**Please consult with your Nurse Director before beginning the Clinical Ladder process. **

Name of applicant: ______________________________________

Approved by mentor: ______________________________________
(Signature of mentor)

Mentor Name: ______________________________________
(Printed name)
I. Demographic/Employment Data

Name:______________________________________________________________

Date of Hire:__________________________________________________________

Current Clinical Ladder Level:__________________________________________

Unit(s):______________________________________________________________

Weekly Scheduled Hours:_______________________________________________

(If per diem, indicate number of hours worked over prior 12 months.)

Nurse Director:________________________________________________________

Time on Current Unit:__________________________________________________

Time in Current Specialty (Med-Surg, ICU, etc.):________________________

Identify 2 peers (at least one from your unit) who wish to recommend you for advancement:

___________________________________________

___________________________________________

Please use the attached forms for your Nurse Director and Peer Recommendations. Attach this form with the typewritten recommendations to your application packet.
MID COAST HOSPITAL

PROFESSIONAL ADVANCEMENT

NURSE DIRECTOR CHECKLIST

(please give to nurse director with the recommendation form)

Level 3- Must have 1 of the following
- BSN
- Actively pursuing a BSN
- Certification in a nursing specialty

Level 4- Must meet BOTH of these criteria
- BSN or actively pursuing a BSN
- Certification in a nursing specialty
MID COAST HOSPITAL

PROFESSIONAL ADVANCEMENT

MENTOR CHECKLIST

Mentors will have 1-2 clinical ladder applicants per application season
(Please give to your mentor)

Level 3- Must have 1 of the following
☐ BSN
☐ Actively pursuing a BSN
☐ Certification in a nursing specialty

Level 4- Must meet BOTH of these criteria
☐ BSN or actively pursuing a BSN
☐ Certification in a nursing specialty

Document Requirements
☐ Criteria grid is 75% checked off
☐ Written document explains each of the checked off criteria
☐ Written document is subtitled with headings (Clinical Nursing, Process/Caring, Leadership and Management, Professionalism, Growth and Development)
☐ Document Packet should be submitted to HR ONLY when fully complete

Exemplars for written documents can be found on the Mid Coast Hospital Employee Portal under Nursing Professional Advancement (Clinical Ladder) – This is where staff wanting to advance on the ladder will find the most up to date applications.

We are no longer utilizing the "Clinical Ladder Application” link under “Clinical Resources” on the INET- that link will give directions to the MCH employee portal link
MID COAST HOSPITAL

PROFESSIONAL ADVANCEMENT

PEER/NURSE DIRECTOR RECOMMENDATION FORM

Part I. Recommendation

I, ___________________________________________, being an RN employed
(Print your name)

with Mid Coast Hospital in good standing, hereby recommend

_____________________________________________, for advancement to the position
(Print your peer’s name)

of Clinical Nurse III.

Part II. Support for Recommendation

Please describe the reason for your recommendation for promotion by describing the applicant’s practice in the three broad categories: Clinical Nursing Practice/Caring, Leadership and Management, and Professionalism, Growth and Development. It is requested that you type your recommendation. Be specific and feel free to add any additional information that may help the committee with this decision.

Signed:______________________________________________ Date:_______________

(Please attach your typed recommendation.)
MID COAST HOSPITAL

PROFESSIONAL ADVANCEMENT

PEER/NURSE DIRECTOR RECOMMENDATION FORM

Part I. Recommendation

I, ________________________________, being an RN employed
(Print your name)

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Signed:______________________________________________ Date:________________

(Please attach your typed recommendation.)
MID COAST HOSPITAL

PROFESSIONAL ADVANCEMENT

PEER/NURSE DIRECTOR RECOMMENDATION FORM

Part I. Recommendation

I, ___________________________________________, being an RN employed
(Print your name)

with Mid Coast Hospital in good standing, hereby recommend

_____________________________________________, for advancement to the position
(Print your peer’s name)

of Clinical Nurse III.

Part II. Support for Recommendation

Please describe the reason for your recommendation for promotion by describing the
applicant’s practice in the three broad categories: Clinical Nursing Practice/Caring,
Leadership and Management, and Professionalism, Growth and Development. It is
requested that you type your recommendation. Be specific and feel free to add any
additional information that may help the committee with this decision.

Signed:______________________________________________ Date:_______________

(Please attach your typed recommendation.)
II. Criteria Evaluation:

Under each heading (Clinical Nursing Process/Caring, Leadership and Management, Professionalism, Growth and Development), please check those criteria you feel you meet—should include at least 75% of the criteria in the document. In narrative form, explain how you meet the criteria of each section. Give specific examples, stories, etc. Your stories may demonstrate a combination of criteria and should make it clear to the committee how you meet these criteria. Length of narrative may vary, so please attach your typed copy. Please subtitle your narrative with the heading (Clinical Nursing Process/Caring, Leadership and Management, Professionalism, Growth and Development) you are writing to. Please be prepared to come to your interview ready to talk about your narrative and keep in mind other examples that you may want to talk about.

Minimum Requirements for Advancement to Level III:

RN Licensure, State of Maine.

Effective January 1, 2013, all RN IIIs must have EITHER of the following:

- A Bachelor’s of Science in Nursing degree (or higher) or be matriculated in a BSN program and be actively pursuing a BSN degree.
- A national certification in an area of nursing practice. Skill-specific certifications such as ACLS, PALS, TNCC, NRP do not qualify.

Clinical Nursing Practice/Caring:

Meets

<table>
<thead>
<tr>
<th>1) Leadership.</th>
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<tbody>
<tr>
<td>a) The RN provides leadership in the professional practice setting and the profession.</td>
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<tr>
<td>i) Recognized as a professional by colleagues as demonstrated by competent clinical skill, effective interpersonal relationships and positive image with patients, families, and colleagues.</td>
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<tr>
<td>ii) Actively participates in unit activities, teams, or committees (e.g., PI teams, Professional Practice Councils).</td>
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<td>iii) Is recognized as a professional role model by members of the health care team.</td>
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<td>iv) Presents one or more patient care conferences or unit-based educational programs per year.</td>
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<td>v) Actively participates on hospital committees, focus groups, or</td>
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</table>
### multidisciplinary teams.

vi) Is a member of a local, state, or national professional nursing organization.

vii) Is a member of a community or healthcare organization.

b) Research. The RN integrates research findings into practice.

i) Familiarizes self with sources of nursing research available.

ii) Assists with PI data collection on unit.

iii) Demonstrates awareness of research projects on unit.

iv) Incorporates research specific to specialty into clinical practice.

v) Problem solves for practice issues on unit by researching best available evidence, developing clinical questions, or research project design.

vi) Coordinates data collection.

2) Teamwork

a) Communication and collaboration in direct patient care.

i) Collaborates and communicates with the patient, family members, and other health care team members to meet the patients/s needs.

ii) Communication ensures the continuity of care.

iii) Coordinates care delivery with outside agencies and providers.

iv) Includes time estimate for attainment of expected outcomes.

v) Troubleshoots problems with multidisciplinary care delivery.

b) Collaboration. The RN collaborates with patient, family, and others in the conduct of nursing practice.

i) Recognizes and understands the importance of involving patient, family and other healthcare providers in implementing patient plans.

ii) Implements the discharge plan, involving patient, family and health care providers.

iii) Collaborates with all members of the health care team for safe family-centered care.

iv) Includes the patient/family in an individualized plan of care, including expected outcomes, interventions and an awareness of patient priorities.

v) Formulates a comprehensive discharge plan involving patient, family and health care providers. Considers available resources in the facility and in the community.

vi) Functions as a patient advocate as part of a multidisciplinary team.

vii) Recognizes situations involving patient or family dissatisfaction or concern, and seeks solutions promptly.

viii) Initiates involvement of the patient, family, and other healthcare providers in the patient’s plan of care.
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<tbody>
<tr>
<td>ix)</td>
<td>Serves as a patient advocate role model.</td>
</tr>
<tr>
<td>x)</td>
<td>Independently resolves patient or family complaints.</td>
</tr>
<tr>
<td></td>
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<tr>
<td>c)</td>
<td>Communication and Collegiality. The RN interacts with and contributes to the professional development of peers and colleagues.</td>
</tr>
<tr>
<td>i)</td>
<td>Follows established communication, dress, and behavior guidelines.</td>
</tr>
<tr>
<td>ii)</td>
<td>Addresses interpersonal conflicts directly with individuals involved, in a positive manner, utilizing supportive resources as necessary.</td>
</tr>
<tr>
<td>iii)</td>
<td>Functions as a team member by assisting colleagues.</td>
</tr>
<tr>
<td>iv)</td>
<td>Provides feedback to colleagues directly in a non-threatening relationship-preserving fashion.</td>
</tr>
<tr>
<td>v)</td>
<td>Treats mistakes by self and others as opportunities for growth, thereby creating a culture in which feedback is not only safe, but expected.</td>
</tr>
<tr>
<td>vi)</td>
<td>Assists the preceptor in the orientation of staff members.</td>
</tr>
<tr>
<td>vii)</td>
<td>Sets a positive tone, even in challenging situations, by treating others with caring and respect.</td>
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<tr>
<td>viii)</td>
<td>Independently communicates in a manner which permits and resolves conflicts.</td>
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<tr>
<td>ix)</td>
<td>Actively promotes self-care, stress reduction, and personal balance within the unit.</td>
</tr>
<tr>
<td>x)</td>
<td>Demonstrates a willingness to be a team member and to work both collaboratively and independently.</td>
</tr>
<tr>
<td>xi)</td>
<td>Designs and implements an individualized student or new employee orientation program.</td>
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<tr>
<td>xii)</td>
<td>Freely shares clinical knowledge and skills with others in an approachable manner.</td>
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<tr>
<td>3)</td>
<td>Attendance</td>
</tr>
<tr>
<td>a)</td>
<td>May be depended upon to work scheduled shifts.</td>
</tr>
<tr>
<td>b)</td>
<td>Arrives to work on time.</td>
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<td></td>
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<tr>
<td>4)</td>
<td>Professional Nursing</td>
</tr>
<tr>
<td>a)</td>
<td>Patient care:</td>
</tr>
<tr>
<td>i)</td>
<td>Provides safe patient care according to established standards, policies and procedures.</td>
</tr>
<tr>
<td>ii)</td>
<td>Evaluates and communicates the appropriateness and effectiveness of established standards, policies, and procedures.</td>
</tr>
<tr>
<td>iii)</td>
<td>Assists in the development of new patient care standards, policies, and procedures in response to identified needs.</td>
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<tr>
<td>b)</td>
<td>Education and self development. The RN attains knowledge and competency that reflects current nursing practice.</td>
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</tr>
<tr>
<td>i)</td>
<td>Reads current nursing literature.</td>
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<tr>
<td>ii)</td>
<td>Maintains professional records that provide evidence of competency and lifelong learning.</td>
</tr>
<tr>
<td>iii)</td>
<td>Assumes responsibility for meeting educational needs including mandatory programs.</td>
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<tr>
<td>iv)</td>
<td>Obtains a minimum of 25 approved contact hours or a 3-credit hour professional development course per year.</td>
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<tr>
<td>v)</td>
<td>Reads current nursing literature and incorporates this information into clinical practice.</td>
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<tr>
<td>vi)</td>
<td>Reads and critiques articles from professional journals.</td>
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<tr>
<td>vii)</td>
<td>Attends conferences, workshops, seminars and shares new knowledge with colleagues.</td>
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</table>

**c) Professional Practice Evaluation.** The RN evaluates one’s own nursing practice in relation to professional practice standards and guidelines, relevant statutes, rules, and regulations.

| i) | Recognizes own limitations and asks for assistance/direction from resource person/preceptor. |
| ii) | Evaluates areas of professional development needs and develops goals and a plan to meet them with the nurse manager annually. |
| iii) | Assumes responsibility for completion of CBO tool. |
| iv) | Recognizes own limitations and asks for assistance/direction from resource person. |
| v) | Serves as resource to CN I and II nurses, CNAs and ancillary staff in routine clinical situations. |
| vi) | Develops a personal plan for professional improvement and advancement and is actively pursuing it. |
| vii) | Independently analyzes developmental goals and outlines a plan to meet these goals, with ongoing evaluation of progress. |

**d) Ethics.** The RN integrates ethical provisions in all areas of practice.

| i) | Uses ANA’s *Code of Ethics for Nurses* to guide practice. |
| ii) | Delivers care in a manner that preserves and protects patient autonomy, dignity, and rights. |
| iii) | Maintains patient confidentiality within legal and regulatory parameters. |
| iv) | Reports illegal, incompetent, or impaired practices. |
| v) | Recognizes ethical issues in clinical practice and seeks expert consultation. |
| vi) | Understands the role and scope of the Ethics Committee at Mid Coast Hospital. |
| vii) | Recognizes ethical dilemmas and helps to coordinate the resolution process. |
**e) Participation in Shared Governance:**

i) Attends & participates in unit staff meetings.

ii) Knowledgeable of shared governance opportunities and responsibilities, both on the unit and hospital-wide.

iii) Demonstrates support of the processes for shared governance and collective decision making, as well as the goals and decisions reached.

iv) Provides positive feedback & constructive criticism through appropriate channels and forums.

v) Actively participates on a hospital or unit based team.

vi) Shares accountability for outcomes.

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**5) Care Delivery**

**a) Patient Safety :**

i) Maintains safe and therapeutic patient care environment and equipment which minimizes risk, injury, error, infection, and allows healing.

ii) Uses best practices in communications in transferring or reporting patient care, using SBAR and handoff communication.

iii) Demonstrates knowledge and skills in location, operation, care and trouble-shooting of unit equipment independently.

iv) Serves as resource person to others for safe practices.

v) Addresses “workarounds” in patient safety directly with nurse involved; escalates issue as needed with director.

vi) Makes safety practices a habit; adopts new safety initiatives as they are developed.

vii) Consistently demonstrates compliance with safe practices without using workarounds.

viii) Active in hospital- or unit-wide development, and teaching of safety practices.

ix) Assists in the planning and implementation of guidelines to meet hospital safety goals.

x) Models safe patient practices.

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**b) Clinical Assessment: The RN collects comprehensive data pertinent to the patient’s health or situation, cultural or spiritual needs.**

i) Performs and documents systematic assessments according to established criteria.

ii) Recognizes and responds to abnormal diagnostic data and reports to appropriate provider.

iii) Identifies actual or potential emergency situations and intervenes safely with assistance and/or supervision.
iv) Performs comprehensive assessments of patient’s needs from a holistic perspective.

v) Anticipates problems and intervenes appropriately to prevent/minimize impact.

vi) Responds to subtle shifts in patient data or status and collaborates with appropriate provider.

vii) Independently identifies an actual or potential emergency situation and intervenes safely.

c) Caring

i) Develops and maintains a professional and personable relationship with patients/families.

ii) Develops a relationship with the patient/family that facilitates mutual involvement in the planning of care.

d) Critical thinking

i) Applies critical thinking skills as a routine part of practice. Examples include:

   ii) Questioning appropriateness and effectiveness of treatment;

   iii) Scanning each patient’s care for incongruities, lapses, and missed opportunities;

   iv) Seeking alternative methods to reach outcomes.

e) Documentation:

i) Documentation reflects adherence to hospital and legal requirements.

ii) Documentation is concise, accurate, and complete.

iii) Uses effective time management skills to chart in real time.

iv) Documents response to treatments.

v) Participates in development, evaluation, or improvement of documentation tools.

f) Population Specific Competency: All standards of practice are based on individualized cultural, age appropriate, environmentally sensitive, and population-specific factors.

i) Meets age- and population-specific mandatory education competencies as defined by the department specific scope of service.

ii) Provides age appropriate care in a culturally and ethnically sensitive manner.

iii) Provides care to patients and families from all manner of diverse backgrounds and presentations in a non-judgmental manner.

iv) Recognizes the patient and family as the center of care.

v) Identifies age, cultural, or other population specific patient problems
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<td></td>
<td>based on assessment findings.</td>
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<tr>
<td>vi)</td>
<td>Is accepting and tolerant of differences posed by patients and families.</td>
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<tr>
<td>vii)</td>
<td>Seeks resources for reconciling one’s own personal issues and biases.</td>
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<tr>
<td>viii)</td>
<td>Actively researches and implements care plans for patients with population-specific care needs.</td>
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<tr>
<td>ix)</td>
<td>Works collaboratively with patients and families of diverse backgrounds to develop plan of care.</td>
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6) Resources

a) Time Utilization:

i) Sets priorities for nursing interventions based on individual needs and the needs of the caseload.

ii) Is able to accomplish patient care priorities in a timely way.

b) Delegation and Resource Utilization. The RN considers factors related to safety, effectiveness, cost, and impact on practice in the planning and delivery of nursing services.

i) Knowledgeable about Maine nursing statutes regarding the conditions under which an RN may delegate.

ii) Demonstrates fiscal responsibility.

iii) Effectively communicates expectations, delegates and supervises activities of the CNA and Unit Secretary.

iv) Manages patient assignment with available resources.

v) Demonstrates flexibility, an ability to adapt to changing workload related to patient census and acuity.

vi) Functions effectively when assigned as resource nurse.

vii) Troubleshoots issues around delegation.

viii) Decisions reflect an awareness of resources and priorities.

ix) Proactively responds to changing workload related to patient census and acuity.

7) Outcomes. The RN identifies expected outcomes for a plan individualized to the patient or situation.

a) Evaluation

i) Evaluates patient care and effectiveness of interventions and revises the plan of care as needed.

ii) Assists with identification and resolution of unit- or hospital-wide improvement opportunities.

b) Patient Teaching
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<tr>
<td>i)</td>
<td>Documents teaching and evaluation of patient/family understanding.</td>
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<td>ii)</td>
<td>Demonstrates awareness of unit teaching resources.</td>
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<td>iii)</td>
<td>Assists the patient and family in becoming informed consumers about treatment and care.</td>
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<td>iv)</td>
<td>Presents information clearly and uses appropriate methods with the patient/family.</td>
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<tr>
<td>v)</td>
<td>Plans and implements patient/family teaching program to meet assessed learning needs.</td>
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<tr>
<td>vi)</td>
<td>Demonstrates effective and creative patient teaching for patients with challenging learning needs, readiness, learning ability, language barriers, or cultural differences.</td>
</tr>
<tr>
<td>vii)</td>
<td>Develops, researches, and integrates new patient teaching tools and practices.</td>
</tr>
<tr>
<td>c)</td>
<td>Quality of Practice. The RN systematically enhances the quality and effectiveness of nursing practice.</td>
</tr>
<tr>
<td>i)</td>
<td>Identifies and reports to Unit Coordinator/Nurse Manager or professional practice council issues which affect daily clinical practice.</td>
</tr>
<tr>
<td>ii)</td>
<td>Demonstrates an awareness of unit quality monitors, including nursing sensitive indicators, and how the unit is performing relative to most current outcome data.</td>
</tr>
<tr>
<td>iii)</td>
<td>Participates in data collection for patient outcome monitors.</td>
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<tr>
<td>iv)</td>
<td>Is involved in resolution processes for practice issues on unit.</td>
</tr>
<tr>
<td>v)</td>
<td>Works closely with team to affect unit changes and promote practice changes and quality outcomes.</td>
</tr>
<tr>
<td>vi)</td>
<td>Participates on hospital or unit based quality teams or committees.</td>
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</table>

Please attach your **typed** narrative explaining specifically how you meet the above checked criteria.

Feel free to add any additional information and/or documentation you feel would help this committee make this decision.

Clinical Nurse III Candidate

___________________________________________________ ____________________________
Signature                                      Date