Clinical Ladder Gets a Makeover to Professional Recognition Program

Jennifer Torosian RN, MSN, NEA-BC, Jessica Fellman, RN BSN, Pamela DiNapoli PhD, RN, CNL, Cynthia Cohen, DNP, RN, CNL, RN-BC
Catholic Medical Center Manhattan, NH

The planning group sought to rectify challenges encountered with the current clinical ladder program at Catholic Medical Center that limited nurses’ ability to progress based on their accomplishments and expertise.

The PRP planning committee set out to revolve the current clinical ladder by developing a Professional Recognition Program based on the American Association of Critical Care Nurses Certification Corporation’s Model for Patient Care and Patricia Benzon’s concept of “Service to Expert”. The program was designed to reflect the values and philosophy of professional development.

The evaluating criteria were developed from the goals and values of CMC, the PRP professional recognition program, to include: mandates and expectations of Annual Professional Development. Full time, part time, and per diem nurses were entitled to a professional development fund based on a defined number of points awarded for achievement over a calendar year.

The Pillars

**People Pillar**
- Tasks are consistent within validated competencies.
- Competency in role.
- Achieving and/or maintaining membership in professional organizations.
- Seeks solutions beyond current scope of practice.
- Maintains a personal reading list.
- Reflects on practice experiences, evidence, and outcomes.
- Participates in professional, community, or hospital committees.
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**Quality Pillar**
- Directs clinical decisions to meet patients’ needs.
- Delivers care within budget constraints.
- Maintains current knowledge base in specialty.
- Participates in quality improvement projects.
- Organizes, to be seen.
- Participates in quality improvement projects.

**Cost Pillar**
- Reduces the cost of managing care.
- Uses time and resources efficiently.
- Supports budget goals.
- Seven major cost management initiatives.
- Identifies opportunities to save the most.

**Orientation and Growth Pillar**
- Seeks additional education.
- Participates in professional development opportunities.
- Participates in Professional Development activities at external meetings.
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- Participates in professional development opportunities.
- Seeks additional education.

The PRP was designed to reflect the values and philosophy of professional development.

**Professional Development Activity Points List**

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<thead>
<tr>
<th>Activity</th>
<th>Points</th>
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<tbody>
<tr>
<td>Conferences</td>
<td>20</td>
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<tr>
<td>CME</td>
<td>20</td>
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<td>Journal club</td>
<td>20</td>
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The professional development activity points are designed to be consistent with the organization’s strategic plan.

**References and Contact**

Selected References:
- Blackler S. R., Kaplan S. Organizational Change. The AACN Study: Model for Patient Care. Sudbury, MA: Jones and Bartlett Publishing; 2005
- Cohen, Cynthia, RN, DNP, CNL, RN-BC, 603-663-1003
- DiNapoli, Pamela, RN, PhD, CNL, RN-BC, 603-663-1003
- Fellman, Jessica, RN, BSN, 603-663-1003

Contact:
- Jennifer Torosian RN, MSN, NEA-BC: 603-663-7944
- Jessica Fellman, RN: 603-663-6400
- Pamela DiNapoli, DNP, RN, CNL, RN-BC: 603-663-6400
- Cynthia Cohen, DNP, RN, CNL, RN-BC: 603-663-6400

**Lessons Learned**

- Launching the PRP was a journey and required a long time.
- PRP committee, buy-in was essential to successfully transitioning from the Clinical Ladder Program to the new PRP.
- The planning process was difficult, involved many people, and was time consuming.
- The PRP recognition program was designed to recognize nurses for their contributions to patient care and was not intended as a financial incentive or a reward for completing nursing development activities.
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