ADVANCE Manual

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Program Information

Eligibility Requirements
1. Must be a Registered Nurse (RN) clinician operating under the RN Job Profile.
2. Must be a budgeted and benefit eligible employee working a minimum of 20 hours per week.
3. Must have successfully completed the probationary period (first 90 days of employment).
4. Must not be in the progressive discipline process.
5. Performance appraisal at present level is rated competent (3) or above in each performance standard. All candidates must achieve RN 3 Proficient level before progressing to RN 4 Expert level.
6. Must be current in all required hospital and job specific competencies.
7. Must accrue the continuing education hours as described for each level.
8. Must include the required evidence in the application portfolio.
9. Must hold a current Inova-approved nursing certification.

Application Process
1. Review the job description and performance appraisal standards.
2. Review the application checklist to assure that minimum requirements are met.
3. Meet with the relevant Nurse Manager/Clinical Director to clarify and discuss the application process and to identify professional roles and goals.
4. Submit a letter of intent to the relevant Nurse Manager/Clinical Director.
5. The Nurse Manager/Clinical Director will provide the applicant with a letter of support.
6. Compile the application portfolio containing all required documentation as described on the application checklist.
7. Prior to submission of the application portfolio, have an ADVANCE Council member review the portfolio for completion.
8. The applicant forwards the application to the hospital's Nursing Clinical Ladder Council by the established deadline.

Evaluation Process
Resubmissions will be accepted a maximum of two times. After that, a complete reapplication is necessary.
1. The hospital's ADVANCE Committee will confirm that the applicant has received a minimum of a 3 rating (competent) on each standard on the performance appraisal.
2. The hospital's ADVANCE Committee will review the application packet and determine if the standards are met. For fewer than three questions regarding the application, the committee will attempt to contact the applicant for clarification on the day of the meeting, via the phone number(s) provided by the applicant on their resume or biographical paragraph.
3. If the hospital's ADVANCE Committee is unable to contact the applicant, or if there are three or more items for clarification, the application, identifying the areas that need revisions, will be returned to the applicant.
4. If the applicant is not subsequently endorsed for promotion, the ADVANCE Committee will provide written feedback to the applicant, within two weeks of its meeting, to include specific deficiencies that must be addressed in the revised application. The revised application must be re-submitted within three months of the initial application.

Maintenance Process
1. In order to maintain the level of promotion, the candidate must submit a yearly maintenance packet to their nurse leader at performance evaluation time. This packet must include the following:
   a. A copy of their Registered Nurse self-performance evaluation (each performance standard must be rated at a 3 or higher).
   b. The maintenance application, accompanied by evidence forms and supporting documentation. The maintenance application must identify the upcoming year's approved activities that were agreed upon during a conversation between the employee and their nurse leader.
2. Random quality audits will be conducted by the system ADVANCE Council on an annual basis.

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Application Checklist for First Time Applicants

The written portion of the application should be typed and presented in a professional, easily accessible form.

☐ **APPLICATION**

☐ **LETTER OF ENDORSEMENT** from the Nurse Manager/Clinical Director (Expires after 3 months)

☐ **RESUME OR BIOSKETCH**

☐ **CONTINUING EDUCATION RECORD**

      1. Annual Competencies

      2. Formal Continuing Education Hours

☐ **RELEVANT AND CURRENT CERTIFICATION**

☐ **COPY OF BSN TRANSCRIPT OR HIGHER NURSING DEGREE, IF APPLYING FOR RN4**

☐ **SELF EVALUATION** (for the level of the application)

- Must complete Registered Nurse Job Profile Self-Evaluation (not abbreviated form)
- SIGNED and DATED by the applicant within three (3) months of application
- All criteria evaluated at "competent" or above on the job profile

☐ **EVALUATIONS**

The ADVANCE Peer Evaluation Form (see page 6) must be completed within three months prior to the submission date. The performance appraisals must be completed by:

Either:

    a. Two RN peers:

        One selected by the Nurse Manager/Clinical Director

        One selected by the applicant

OR

    b. One appraisal done by the unit peer review committee, where unit peer review committees are in place.

Exception: Areas of practice with less than 3 nursing peers to evaluate, may use one RN and a non-nursing professional in their area of practice to complete a performance appraisal.

☐ **EVIDENCE FORMS AND DOCUMENTATION**

PLEASE NOTE: All examples including education/presentations/committees/staff meetings are applicable for twelve (12) months. (An application to the Clinical Ladder Council in August may include examples from the previous August through that July.) The Submission Date determines the end of the 12-month time frame.

☐ **APPLICATION REVIEWED** for completion by a Council member prior to submission (This is only to verify that all the components of the portfolio are included, formal review for promotion endorsement done by the Council at the next scheduled meeting after submission).

Name of Council member: _____

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Sample Letter of Endorsement for ADVANCE Application

To: The ADVANCE Committee
From: (Nurse Manager/Clinical Director)
Date:
Subject: Endorsement of ADVANCE application

This letter is to endorse _____'s application for progression in the ADVANCE program and professional practice. I support his/her decision to ADVANCE to _____. His/Her last Performance Appraisal was rated competent (3) or above in each performance standard.

I have included the following observations and or comments from the applicant's performance appraisal:

1. **Clinical Practice and Care Coordination**

2. **Teamwork/Communication**

3. **Quality/Best Practice**

4. **Professional and Personal Development**

_____   _____
Nurse Manager/Clinical Director Signature   Date

ADVANCE Application/Maintenance Form

- For first time applicants, this form should be completed as part of the application packet.
- For individuals who intend to maintain their current ADVANCE level, this form is to be completed at the applicant's **yearly evaluation** in order to prepare for the next year.

Name _____

Unit _____

Hours budgeted to work per week:_____

Certification: _____

Application or Maintenance Level: ☐ RN3   ☐ RN4

Highest nursing degree completed: _____
(RN4 must hold a BSN or higher unless grandfathered in effective July, 2014)

Number of contact hours completed: _____
Required number of education contact hours: RN3 = 18 hours, RN4 = 24 hours
Note: College credit for courses required to complete a degree in nursing can be converted to contact hours. 1 college credit = 15 contact hours.

Roles/Activities (select 3):
Attach all required evidence for each role as outlined on the roles and activities evidence checklist.

☐ Mentor *required for RN3 maintenance and RN4 application/maintenance*
☐ Charge Nurse
☐ Committee/Council Participation
☐ Competency Validator
☐ Preceptor
☐ Presenter
☐ Professional Practice
☐ Research or Process Improvement
☐ Super User/Champion
☐ Volunteer

Signatures
Your signature indicates you have reviewed the attached evidence to support the selected roles/activities and you agree the requirements have been met.

Applicant Signature and Date_____

Director Signature and Date_____

Print Director Name: _____

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Inova ADVANCE RN Peer Evaluation Form

Applicant name: _____

Return to: _____ **by this date:** _____

Instructions: The purpose of peer review is to improve professional practice and enhance personal growth. Please assist by completing this peer review form.

For each competency, please add a statement or specific example that supports your score on the lines provided. Scores below a 3 do not qualify the candidate for ADVANCE.

Clinical Practice and Care Coordination- *Provides knowledgeable and caring clinical practice and care coordination through an understanding of patient, family, nurse and healthcare delivery team. Consistently provides safe, therapeutic care in a holistic and systematic way. Incorporates individualized, personal care to each patient. All patient care and interactions are patient and family centered. Integrates knowledge, skills, and experiences to meet the needs of patients and families throughout the continuum to include patient and family education. Evaluates outcomes, anticipates patient variances and makes revisions to plan of care*

☐**0**   ☐**1**   ☐**2**   ☐**3**   ☐**4**   ☐**5**
Does not meet   Novice   Advanced   Competent   Proficient   Expert
expectations   Beginner

_____

_____

_____

_____

Teamwork- *Communicates effectively and works cooperatively with others. Has respect for and understanding of other clinical disciplines. Utilizes an integrated approach toward patient outcomes. Keeps informed of unit initiatives and incorporates the outcomes of team/committee work into practice. Work with the team to achieve maximum productivity.*

☐**0**   ☐**1**   ☐**2**   ☐**3**   ☐**4**   ☐**5**
Does not meet   Novice   Advanced   Competent   Proficient   Expert
expectations   Beginner

_____

_____

_____

_____

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Quality and Best Practice- *Utilizes evidence-based practice, standards, guidelines, and pathways for care delivery. Synthesizes the process for delivery of care from direct patient/family communication, use of technology, and interdisciplinary collaboration.*

☐0	☐1	☐2	☐3	☐4	☐5
Does not meet expectations	Novice	Advanced Beginner	Competent	Proficient	Expert

_____

_____

_____

_____

Professional Development- *Ensures improvements in practice settings by assuming responsibility for self-development in life-long learning. Provides direction and guidance to others regarding practice, serves as a resource, preceptor, and mentor. Leadership skills demonstrated in decision making and problem solving.*

☐0	☐1	☐2	☐3	☐4	☐5
Does not meet expectations	Novice	Advanced Beginner	Competent	Proficient	Expert

_____

_____

_____

_____

IHS Standards of Behavior- *Displays a positive attitude. Is courteous, respectful, ethical and helpful. Is professional in appearance and actions. Demonstrates a sense of ownership, stewardship, accountability and commitment to colleagues. Practices good communication and safety practices*.

☐0	☐1	☐2	☐3	☐4	☐5
Unsatisfactory: Does Not Meet Standards	New Employee: Orienting to Position	Provisional: Does Not Consistently Meet Standards	Competent: Meets Standards	Commendable: Often Exceeds Standards	Distinguished: Exceeds All Standards

_____

_____

_____

_____

Peer Name: _____

Signature: _____ **Date:**_____

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ADVANCE Application and Maintenance Roles and Activities
Examples must be from the 12 months prior to application

Mandatory for RN3 maintenance and RN4 application/maintenance:

Role / Activity	RN 3	RN 4
Mentor	• Mentor 2 RN colleagues with professional development activities for example returning to school, seeking certification or ADVANCE application.	• Mentor 4 RN colleagues with professional development activities for example returning to school, seeking certification or ADVANCE application.

<u>First time</u> RN3 applicants may complete three (3) of the following in lieu of the mentor role. Everyone else must complete two (2) roles/activities and attach the evidence:

Role / Activity	RN 3	RN 4
Charge Nurse **RN Unit Supervisors may not use this role for initial application or maintenance (unless criteria was met prior to accepting role)**	• Work as Charge Nurse for at least 150 hours in the past 12 months.	• Work as Charge Nurse for at least 300 hours in the past 12 months.
Committee/ Council Participation *Committee/Council work must be in alignment with the Model of Care and True North Strategic priorities*	• Assist with data collection and interpretation. • Participate in initiatives to improve quality of care/employee engagement.	• Lead or co-lead initiatives to improve quality of care related to findings from data and achieve True North strategic priority outcomes • Identify and interpret data to compare to national benchmark and/or identify trends.
Competency Validator	• Serve as a competency validator for unit or department	• Develop, implement and/or evaluate outcomes for an education program for the service line, unit, or specialty area **OR** • Review and update competencies for unit/department
Preceptor	• Precept a new hire or a senior nursing student in their Senior Practicum or Capstone experience for at least 150 hours	• Precept a new hire or a senior nursing student in their Senior Practicum or Capstone experience for at least 250 hours
Presenter	• Author / co-author a poster presentation to disseminate outcomes or educational information **OR**	• Author a poster presentation to disseminate outcomes, or educational information **OR** • Present at a hospital or system-

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Role / Activity	RN 3	RN 4
	• Present at an educational event **OR** • Submit and/or present at a regional educational event	wide educational event **OR** • Submit and/or present at a regional or national educational event
Professional Practice	*Must meet one of the following* • Author / co-author an article for a newsletter • Peer evaluator / interviewer for at least 3 peers • Participate in professional development programs or activities that incorporate specialty standards/guidelines into nursing practice • Contribute to preparation of the Magnet document	*Must meet two of the following* • Author an article for a newsletter • Peer evaluator / interviewer for at least 6 peers • Active member in a professional nursing organization • Participate in professional development programs or activities that incorporate specialty standards/guidelines into nursing practice • Contribute to preparation of the Magnet document.
Research or Process Improvement	*Must participate in one of the following* • Research study • Process improvement project • Quality improvement project • Evidence-based practice project • Attend a Lean training **and** participate on a unit, facility, or system wide Kaizen or A3	*Must develop or lead one of the following* • Research study • Process improvement project • Quality improvement project • Evidence-based practice project • Attend a Lean training **and** lead or co-lead a unit, facility, or system wide Kaizen or A3
Super User / Champion	• Serve as a Super User/Champion to educate staff or patients regarding a specific disease, process or initiative • Compile attendance records • Document content taught to staff or patients	• Serve as a Super User/Champion to educate staff or patients regarding a specific disease, process or initiative • Assist with the coordination of super users, including schedule, initial training and teaching content • Evaluate outcomes of process or initiative
Volunteer – health-related community event	• Volunteer at least 8 hours in a facility, system wide or community health-related event	• Volunteer as a unit/department lead for a facility, system wide or community health-related event

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