment activities. 1 Pt, MAX=4</p> <p><u>Tier 2:</u> Participating in retention activities. 1 Pt, MAX=4</p> <p><u>Tier 3:</u> Coordinating retention activities. 2 Pts, MAX = 8</p> <p><u>Tier 4:</u> Recruitment or retention activities that result in an improvement in vacancy or turnover rates (must show data).</p> <p><u>Tier 5:</u> Brand ambassador * Provide OLN certificate to validate participation in program</p> <p>(See page 15 for more details)</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>6</p> <p>2</p>	<p>CROSS TRAINING</p> <p>Cross Training to occasionally work in a totally different environment, such as peds to adult, M/S to CC, ambulatory to hospital. 2 Pts per unit, MAX=4 * Request approval from Alternate Unit Leader</p> <p>(See page 16 for more details)</p>	<p>_____</p> <p>_____</p>
<p>INTERNAL EXPERT/CONSULTANT</p> <p>Work done on the unit or at the facility as a consultant for other staff members outside of the committee work 4 Pts for each skill set, MAX of 8 Pts.</p> <p>(See page 15 for more details)</p>	<p>_____</p>		
Total EP Points			

MUST HAVE POINTS IN ALL 4 CATEGORIES: Level I: at least 30 pts Level II: at least 45 pts Level III: at least 65 pts

Circle points where applicable. Do not manipulate pre-printed numbers on grid designated for each item.

NEW KNOWLEDGE, INNOVATIONS, AND IMPROVEMENTS		Name _____
<p>EVIDENCE BASED PRACTICE</p> <p><u>Tier 1:</u> Complete the full series of 5 EBP modules in OLN (*Can only be done once). * Points can only be awarded if modules complete before 10.31.22</p> <p><u>Tier 2:</u> Actively participate in at least the critique of two Journal Club articles per year.</p> <p><u>Tier 3:</u> Leading Journal Club critique. 2 pts ea MAX 4</p> <p><u>Tier 4:</u> Conduct a review of the literature (at least 5 articles) for your department's EBP project, synthesize the information, and write a summary with recommendations to revise a current practice or show the identification of a new best practice related to safety, quality, and/or cost reduction.</p> <p><u>Tier 5a:</u> Active member of the implementation team of the EBP project.</p> <p><u>Tier 5b:</u> Lead the design and implement an EBP project that includes outcome measures after completion of literature review.</p> <p><u>Tier 6:</u> Scholarly presentation of the EBP project – Internal or External at EBP poster presentation 4 pts ea, MAX 8</p> <p><u>Tier 7:</u> Scholarly podium presentation of the EBP project – Internal or External at a local, regional, state or national conference. (ie. Annual Research Day) 6 pts ea, MAX 18</p> <p>(See page 16 for more details)</p>	<p>2</p> <p>2</p> <hr/> <p>5</p> <p>2</p> <p>5</p> <hr/> <hr/>	<p>INNOVATION</p> <p><u>Tier 1:</u> Present an innovative idea to your UD/manager. Describe the idea and how its innovative according to the definition and show proof of how your presented it to your manager (email, meeting minutes) 1 Pt, MAX=4</p> <p><u>Tier 2:</u> Assist with the implement of your innovative idea in your department. 2 Pts, MAX=8</p> <p><u>Tier 3:</u> Show an Improvement resulting from your Innovative idea- Must show data. 6 Pts, MAX=12</p> <p>(See page 17 for more details)</p> <p>Definition: Innovation in service delivery and organization is a novel set of behaviors, routines, and ways of working that are directed at improving health outcomes, administrative efficiency, cost effectiveness, or users' experience and that are implemented by planned and coordinated actions.</p>
<p>NURSING RESEARCH*</p> <p><u>Tier 1a:</u> Successfully pass the Basic CITI Course (15 modules).</p> <p><u>Tier 1b:</u> Successfully pass the Refresher CITI Course (10 modules).</p> <p><u>Tier 2:</u> Shadow a nurse engaged in research. 1 pt for up to 8 hours , MAX 2 pts</p> <p><u>Tier 3:</u> Points for bringing back education to department in the form of a written or poster presentation.</p> <p><u>Tier 4:</u> Oral presentation including a power point put together by you based on the shadow experience.</p> <p><u>Tier 5:</u> Project that evolves from education brought back from the shadow experience that shows improvement using pre and post data.</p> <p><u>Tier 6:</u> pts must be <u>pre-determined</u> by the SNRC based on the level of involvement in research-related activities (study coordinator, data collector, implementing nsg. interventions). Name listed on the IRB application as study staff. Points may also be awarded for a nurse-led inter-professional research protocol which is submitted/ approved by the SNRC. 2-8 Pts</p> <p><u>Tier 7:</u> Principle or sub-investigator of a Nursing Research project. Points to be pre-determined by System Nursing Research Center. 6-10 Pts</p> <p><u>Tier 8:</u> Presenting nursing research internally at Annual EBP/Nursing Research Conference or Research Day.</p> <p><u>Tier 9:</u> Presenting nursing research at a local, regional, state or national conference.</p> <p>(See page 16 for more details)</p>	<p>3</p> <p>2</p> <hr/> <p>3</p> <p>4</p> <p>6</p> <hr/> <p>4</p> <p>6</p>	<p>TECHNOLOGY IMPROVEMENT/ CHANGE FOR PATIENT EXPERIENCE</p> <p><u>Tier 1:</u> Make a change to existing technology to enhance the patient experience. 1 Pt, MAX=4</p> <p><u>Tier 2:</u> Be a part of the design/implementation team for a new technology to enhance patient experience. 2 Pts, MAX=8</p> <p><u>Tier 3:</u> The change in technology that is made to enhance patient experience shows improvement (such as better HCAHPS or Press Ganey Pt Satisfaction Scores). 6 Pts, MAX=12</p> <p>(See page 17 for more details)</p>

NEW KNOWLEDGE, INNOVATION, & IMPROVEMENTS continues on next page

NEW KNOWLEDGE, INNOVATIONS, AND IMPROVEMENTS			Name _____
TECHNOLOGY IMPROVEMENT/CHANGE FOR NURSING PRACTICE <u>Tier 1:</u> Make a change to existing technology to enhance nursing practice. 1 Pt, MAX=4 <u>Tier 2:</u> Be a part of the design/implementation team for a new technology to enhance nursing practice. 2 Pts, MAX=8 <u>Tier 3:</u> The change in technology that is made to enhance nursing practice shows improvement (data required). 6 Pts, MAX=12 (See page 17 for more details)	_____ _____ _____	OTHER ACTIVITY/ EVENT/ PROJECTS <u>Tier 1:</u> Other activity/ event/ project/ audit (such as bulletin boards, creating unit newsletters, unit based projects, chart audits, etc.) deemed appropriate by the manager that is not covered by any other category based on the time spent. 1 Pt for every 1-8 hours spent on the event/project, 2 pts for > 8 hours, 3 pts > 16 hrs spent, MAX=5 <u>Tier 2:</u> Participation in physician-driven project or research protocol that is outside of your normal job or care of the patient. 2pts, for MAX 4 (See page 18 for more details)	_____ _____
WORK FLOW/PROCESS IMPROVEMENTS <u>Tier 1:</u> Submit idea to Man/Dir to change an existing work flow to enhance nursing practice. 1 Pt, MAX=4 <u>Tier 2:</u> Be a part of the design/implementation team for a new or change to an existing work flow to enhance nursing practice. 2 Pts, MAX=8 <u>Tier 3:</u> The change in work flow that is made to enhance nursing practice shows improvement (data required) 6 Pts, MAX=12 (See page 17 for more details)	_____ _____ _____	PUBLICATIONS Tier 1: Requested Peer Review journal article Tier 2: Authoring External non-peer reviewed journal article Tier 3: Authoring Book Chapter related to Nursing (See page 18 for more details)	4 6 8
SPACE PLANNING <u>Tier 1:</u> Submit idea to Man/Dir to change an existing space to enhance nursing practice. 1 Pt, MAX=4 <u>Tier 2:</u> Be a part of the design/implementation team for a new space design to enhance nursing practice. 2 Pts, MAX=8 <u>Tier 3:</u> The change in space design that is made to enhance nursing practice shows improvement (show data). 6 Pts, MAX=12 (See page 18 for more details)	_____ _____ _____	PROJECT/ INITIATIVE/ TASK FORCE Contribution from being on a task force (separate from committee work) led to an change/ improvement. 3 Pts each Definition: A task force is a time-limited group established to work on a single defined activity/ project that results in change or improvement; and is dissolved upon completion of the project. (See page 18 for more details)	_____
Total NK Points			

MUST HAVE POINTS IN ALL 4 CATEGORIES: Level I: at least 30 pts Level II: at least 45 pts Level III: at least 65 pts

Total TL Points		Total SE Points		Total EP Points		Total NK Points	
TOTAL POINTS							

Below you will find details of each activity/ Tier and the required information to have available to submit on the platform

TL: ADVOCACY AND INFLUENCE

Name of Resource being advocated for: _____

✓ Type of Advocacy: ☐ Unit/Department ☐ Organization

Unit/Department/Organization Goal that resource is tied to: _____

Tier 1: Label and attach proof of your advocacy for the resource (copy of email, dated letter, staff meeting minutes, etc.)

Tier 2: Label and attach additional proof that the resource was acquired (copy of email, dated letter, staff meeting minutes, paid invoice, etc.)

*If proof as requested is not available, points may possibly be given for a detailed explanation of your advocacy.

TL: MENTORING OF OTHER EMPLOYEES

*Proof of Mentor Academy attendance is required every year. This may either be the original certificate or OLN transcript showing completion. Points will not be awarded if verification of attendance is not submitted with portfolio.

Tier 1: Name of Mentee, Date of Meeting, Describe the MENTORING experience you were involved in with this person during the provided date, include summary of topics discussed and issues being worked on. (Mentor meetings should occur a minimum of every 4 weeks). ***Please include Mentoring agreement filed with OHS Mentor Coordinator.** Upload validation form/ signed monthly verifications by the mentee. [Request Approval from mentee's leader (Manager/ Director).]

Tier 2a: Upload proof of Mentor Academy attendance.

Tier 2b: List any classes/modules that you attended during the past 12 months. Also include your OLN transcript with the specific classes highlighted and/or other certificates to show proof of attendance. (*No points will be issued if applicant has not attended The Mentor Academy). Include Title of Program, Subject Matter, Dates attended, # of Contact Hours, and Upload Proof of attendance.

TL: COMMUNICATION WITH LEADERSHIP

Tier 1 or 2 or 3: Leader that you communicated with: _____

Level of outcome change: (Check) ☐ Individual ☐ Unit/Department

☐ Proof of communication attached (email, dated letter, staff meeting minutes, etc.)

Describe the change that occurred in your practice, your patient's experience, your unit's practice, and/or your unit's environment. Upload any additional supporting evidence, if any.

For Tier 3 only include nursing sensitive outcome data, RN Satisfaction or Employee Engagement scores, or patient satisfaction/HCAHPS scores that show improvement after the change was made (need before and after data at least three data points).

TL: EVERY NURSE A LEADER

List each hospital-wide survey completed, Date Taken/ Completed, and attach proof (copy of the "thank you" or "survey completed" page from the survey). Eligible surveys include but are not limited to: Employee Engagement, Culture of Safety, and NDNQI RN Satisfaction. Surveys for research studies are only included with prior approval and if not utilized in the Research category. Excludes unit-based surveys or course evaluations. Maximum allowed is 4. Include: Name of Survey, Date, Upload Proof.

TL: YEARS OF SERVICE

Years of Service as RN at OH (use the HR rules to determine - OHS.HR.603 – External Employment Mapping A Top Career In Healthcare [MATCH]; such as years as LPN are given ½ credit and years at Tenet have been grandfathered. Eligible employees of facilities which have been acquired, merged, or managed by OH AND had no break in service should calculate the Years of service based on their higher date with the original organization. Breakdown: ☐ 2-5 years of service, ☐ >5 years of service, ☐ >10 years of service, ☐ >15 years of service, ☐ >20 years of service, ☐ >25 years of service, ☐ >30 years of service.

TL: PERFECT ATTENDANCE

Being on time, every time shows respect for patients, visitors and co-workers. It is also a sign of leadership and accountability. Points are awarded for perfect attendance nominations in any of the 4 previous quarters prior to the application. *For Example if applying : Feb 1, 2022*

Quarter 1: Feb, March, April '21

Quarter 2: May, June, July '21

Quarter 3: Aug, Sept, Oct '21

Quarter 4: Nov '21, Dec '21, Jan '22

TL: PEER REVIEW

List with dates (during past 12 months):

Describe your overall PEER REVIEW experiences

TL: SUPERUSERS AND LINE INSERTION TEAM

Computer system or other unit equipment super-users are eligible for points. Line insertion team members are eligible only if certified and if not part of the primary job description.

Describe your overall SUPERUSER/LINE INSERTION experiences during the past 12 months

TL: RELIEF/PERMANENT CHARGE OR LEAD NURSE

OC/CC ARE EXCLUDED FROM Tier 1 and Tier 2 ONLY

Tier 1: List with dates (during past 12 months), **AND** Describe your overall RELIEF/PERMANENT CHARGE/LEAD NURSE experiences during the past 12 months:

Tier 2: Upload proof of Charge Nurse Academy attendance. (include Title of Program, date attended, and # Contact Hours).

Tier 3: List the Leadership Café Series you attended during the past 12 months. (include Title of Program, date attended, and # Contact Hours, upload proof of attendance)

SE: COMMITTEE/ COUNCIL INVOLVEMENT

Name of Committee: _____

- **Tier 1 (Member) & 2 (Chair)** Unit Based (OC/CC may not take credit for unit/dept based committees)
- **Tier 3 (Member) & 4 (Chair)** Facility Level
- **Tier 5 (Member) & 6 (Chair)** Organization / Regional/ System
- **Tier 7:** (1) Provide a summary of your participation. List your contributions, what you have learned, and what was the method used to disseminate information to staff. (2) Upload data that shows improvement from the actions taken by the committee. Show at least three data points including data before and after the action.

Tier 1, 3, 5: If member: (1) provide a summary of your participation as a member of committee, or unit champion role. (2) what you have learned as a member, (3) what was the method used to disseminate information to staff.

Tier 2, 4, 6: If Chairperson, (1) provide a summary of your accomplishments, (2) List outcomes, progress toward goals, etc.

Must have attended at least 75% of meetings and has been a member for a minimum of 3 months.

*New Committees must have been in existence for 3 months to claim points. If you do not see your committee, notify Stuart Redfearn.

SE: PROFESSIONAL ORGANIZATION INVOLVEMENT*

Tier 1: Attendance at Prof Org meetings (at least two per year): Event Title, Date, Location, # Of Hours, Upload proof. *i.e AACN Dinner meeting.*

Tier 2: Board or committee member of a local Prof org

Tier 3: Board or committee member of a state Prof org.

Tier 4: Board or committee member of a national/ international Prof org.

For Tiers 2, 3, 4: (1) I validate that I have been a board or task force member during sometime over the past 12 months with the following title: _____ (2) This work is at the following level (select one): Local State, National, International. (3) Upload a signature from Professional Org Representative (use validation form)

SE: PROFESSIONAL ORGANIZATION CONFERENCE ATTENDANCE

Tier 1 : Conference Name/ Date Attended/ Location. Attach proof of registration (via email or receipt).

Points may be awarded for attending a local/ state/ regional/ national healthcare conference in person or virtually.

Tier 2 a: Conference Name, date of conference, Upload proof of education in form of a written or poster presentation.

Tier 2 b: Conference Name, date of conference, Upload proof of oral presentation with power point by you from the conference.

Tier 3: Conference Name, (1) Describe the project that evolved from the conference that you attended including your involvement. (2) Show data that signifies an improvement for before and after the project.

SE: PRECEPTOR

*Proof of preceptor course attendance is required **every year**. This may either be the original certificate or OLN transcript showing completion. Points will not be awarded if verification of attendance is not submitted with portfolio.

Tier 1a: Relief Preceptor (1) List the name, (2) include dates, and (3) briefly describe the preceptor experiences you were involved in this past year. (4) Upload proof of initial course attendance:

Tier 1b: Permanent Preceptor (one individual)- (1) List the names, (2) include dates, and (3) briefly describe the preceptor experiences you were involved in this past year. (4) Upload proof of initial course attendance:

Tier 1c: Permanent Preceptor (3 or more individuals) (1) List the names, (2) include dates, and (3) briefly describe the preceptor experiences you were involved in this past year. (4) Upload proof of initial course attendance:

Tier 2: Attendance of Preceptor Academy within application year. (include Title of Program, date attended, and # Contact Hours, upload proof of attendance)

Tier 3: Attendance at annual update preceptor classes/ forum during the last 12 months. (include Subject matter/ Agenda, date attended, upload document)

Tier 4 : List the Professional Development classes pertinent to precepting that you attended during the past 12 months (title of program, dates attended, and # contact hours, upload proof of attendance/ completion).

SE: COMMUNITY INVOLVEMENT/ HUMANITARIAN ACT

MUST ALIGN WITH OCHSNER'S CORE VALUES

Tier 1: Donations- please attach copy of dated verification letter/ email by organization or representative validating your donation.

Tier 2: Volunteering for Community Event OR Hospital Sponsored Activity- requires signature/ validation from event coordinator with contact number; Title of event, program, other; Date; Location; and Number of Hours spent volunteering.

Tier 3: Donations to non-profit charitable organizations- Attach proof of donation with date of donation

Tier 4: On-going Community Work outside of your normal activity: Provide Name of organization or third party institution, service you provide, approximation of the number of service hours, name of community representative and contact number. Include copy of verification letter/ email provided by organization or representative.

Tier 5: Military Service (current active, reserve, or guard.) Briefly describe your on-going community work and/or Military Service. Provide approximation of the number of service hours. Include copy of verification letter/ email provided by organization or representative, or use validation form.

SE: NURSING RECOGNITION

**Ensure with all of the attachments that your name & date are clearly seen & that the award or nomination is within the application period.*

***Authoring a Value on the Spot is not eligible in any of these tiers*

RECIPIENT of Recognition:

Tier 1: Attach verification as recipient of each written praise, nominations, or acknowledgement from patient/family or colleague. *“Colleague to RN recognition of any form, max 2 of 4 total*

Tier 2: Attach verification as recipient of Good Catch (copy of the certificate or letter)

Tier 3: Attach verification as recipient of DAISY nomination (copy of the nomination or letter)

Tier 4: Recipient of written nomination for an external award, ie. Great 100 or Nightingale

Tier 5: Attach verification as recipient of Internal Award (copy of the certificate or letter)

*** Unit based Employee of Month recognition programs are not eligible for points.*

AUTHOR of Recognition:

Tier 6: Attach verification as recipient of External Award

Tier 7: Attach a copy of the internal nomination that was written by you along with proof that it was sent, such as copy of the email or response from the department that it was received.

Tier 8: Attach a copy of the external nomination that was written by you along with proof that it was sent, such as copy of the email or response from the entity that it was received.

*** For Tier 7&8- Points would only be granted if: A copy or "screen shot" of the nomination is included in the submission and proof it was submitted. The nomination must include an appropriate descriptive summary of the nomination (lack of sufficient “narrative” will not be accepted).*

SE: PATIENT EDUCATION

Tier 1: Patient Education/Health Literacy classes/modules that you attended during the past 12 months, provide Title of Program, Dates attended, # of Contact hours, and attach proof of attendance/ OLN certificate with the specific classes on HOW to provide Patient Education

Tier 2: I serve as a Qualified Bilingual Employees (QBE) and have attached the Ochsner attestation.

SE: CONTINUING EDUCATION

Continuing Education verification includes: Title of CE program, Date attended, and # of Contact Hours. Include copy of continuing education certificate. Transcript from professional organization may be accepted. Not all classes in OLN (Ochsner Learning Network) carry CE Credit. TIP: Submit CE Credit that you would submit for license renewal with the LA State Board of Nursing.

SE: TEACHING

Tier 1 or 3: Teaching- include Title of Event, program, or other, Date, Start and End Time, and Location.

*** Must provide a roster/ sign-in sheet containing each employees' signature AND summary of the program for staff meeting or other non-CNE presentations that you lead.

Tier 2: Initial instructor status for a particular discipline (ACLS, BLS, PALS, NRP, CPI, TNCC, ENPC). Provide name of certification, date of completion, instructor card/ certificate/ letter confirming instructor status for each discipline, provide signature validation.

Tier 4: List and describe your experiences during this past 12 months with the DEVELOPMENT OF CNE PRESENTATIONS. Also provide the approved evaluation form as proof of the completed development. (Please complete the Tier 1 form if you also presented the CNE that you developed).

SE: SPECIALTY CERTIFICATION

Please see the definition of specialty certification and additional details on page 13.

Tier 1: Attach copy of specialty certification card/dated letter/certificate with current expiration date for certification in your area of specialty.

Tier 2: Attach copy of specialty certification card/dated letter/certificate with current expiration date for certification in an area of specialty outside of the area that you currently work.

Tier 3a: Attach proof for attending a certification preparation course (course certificate).

Tier 3b: Show proof of study group or non-CNE classes and please use validation form on link in grid and upload completed form having the leader of the group affirm with signature.

SE: DEGREE ADVANCEMENT

- Select Employee Type ☐ Full Time or ☐ Part Time
- Check the degree that you are pursuing. ☐ BSN ☐ MSN/MN/NP/CNS ☐ DNP/DNS/PhD
- Provide Name of class, Date completed, and Credit hours.
- Upload your final grades for each semester.

EP: RELATIONSHIP BASED CARE PPM

(refer to page 14 for details and examples)

Tier 1 Care of Team

Tier 2 Care of Self

Tier 3 Care of the Patient

Tiers 1-3: Provide dates of your experiences, List and describe your experiences during this past 12 months related to NURSING'S RELATIONSHIP BASED CARE PROFESSIONAL PRACTICE MODEL.

Tier 4 Include / Upload data showing the improvement

EP: ACCOUNTABILITY AND AUTONOMY: REVIEW STANDARDS OF CARE

Tier 1: Describe your experiences during this past 12 months with REVIEW OF THE PROFESSIONAL STANDARDS OF CARE applicable to your specialty area. Include the dates of review, provide the summary of your findings, and attach proof that the review was shared with your manager/director (email of findings, letter, etc).

Tier 2: Describe your experiences during this past 12 months with the practices changes that were made on your unit/department from your REVIEW OF THE PROFESSIONAL STANDARDS OF CARE applicable to your specialty area. Include what was changed, when it was changed/ implemented and attach proof that the change was disseminated (staff meeting minutes, education flyers, chart audits, etc.).

EP: ACCOUNTABILITY AND AUTONOMY: POLICY AND/OR PROCEDURE REVIEW

Tier 1: Describe your experiences during this past 12 months with the REVIEW OF P&P related to the operations of your area (including reviewing skills/ procedures upon request). Include the names and dates of the review and attach proof that the review was completed (email to your manager of your findings and revisions, etc).

Tier 2: Describe your experiences during this past 12 months with the creation or development of a P&P and/or clinical intervention guideline. Provide copy of the policy or clinical intervention guideline. Will require "Request Approval" from your Unit Manager.

EP: RETENTION AND RECRUITMENT

Tier 1: Describe your experiences during this past 12 months with participation in RECRUITMENT ACTIVITIES, provide description and dates. Pictures are welcome.

Tier 2: Describe your experiences during this past 12 months with participation in RETENTION ACTIVITIES, provide description and dates. Pictures are welcome.

Tier 3: Describe your experiences during this past 12 months with coordinating a RETENTION ACTIVITIES, provide description and dates. Pictures are welcome.

Tier 4: Describe the decrease in turnover and/or vacancy rate related to the mentioned activities. Upload your data.

Tier 5: I serve as a Ochsner Brand Ambassador and have attached the Ochsner certificate AND samples of my posts/ activities on Social Media.

EP: INTERNAL EXPERT/CONSULTANT

Describe your experiences during this past 12 months as an INTERNAL EXPERT/ CONSULTANT. Name the internal/ expert role. Please elaborate/ describe how this impacted patient outcomes and/ or quality. / Share how this has affected team dynamics and/ or your professional development. Upload any evidence if applicable.

EP: WORK ENVIRONMENT

Tier 1: Describe your experiences during this past 12 months with WORK ENVIRONMENT ACTIVITIES. Upload supporting documentation, if any.

Tier 2: Describe the data that was used to measure the improvement including the dates of the measurement. Upload supporting documentation.

EP: PATIENT SAFETY

Tier 1: Name your champion role and list your responsibilities and/ or accomplishments in that role. Upload supporting documents, if any

Tier 2: Describe your experiences during this past 12 months with PATIENT SAFETY ACTIVITIES AND Describe / show data that was used to measure the improvement including the dates of the measurement. Attach additional needed documentation, if any.

Tier 3: Hand Hygiene Secret Shopper- Must include each month of observations, # of observations (minimum of 20 / mo), and requires validation from infection preventionist, by Requesting Approval in platform. Upload observations log.

EP: FLEXIBILITY

Tier 1: List dates and describe your experiences during this past 12 months that show FLEXIBILITY IN STAFFING/SCHEDULING to meet department needs.

Tier 2: List dates and describe your experiences during this past 12 months that show CHANGE IN ASSIGNMENT WITHIN THE SHIFT WITHOUT COMPLAINT to meet department needs.

Tier 3: List dates and describe your experiences during this past 12 months WORKING ON A SISTER UNIT without complaint. Please note for example that sister units are stepdown to stepdown unit or med/surg to med/surg unit.

EP: CROSSED TRAINED/FLOAT

List the units/departments, dates, and number of hours that you crossed trained and floated to a totally different environment, such as peds to adult or Med/Surg to Critical Care within the past 12 months. *Leader of the alternate unit must validate cross training with signed activity form. * OAE or competency are no longer required.*

(A minimum of 40 hours in one year must be worked in these other areas to get 2 points [for floating to 1-2 units or working in a cost center that is different]. A minimum of 80 hours in the past 12 months must be worked to get 4 points for floating to 2-4 units. Ambulatory: 2 points for working a different cost center or 4 points for covering a position vacancy as well as own job responsibilities.)

NK: EVIDENCE BASED PRACTICE

**Ensure with all of the attachments that your name & date are clearly seen & within the application period.*

Tier 1: Attach the certificates of completion/attendance for the 5 EBP modules in OLN.

Tier 2: Actively participate in the critique of at least two (2) Journal Club articles per year. Provide: Title, Author, Year, Journal, Volume, Issue Number, Pages, and Brief Summary of Article. Must provide dates and attach the certificates of attendance at Journal Club, and Upload your verification form from Journal Club Lead.

JOURNAL CLUB CRITIQUE:

Following critical analysis of the article using the critique instrument, are the results of the study valid?

Yes No

Can the findings of the study be applied to your patient population?

Yes No

Are patients/families values and preferences likely to be satisfied by implementation of these findings?

Yes No

COMMENTS (if applicable):

CONCLUSION (Yes to only one option):

Additional articles addressing this topic warranted? Yes No

Progress to EBP pathway to pilot practice change? Yes No

Progress to Research pathway? Yes No

Tier 3: Lead Journal Club critique. Same criteria as Tier 2. Must provide dates and attach the roster/attendance sheet for each Journal Club.

Tier 4: Conduct Literature Review for your department's EBP Project. *Directions to create a literature synthesis are found in platform.*

- Provide Topic/ Main Construct, Subconstructs.
- Must complete the review of at least 5 articles and include for each article: Author, Year, Level of Evidence, Which sub-construct(s) apply to this article and paraphrase what the article states on that topic.
- Provide summary of synthesis, Recommendations/ Conclusions, and to whom the Synthesis Summary was provided.

Tier 5a: As a member of the team, attach a description of the EBP project that your area is working on and provide description of your activities related to the team effort.

Tier 5b: As leader of the team, attach a description of the EBP project that your area is working on and provide a description of your activities as leader.

Tier 6: Provide date and attach the confirmation of acceptance / proof of EBP Project- internal or external EBP poster presentation.

Tier 7: Provide date, and attach the confirmation(s) of acceptance / proof of scholarly podium presentation of the EBP project – Internal or External at a local, regional, state or national conference.

NK: RESEARCH

Tier 1(a/b): Attach the certificate or report of completion of CITI Course.

Tier 2 Shadow a Nurse Engaged in Research: Provide the Individual's name that you shadowed; dates that you shadowed; identify the research project being worked on; provide summary of experience.

Tier 3 Bringing back education to department in form of a written or poster presentation: Provide date of presentation, provide summary of why this research applies to you unit, and upload your powerpoint or poster.

Tier 4 Oral Presentation based on shadow experience: Provide date of presentation, Title/ Topic, What group did you present to?, Provide a summary of your topic and why you chose to present this information, and Upload presentation.

Tier 5 Project that evolves from education from Shadow experience: Provide dates of research project; identify the research project being worked on; provide data points collected; provide the outcome of the research; provide summary of your experience; upload data.

Tier 6 Nursing Research project: provide a description of the nursing research project that you are participating in. Include your role, provide date range of project.

Tier 7 Principle or co-investigator in a nursing research project: Select your role, Include the name of the research study; Upload your research project. Points pre-determined by the System Nursing Research Center.

Tier 8: Present nursing research internally at Annual EBP/ Nursing Research Conference or Research Day: Attach the confirmation of acceptance at the Ochsner Research Night and/or have the Center for Nursing Research validate for the EBP Poster Contest.

Tier 9 Presenting nursing research at a local, regional, state or national conference: Attach the confirmation(s) of acceptance at the external conference(s). Ensure that the organization name and date are included on the letter.

Ensure with all of the attachments that your name & date are clearly seen & within the application period.

***Tiers 2,5-9 Request Approval from Center for EBP & Nursing Research (Jessica Peterson).*

NK: INNOVATION

See Page 17 for definition of innovation.

Ensure with all of the attachments that your name and date are clearly seen and within the application period

Tier 1: Describe the innovative idea and attach proof that it was shared with your Man/Dir. Upload additional evidence, if any.

Tier 2: Describe your activities with the implementation of your innovative idea. Upload additional evidence, if any.

Tier 3: Describe the data that was used to measure the improvement including the dates of the measurement. Upload supporting evidence/ data.

NK: TECHNOLOGY IMPROVEMENT/CHANGE FOR PATIENT EXPERIENCE

Tier 1: Completing a gap analysis on existing technology that we use on our patients and thinking of a way to use/ adjust/ find alternatives for what we have to improve the patient's experience. Detail your analysis, and upload proof of communication to Man/Dir.

Tier 2: Share your action plan, and describe the activities that you completed as a part of design/ implementation team for a new technology that enhances the patient experience. Upload additional evidence, if applicable.

Tier 3: Describe the data that was used to measure the improvement including the dates of the Measurement. Upload evidence.

NK: TECHNOLOGY IMPROVEMENT/CHANGE FOR NURSING PRACTICE

Tier 1: Completing a gap analysis on existing technology that we use on our patients and thinking of a way to use/ adjust/ find alternatives for what we have to improve nursing practice. Detail your analysis, and upload proof of communication to Man/Dir.

Tier 2: Share your action plan, and describe the activities that you completed as a part of design/ implementation team for a new technology that enhances nursing practice. Upload additional evidence, if applicable.

Tier 3: Describe the data that was used to measure the improvement including the dates of the measurement. Upload data/ evidence.

NK: WORK FLOW/PROCESS IMPROVEMENT

Tier 1: Describe the idea that you submitted to Man/Dir to change an existing work flow to enhance nursing practice. Upload proof of communication to Man/Dir.

Tier 2: Describe the activities that you completed as a part of the design/ implementation team for the changes made to a work flow/process that affected your unit. Upload additional evidence, if any.

Tier 3: Describe the data that was used to measure the improvement including the dates of the measurement. Upload data/ evidence.

NK: SPACE PLANNING

Tier 1: Describe the idea that you submitted to Man/Dir to change an existing space to enhance nursing practice.

Tier 2: Describe the activities that you completed as a part of the design/ implementation team for the changes to or a new space design that affected your unit.

Tier 3: Describe the data that was used to measure the improvement including the dates of the measurement. Upload data/ evidence.

NK: OTHER ACTIVITY/ EVENT/ PROJECTS

Tier 1: Must describe your work on the project/activity, provide hours spent on the project and dates spent on project. One (1) point can be awarded for 1 - 8 hours spent on the event/project, two (2) points for >8 hours spent on the event/project, three (3) points >16 hours spent on event/project, and above to a max of 5 points.

Tier 2: Must describe your work related to a physician-driven project or research protocol and provide dates and hours spent on the project. Upload additional evidence, if applicable.

NK: PUBLICATIONS

Tier 1 Requested Peer Review/ Journal article: Must include Title of article/ chapter, title of the journal/ book that is was published in, and upload scanned copy of article.

Tier 2 Authoring External non-peer reviewed journal article: Must include Title of article/ chapter, title of the journal/ book that is was published in, and upload scanned copy of article.

Tier 3 Authoring Book Chapter: Must include Title of article/ chapter, title of the journal/ book that is was published in, and upload scanned copy of document.

NK: PROJECT/ INITIATIVE/ TASK FORCE

Describe your work on the project/activity/ or contribution and provide dates from being on task force that led to a change or improvement – (*Reminder: work of a task force is separate from committee work. Task forces do not duplicate committee work.) Upload additional evidence, if applicable.

Clinical Ladder -Staff Garden Platform Verification Form

Instructions: *Please complete this form for any Clinical Ladder Activity that requires confirmation. Please provide the following information:*

Employee Name: _____

Activity Name: _____

Date(s) of Activity: _____

Print name (Activity/Event Leader)

Title

Signature (Activity/Event Leader)

Date