



Clinical Ladder Gets a Makeover to Professional Recognition Program

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Introduction



Catholic Medical Center is a community acute care hospital and healthcare organization. We offer a wide variety of healthcare services in a highly technical and mission-oriented environment. Our history is rich with religious connection a commitment to the well-being of our patients and our community.

Nursing Vision

We will be leaders of collaborative and professional nursing practice serving as a model for excellence in healthcare

Core Values

Excellence, Caring, Human Dignity, Patient Advocacy, Competency, and Compassion

Nursing Mission

CMC Nurses provide quality patient centered care through collaborative relationships incorporating evidence based practice and advanced technologies thereby fostering health

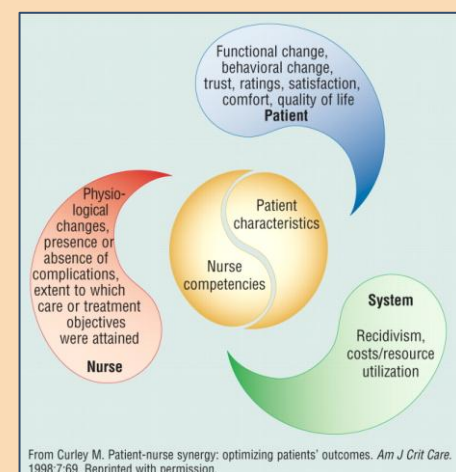
Representatives from all nursing units and departments were invited to participate in rapid-action workgroups tasked with designing a Professional Recognition Program. The final group consisted of nine clinical nurses, one nurse educator, one nurse researcher, and two representatives from nursing administration.



Plan

The group sought to firmly embed CMC's Nursing Mission, Vision and Core Values into an equitable and systematic structure for recognizing excellence in nursing professional growth and development. This goal of this new recognition process would also encourage a commitment to nursing professionalism. The Professional Recognition Program (PRP) would allow nurses to explore and develop areas of interest while earning credit toward a yearly bonus.

The PRP planning committee set out to revise 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 Benner's concepts of "Novice to Expert". The program was designed to reflect the values and philosophy of professional development.

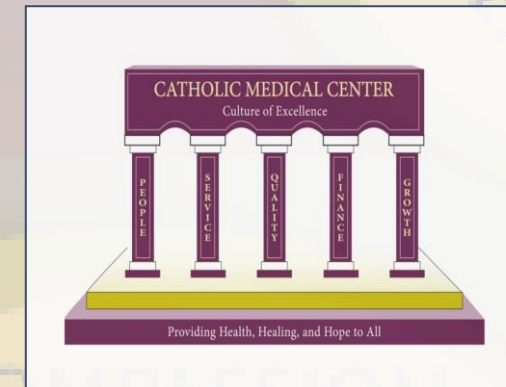


Do

The planning group sought to rectify challenges encountered with the current clinical ladder program at Catholic Medical Center

- Reinforcing CMC's commitment to exemplary professional practice
 - Align with CMC goal of 80% BSN nurses by 2020. RNs earned points both for attending classes toward a BSN or having a BSN degree.
 - Eligibility requirements for the PRP included a BSN, enrollment in a BSN program or to be certified in specialty area
- Making the program more equitable
 - Systematic approach to RN entry and progress into PRP program
 - Two tiered bonus program
 - Reapply annually to either tier of the program
- New compensation model
 - In current system nurses were "hired in" as Clinical Nurse I, II, or III based on experience and expertise in previous organizations. PRP program rewarding accomplishments acquired at CMC.

In designing the new PRP, the competencies and characteristic behaviors to be highlighted were aligned with the organizations strategic plan.



- Loyalty
- Developing special People
- Achieving outstanding Quality
- Offering superior Service
- Providing Financial stability
- Sustaining Growth and Advancement

Progressive Level of Practice		
Level	Total Points Required	Annual Monetary Compensation
PRP 2	20-30	\$1500
PRP 3	31+	\$2000
CNM-PRP	40+	\$2000

Act

All nurses with a minimum of twelve months experience were given the title "Clinical Nurse" and were eligible to participate after their first anniversary with CMC. Applicants were required to meet or exceed all expectations on their Annual Performance Evaluation. Full time, part time, and per diem nurses were entitled to submit a PRP packet; awards were based on achieving a defined number of points within the calendar year.

First time applicants who had not previously submitted an exemplar for the clinical ladder program were required to include an exemplar in their PRP packet. Hour long classes were offered to provide guidance to nurses writing exemplars.

PRP committee members were instrumental in rolling out this new recognition program which replaced the clinical ladder program to which nurses were accustomed. Members emphasized the broader conceptual-based processes that the new PRP program recognized. Activities rewarded forward thinking, innovative ideas and initiatives brought forward by nurses.

The Professional Development Activity List listed activities with the points awarded in a format easily completed by the nurse throughout the year. Nurses were required to have points in 3 of the 4 pillars highlighted in the Activity List

Study

The group was charged with conceptualizing the design of a program that:

- Reinforced CMC's commitment to exemplary professional practice
- Was equitable
- Fiscally responsible
- Recognized the expanding role of the nurse
- Identified rewards that were not based on tasks

Professional Development Activity Points List

Examples

People Pillar

- Earn specialty certification from a recognized national organization
- Participate, chair/co-chair a committee or council
- Member, hold office of professional health care organization
- Participates in CMC Management Boot Camp or CMC Organizational Development course

Quality Pillar

- Academic course credits towards a BSN or higher degree or BSN, MSN, Doctoral program degree
- Develop and implement unit Performance Improvement (PI) project, team or individual
- Published in peer-review journal
- Speak or present poster at nursing conference

Service Pillar

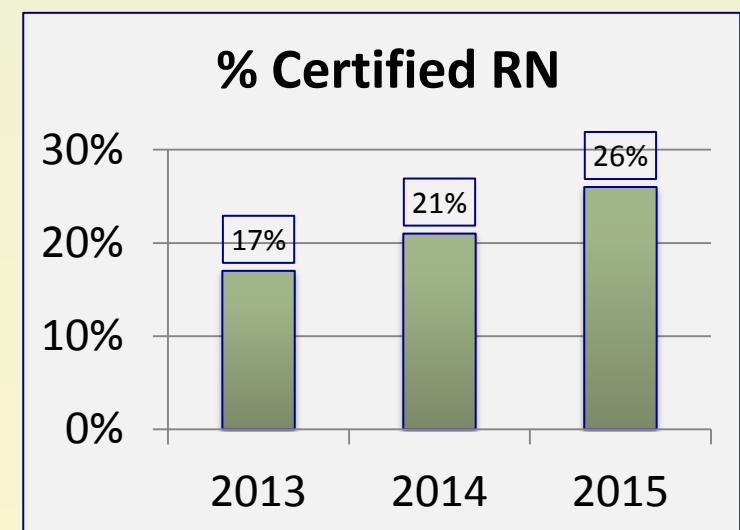
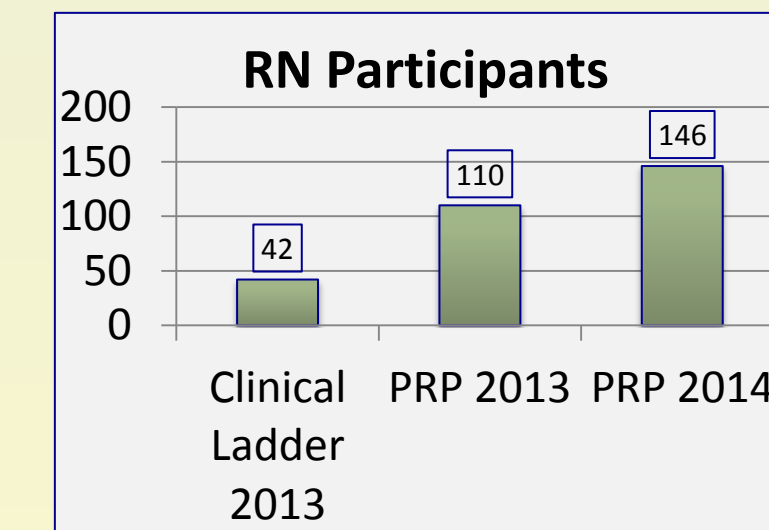
- Become/instruct AHA courses
- Loyalty – years of service at CMC
- Volunteer in healthcare-related activities or CMC-sponsored activities outside of hospital
- Present a formal community education program to patients/prospective patients

Finance/Growth Pillar

- Primary/secondary Preceptor
- Relief Charge
- Implements a LEAN process or product change leading to a cost savings.
- Uses data to monitor financial resources

Results

The resulting Professional Recognition Program (PRP) is proving to be both a vehicle for rewarding exemplary practice and a catalyst for inspiring nurse leadership and innovation. Both participation and nursing certification have risen steadily since the rollout of the PRP. CMC has seen increases in unit based journal clubs, participation in shared governance, organizational level committee work, along with nurse developed patient and staff education materials.



Lessons Learned

- Launching the PRP was a journey and required a long view
- PRP committee buy in was essential to successfully transitioning from the Clinical Ladder Program to the new PRP
- Early involvement from finance, human resources, and appropriate leadership was essential to developing a plan that would be approved and supported by the organization
- Staff needed encouragement to track PRP points over the entirety of the year, rather trying to recollect them as the packets were due
- Educational level needed to be clarified after initial year. BSN program enrollment required at least one class completed during the year of application. Some applicants were enrolling late in the year but not completing any classes prior to packet submission
- Participants preferred to have bonus checks separated from paychecks.
- Bonus checks were distributed during Nursing Week.

References and Contact

Selected References:

- Benner, P. *From Novice to Expert and Power in Clinical Nursing Practice*. Menlo Park, CA: Addison Wesley; 1984
- Hardin S. R. , Kaplow R. *Synergy for Clinical Excellence: The AACN Synergy Model for Patient Care*. Sudbury, MA: Jones and Bartlett Publishing, Inc.; 2005

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