



*Our Lady of Lourdes Medical Center*

*Lourdes Medical Center of Burlington County*

***“Advancing Nursing Practice to a  
Level of Excellence...”***

**Clinical Advancement Program**

**July 1, 2008- June 30, 2009  
Application Period**

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## **Clinical Advancement Program**

### **Introduction**

Together, both Medical Centers within the Lourdes Health system (LHS) have designed a Clinical Advancement Program (CAP) for the Registered Nurses who provide clinical bedside nursing. The program development is a result of an identified need to recognize and differentiate professional nursing practice for the bedside care provider. The program is aimed to attract and retain a high caliber of nurse who provides excellent direct care to our patients in a complex quality-driven environment. The program focuses on clinical advancement and caring behaviors. The behaviors a nurse must display to practice successfully in the LHS environment are mission driven by living our core values in his / her daily practice. Integrated into the model design is an emphasis on clinical practice and the promotion of bedside education. The program sets the pace for clinical excellence and drives the highest-quality patient outcomes.

### **Nursing Mission, Vision, and Philosophy**

#### **Mission**

It is the mission of nursing to ensure that each patient receives a continuum of the highest-quality care by Professional Nurses and their Patient Care Partners. Professional Nurses and their Nursing Patient Care Partners provide excellent care to every patient through the consistent application of Clinical Standards of Care, learning from Continuing Education, appropriate Resource Allocation, Self-Care theoretical framework, and an ongoing commitment to Process Improvement.

#### ***The Nursing Mission is founded on core principles:***

- Practice that is compassionate, interdisciplinary, and collaborative, which focuses on the needs of patients from our diverse communities.
- Education which focuses on the continuing development of expert nurses.
- Mutual respect which treats our diverse community with dignity and esteem.
- Commitment to quality which strives to continuously improve patient care processes through evidence-based practice.
- Teamwork, personal responsibility, integrity, innovation, trust, and communication to create and maintain an employer-of-choice work environment.

- Resource allocation to support our commitment to patient care excellence and embrace the principles of stewardship in our nursing environment.
- Self-care, nurturing, caring for oneself, and understanding that how you feel influences how you work and are with others.

## **Vision**

The practice of nursing is an integral component to the accomplishment of the Lourdes Health System's vision. Our role as nursing advocates and healthcare providers extends beyond the physical boundaries of the organization.

The nursing profession is a leader in collaborative nursing practice and healthcare management. We provide an essential role in building creative systems in response to the changing healthcare environment. Multifaceted professionals collaborate to create a highly-functional whole. Through effective communication and staff involvement, a trusting open and cohesive environment is maintained. Staff's professional growth and development is fostered through recognition and reward systems and expansion of nontraditional roles. National preeminence of our nurses is fostered through education, publication, and research. Staff satisfaction with their work results in strong patient and staff relationships and a cohesive, professional environment.

The professional practice of nursing is known for excellence, autonomy, commitment, dedication, and collaborative practices. The high standards of nursing are maintained by clinically-competent staff through the enhancement of professional accountability, responsibility, and prudent use of resources. Comprehensive, dignified, and holistic care is delivered at every phase of life's continuum. The patient and family or support network is at the center of our care.

Nursing is committed to continual performance improvement, the introduction of innovative processes, and the expansion of progressive teaching techniques.

## **Philosophy**

The Discipline of Nursing, in accordance with the Franciscan mission of Lourdes Health System, believes that our primary concerns are patients' well-being and each other.

### ***We believe:***

- That all patients have the right to receive individualized holistic nursing care that encompasses physical, social, cultural, psychological, spiritual, economic, and rehabilitative needs.
- That holistic nursing care includes both the patients and their support systems.

- That patients have the right to receive competent and compassionate nursing care.
- That all patients have the right to receive care that is based on the nursing process, considerate of the patient's level of growth, development, and cultural needs and managed by the professional Registered Nurse.
- That delivery of nursing care is accomplished through the collaboration and coordination of appropriate and available Medical Center and community resources.
- That an integral function of the Discipline of Nursing is to involve staff in clinical and administrative decision making; thereby developing a progressive and professional environment that fosters autonomy, collaboration, and growth in concert with organizational goals.
- That an ongoing professional educational process achieves the highest standards of nursing practice. This educational process is initiated through a preceptorship approach to orientation and maintained by staff development programs and continuing education programs based on periodic needs assessment.
- That the Discipline of Nursing has a responsibility to participate in the development and implementation of Medical Center policy and procedures. Through this participation, the Discipline of Nursing will actively support, develop, and maintain sound relationships with all other departments and medical staff.
- That the Discipline of Nursing has a responsibility to assure the quality and appropriateness of nursing care through a continuous monitoring process of problem identification, root cause analysis, and resolution in accordance with the Medical Center Performance Improvement Plan.
- That the discipline of Nursing has a responsibility to initiate and promote nursing research which provides the rationale for enhancing or validating current nursing practices and broadens the information necessary for decision making.

### **Goals of Career Advancement Program**

In accordance with Nursing's mission, vision, and philosophy, the following outlines the goals of the Clinical Advancement Program. The goals are as follows:

- To recognize and promote clinical excellence that supports quality outcomes and patient safety.
- To acknowledge the contributions of our nursing staff to the dimensions of professional nursing practice.

- To create a stimulating environment that provides opportunities to retain and attract expert nurses within Lourdes Health System.

### **Conceptual Model**

The conceptual model for the CAP Program is based on Patricia Benner's work, from *Novice to Expert: Excellence and Power in Clinical Nursing Practice*. Benner's model is grounded in skill acquisition and development. This model emphasizes skilled nursing interventions and clinical judgment.

### **Program Description**

**Five (5) levels of nursing practice are defined as follows:**

- Clinical Nurse = Entry
- Clinical Nurse I = Competent after Orientation
- Clinical Nurse II = Proficient
- Clinical Nurse III = Advanced
- Clinical Nurse IV = Expert

**In addition to the nursing staff levels, the dimensions of clinical practice were defined. They include:**

- Professional Growth and Development
- Clinical Expertise
- Service Delivery
- Research and Education

Please refer to Appendix A-D for correlation of dimensions of clinical practice with the Clinical Nurse II through IV levels.

CAP Clinical levels are determined by performance-based criteria, accumulation of points, and submission of exemplars when appropriate.

### **Eligibility requirements for each Clinical Level:**

- **CN** - Newly hired RN. After successful completion of orientation (90 Days), the RN progresses to CNI. There may be some instances (i.e., Cath Lab) where orientation may be up to 6 months. No orientation period will exceed 6 months.
- **CNI** - Must be in their position 1 year from orientation completion in order to apply for CNII or III. CNI is the entry-level competence on unit of hire.
- **CNII** - Must have, minimally, 2 years of experience and 1 of these years must be in the area of practice, with at least one year of service at LHS. **Required to present one (1) in-service per year (no points awarded for required in-services: for application eligibility only) as well as accumulate 120 points that are divided into a required number of points for each level in each domain.**
- **CNIII** - Must have either a BSN or MSN degree OR must be certified in their area of practice. Must have 4 years of experience with 2 of these years in the area of practice. Two (2) years of service must be within LHS. **Required to present two (2) in-services per year (no points awarded for required in-services: for application eligibility only) as well as accumulate 160 points that are divided into a required number of points for each level in each domain.**
- **CNIV** - MSN and Certification in their area of practice required. Must have 7 years of experience, with 5 years of service in practice area. Must have three (3) years in LHS. **Required to present three (3) in-services per year (no points awarded for required in-services: for application eligibility only) as well as accumulate 200 points that are divided into a required number of points for each level in each domain.**

### **A NOTE ABOUT REQUIRED / SUBMITTED FOR POINTS INSERVICES (3 key points to remember):**

1. All In-services must be approved by your Nurse Manager / Director and the Nursing Education Department.
2. When selecting topics, the following sources should be considered: Strategic Goals; Organizational initiatives; Identified Unit/Nursing Educational Needs; practice updates or literature reviews.
3. In-services must be presented to 30% of the unit staff, or 5 nurses, whichever is greater.

### **Other Eligibility Requirements:**

- The nurse must be either full time or part time. If part time, must be a 0.5 FTE and work minimally 1,040 hours per year.
- Must “meet expectations”, with a score of 3, in all areas of the annual performance evaluation
- **Must have no written disciplinary action within the past six months of application. If suspended within the past year, may not apply or re-apply for that year.**

- Years of experience, in the specialty area, must have occurred within the past 2 years. Individuals with previous nursing experience who are currently at a Clinical Nurse One level may choose to apply to the Clinical Nurse Two or Three levels once the standard criteria are met
- Eligibility requirements must be met by June 30th of the application year.
- Exceptions may be considered for eligibility or transfer upon appeal/review on an individual basis

After one year of experience in the Care Coordinator / Care Manager role, all clinical care managers and clinical care coordinators *in Camden* will **need to apply to a minimum of CNII as a job requirement.** Care Managers / Care Coordinators who meet all of the requirements of the Clinical Advancement Program, but have less than 1 year in the CM/CC role, have the option of applying to CAP if he/she so chooses. **TBD**

### Transfer Process

Transfers, within the same specialty area, will maintain their clinical ladder status through that year after successful completion of orientation to the new unit. They must still continue maintenance requirements to keep their CAP status after that year.

If RNs transfer to a new specialty area, they will convert to a clinical nurse status through the orientation period. Once they successfully complete orientation, they will advance to a Clinical Nurse I. Once they have one-year post-orientation experience in that specialty area, they may apply to appropriate level based on eligibility requirements.

**\*In some cases, past experience may be taken into account when deciding whether or not transfers may maintain their clinical level.**

#### LMCBC “Like Units”

- E2 and E5
- The Behavioral Health Units. (STCF, Clinical Research, and the Mental Health Unit).
- ICU and CCU.
- Endo can go to SDS, but not vice versa.
- Tele and Observation.

#### Stand Alone Units:

- Invasive Radiology
- OR
- PACU
- ED
- L&D
- MBU
- SCN

OLLMC “Like Units”:

- CC1, CC2 and CTR
- Dialysis units (5E (acute dialysis), ACC, Mt. Laurel)
- 2E/W, 3E/W, 5W, 6N
- 5N, Rehab, and 6M
- PCU can go to 2E/W, 3E/W, 5W, 5N, 6N, 6M and Rehab
- 2E/W, 3E/W, 5W, 6N can go to 5N, Rehab, and 6M
- Critical Care can go to Inv. Radiology, but not vice versa

Stand Alone Units:

|      |               |     |        |
|------|---------------|-----|--------|
| ER   | Cardiac Rehab | CCL | ICN    |
| PACU | MBU           | OR  | L & D  |
| EP   | Peds          | ECP | Osborn |
| PASU |               |     |        |

**Application Process**

The applications will be due July 31st of each year with an October decision on the application. Data collection period for the application will be from July 1<sup>st</sup> of the previous year to June 30<sup>th</sup> of the current year. Awards will be presented annually in November.

**Application:**

- Choose which level you are applying for (CN II, III, IV) and use the corresponding application form.
- All applications and CAP documentation forms **must be typed.**
- All CAP forms can be downloaded to your home computer from: <http://www.lourdesmed.org/> – Documentation for your application and point accrual activities must be on the appropriate forms.
- CAP applications and collected data must be placed in a binder with tabs labeled for each of the domains: Clinical Expertise, Professional Growth & Development, Service Delivery, and Research & Education; and a tab designated for application required in-services (remember required in-services do not accrue points and cannot be used for points in other domains).
- Every clinical level requires the accrual of a specific minimal number of points under each domain – The proof of point accrual required under each domain needs to be placed under the corresponding domain tab.
- **All required signatures, dates, and data must be included at the time of application submission – no late entries and / or post-submission documentation are accepted.** Guidance regarding the program will be available from your manager and members of the CAP Steering Committee, but you are ultimately responsible for meeting all of the program requirements. Please note: No one will be reviewing your entire application prior to the final review process that occurs post-application submission.
-

### Renewal process

- You must continue to meet the eligibility requirements in order to renew.
- The renewal applications will be due July 31st of each year with an October decision on the application. Data collection will continue to be from July 1<sup>st</sup> of the previous year to June 30<sup>th</sup> of the current year.
- Renewals can be done every year, for an indefinite period.
- If a renewal period is missed, a full application must be submitted when you wish to re-enter the program.
- If you wish to increase your level (i.e. from CN II to CN III), a full application will need to be submitted.
- The inservicing requirement remains the same for each level as in the initial application (1 for CN II, 2 for CN III and 3 for CN IV).
- The renewal requirements have been equally adjusted with regards to the minimum number of points required in each domain and are as follows:

| <b>Domain</b>                       | <b>CN II</b> | <b>CN III</b> | <b>CN IV</b> |
|-------------------------------------|--------------|---------------|--------------|
| Clinical Expertise                  | 20           | 40            | 60           |
| Professional Growth and Development | 15           | 20            | 25           |
| Service Delivery                    | 30           | 40            | 50           |
| Research and Education              | 15           | 20            | 25           |

### Recognition Awards:

On an annual basis, *Recognition Awards* will come in the form of monetary recognition (checks) and clinical level pins.

Monetary Annual awards will be:

- CNII: \$2,000
- CNIII: \$2,500
- CNIV: \$3,500

The Annual Award Ceremony will be held in November.

## APPENDIX A: Performance Criteria by Domain Clinical Nurse 1

Behavior and performance expectations of a CN 1 related to each of the four CAP Domains.

| <b>Clinical Expertise Performance Criteria: CN 1</b>   |  |
|--|--|
| <b>CLINICAL EXPERTISE DOMAIN DESCRIPTION</b>   | <b>CLINICAL EXPERTISE PERFORMANCE CRITERIA</b>   |
| Applies <b>Critical Thinking</b> in decision-making.   | Demonstrates ability to ask appropriate questions.   |
| Demonstrates <b>accountability</b> and <b>responsibility</b> .   | Accepts responsibility and is accountable for decision-making  |
| <b>Problem-solving:</b> Identifying, prioritizing, and solving problems individually or in groups  | Articulates own scope of practice and one's role within the work environment; uses standards of care, policies, and procedures   |
| <b>Interpersonal communication:</b> Working well with others. Interacts effectively with a variety of individuals and groups               | Demonstrates ability to listen attentively, communicate, and respond effectively to individuals and health care team, verbally and non-verbally  |
| <b>Speaks Confidently</b> and <b>articulately</b> to others.   | Presents information in an organized, coherent manner.   |
| <b>Nursing Process:</b> Demonstrates skills and knowledge necessary to ensure assessment, treatment, and evaluation of populations served. | Applies the nursing process to multiple patients according to established standards of care.   |
| <b>Professional Growth &amp; Development Performance Criteria: CN 1</b>  |  |
| <b>Professional Growth &amp; Development Domain Description</b>  | <b>Professional Growth &amp; Development Performance Criteria</b>  |
| <b>Coordinating and collaborating:</b> coordinating the work of others, encouraging positive group relations                               | Participates as a team member and may seek assistance and advice; demonstrates a spirit of collaboration, cooperation, and flexibility as evidenced by role recognition of others and respectful |

|  |   |
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|  | collegial relationships.  |
| <b>Leadership and Influence:</b> Delegates appropriately based on role and competencies of others; influences, directs, guides, and motivates others.              | Begins to recognize the various leadership styles and delegates care appropriately to assistants; Employs appropriate feedback process. |
| <b>Conflict Resolution:</b> Identifies sources of conflict and uses skills to resolve conflict; promotes consensus decision-making.                                | Effects guidance from supervisor in managing conflict; demonstrates attentive listening skills.   |
| <b>Professional Accountability:</b> Acknowledges personal and professional limits – manages self.  | Seeks guidance appropriately; benefits from preceptors involvement.   |
| <b>Personal Strengths:</b> A variety of personal traits that assist individuals in dealing with day-to-day situations – Demonstrates adaptability and flexibility. | Employs effective coping strategies.  |

**Service Delivery Performance Criteria: CN 1**

| <b>Service Delivery Domain Description</b>   | <b>Service Delivery Performance Criteria</b>  |
|--|---|
| <b>Uses Knowledge</b> about people and their cultures in the delivery of care  | Recognizes individual differences   |
| <b>Decision Making:</b> Considers resources, appropriateness of tasks, and competencies of others                          | Follows patient safety guidelines and clinical standards of care to make decisions  |
| <b>Advocacy:</b> Speaking on behalf of patients/families who may not have the knowledge or ability to speak for themselves | Seek assistance of health care team to engage in advocacy role                      |
| <b>Speaks to patient's community groups</b> about the rights of patients and the mechanics of health care                  | Applies the concepts within the <i>Patient's Bill of Rights</i> to nursing practice |

**Research and Education Performance Criteria: CN 1**

| <b>Research and Education Domain Description</b>     | <b>Research and Education Performance Criteria</b>                              |
|--|---|
| <b>Applies research findings</b> in nursing practice | Recognizes that evidence-based practice is the foundation of clinical practice. |

## APPENDIX B: Performance Criteria by Domain Clinical Nurse 2

Behavior and performance expectations of a CN 2 related to each of the four CAP Domains.

| <b>Clinical Expertise Performance Criteria: CN 2</b>   |   |
|--|---|
| <b>CLINICAL EXPERTISE DOMAIN DESCRIPTION</b>   | <b>CLINICAL EXPERTISE PERFORMANCE CRITERIA</b>  |
| Applies <b>Critical Thinking</b> in decision-making.   | Demonstrates increased problem solving; more reflective about impact of their practice on patient outcomes. |
| Demonstrates <b>accountability</b> and <b>responsibility</b> .   | Seeks new opportunities for responsibility; begins advocacy role  |
| <b>Problem-solving:</b> Identifying, prioritizing, and solving problems individually or in groups  | Continues to use standards of care, but alters protocols appropriately to patient/family unique needs.      |
| <b>Interpersonal communication:</b> Working well with others. Interacts effectively with a variety of individuals and groups               | Demonstrates awareness of group dynamics; communicates effectively; begins to act as a facilitator.         |
| <b>Speaks Confidently</b> and <b>articulately</b> to others.   | Continues to present information in an organized, coherent manner- establishes professional relationships.  |
| <b>Nursing Process:</b> Demonstrates skills and knowledge necessary to ensure assessment, treatment, and evaluation of populations served. | Applies and adapts the nursing process as needed to patients/families with complex needs.                   |

| <b>Professional Growth &amp; Development Performance Criteria: CN 2</b> |   |
|---|---|
| <b>Professional Growth &amp; Development Domain Description</b>         | <b>Professional Growth &amp; Development Performance Criteria</b> |
| <b>Coordinating and collaborating:</b> coordinating the work of others, | Active team member who assists in shaping change by awareness     |

|  |   |
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| encouraging positive group relations   | of his/her own contributions and the contributions of others; seeks collegial relationships.              |
| <b>Leadership and Influence:</b> Delegates appropriately based on role and competencies of others; influences, directs, guides, and motivates others.              | Develops selected leadership skills; Delegates and supervises assistants based on roles and competencies. |
| <b>Conflict Resolution:</b> Identifies sources of conflict and uses skills to resolve conflict; promotes consensus decision-making.                                | Displays behaviors that help manage conflict and supports consensus decision-making.                      |
| <b>Professional Accountability:</b> Acknowledges personal and professional limits – manages self.  | Is self-directed: recognizes increased competency and deviations from the standards of care.              |
| <b>Personal Strengths:</b> A variety of personal traits that assist individuals in dealing with day-to-day situations – Demonstrates adaptability and flexibility. | Applies professional standards of care and individualizes them to patient.                                |

**Service Delivery Performance Criteria: CN 2**

| <b>Service Delivery Domain Description</b>   | <b>Service Delivery Performance Criteria</b>  |
|--|---|
| <b>Uses Knowledge</b> about people and their cultures in the delivery of care  | Integrates knowledge of cultural difference in plan of care   |
| <b>Decision Making:</b> Considers resources, appropriateness of tasks, and competencies of others                          | Individualizes standards of care based on patients needs and safety principles  |
| <b>Advocacy:</b> Speaking on behalf of patients/families who may not have the knowledge or ability to speak for themselves | Uses knowledge of health care system to advocate for patients/families; acts as a patient/client advocate.                  |
| <b>Speaks to patient's community groups</b> about the rights of patients and the mechanics of health care                  | Provides information to the patient/family based on the ability of patient/family to grasp information or a desire to know. |

**Research and Education Performance Criteria: CN 2**

| <b>Research and Education Domain Description</b>     | <b>Research and Education Performance Criteria</b> |
|--|--|
| <b>Applies research findings</b> in nursing practice | Supports evidence-based practice                   |

## APPENDIX C: Performance Criteria by Domain

### Clinical Nurse 3

Behavior and performance expectations of a CN 3 related to each of the four CAP Domains.

#### **Clinical Expertise Performance Criteria: CN 3**

| <b>CLINICAL EXPERTISE DOMAIN DESCRIPTION</b>   | <b>CLINICAL EXPERTISE PERFORMANCE CRITERIA</b>   |
|--|--|
| Applies <b>Critical Thinking</b> in decision-making.   | Critically assesses the many facets of a problem   |
| Demonstrates <b>accountability</b> and <b>responsibility</b> .   | Serves as an advocate for others; demonstrates an empowered demeanor.  |
| <b>Problem-solving:</b> Identifying, prioritizing, and solving problems individually or in groups  | Uses appropriate channels to resolve issues  |
| <b>Interpersonal communication:</b> Working well with others. Interacts effectively with a variety of individuals and groups               | Uses principles of group dynamics , communicates effectively, and provides constructive feedback.  |
| <b>Speaks Confidently</b> and <b>articulately</b> to others.   | Develops public speaking and presentation skills to communicate concisely to others  |
| <b>Nursing Process:</b> Demonstrates skills and knowledge necessary to ensure assessment, treatment, and evaluation of populations served. | Serves as a resource for the application and adaptation of the nursing process as needed to patients/families with complex needs and unpredictable outcomes. |

#### **Professional Growth & Development Performance Criteria: CN 3**

| <b>Professional Growth &amp; Development Domain Description</b>  | <b>Professional Growth &amp; Development Performance Criteria</b>   |
|--|---|
| <b>Coordinating and collaborating:</b> coordinating the work of others, encouraging positive group relations | Serves in the leadership role; contributes to the growth of the team, supports the team's new and innovative ideas; role models positive interpersonal interactions; forms collegial relationships. |

|  |   |
|--|---|
| <b>Leadership and Influence:</b> Delegates appropriately based on role and competencies of others; influences, directs, guides, and motivates others.              | Consistently applies selected leadership skills as evidenced by his/her delegation and supervision of team members.                   |
| <b>Conflict Resolution:</b> Identifies sources of conflict and uses skills to resolve conflict; promotes consensus decision-making.                                | Acknowledges conflict and follows appropriate channels in conflict resolution; listens to both sides of the issue; is not judgmental. |
| <b>Professional Accountability:</b> Acknowledges personal and professional limits – manages self.  | Builds on personal strengths; recognizes personal limitations.  |
| <b>Personal Strengths:</b> A variety of personal traits that assist individuals in dealing with day-to-day situations – Demonstrates adaptability and flexibility. | Responds to the changing needs of the workplace; suggests alternative strategies to meeting workplace requirements.                   |

**Service Delivery Performance Criteria: CN 3**

| <b>Service Delivery Domain Description</b>   | <b>Service Delivery Performance Criteria</b>  |
|--|---|
| <b>Uses Knowledge</b> about people and their cultures in the delivery of care  | Shares knowledge regarding uniqueness of patients with other members of the health care team to improve nursing practice. |
| <b>Decision Making:</b> Considers resources, appropriateness of tasks, and competencies of others                          | Evaluates decisions based on scientific principles of clinical practice and safety  |
| <b>Advocacy:</b> Speaking on behalf of patients/families who may not have the knowledge or ability to speak for themselves | Navigates the system to find resources to meet specific clinical care needs   |
| <b>Speaks to patient's community groups</b> about the rights of patients and the mechanics of health care                  | Identifies alternative ways for patient to achieve positive clinical outcomes.  |

**Research and Education Performance Criteria: CN 3**

| <b>Research and Education Domain Description</b>     | <b>Research and Education Performance Criteria</b>                       |
|--|--|
| <b>Applies research findings</b> in nursing practice | Shares research findings with colleagues and other health professionals. |

## APPENDIX D: Performance Criteria by Domain

### Clinical Nurse 4

Behavior and performance expectations of a CN 4 related to each of the four CAP Domains.

| <b>Clinical Expertise Performance Criteria: CN 4</b>   |   |
|--|---|
| <b>CLINICAL EXPERTISE DOMAIN DESCRIPTION</b>   | <b>CLINICAL EXPERTISE PERFORMANCE CRITERIA</b>  |
| Applies <b>Critical Thinking</b> in decision-making.   | Generates solutions based on the synthesis of what is known   |
| Demonstrates <b>accountability</b> and <b>responsibility</b> .   | Facilitates empowerment in others   |
| <b>Problem-solving:</b> Identifying, prioritizing, and solving problems individually or in groups  | Provides leadership in problem resolution   |
| <b>Interpersonal communication:</b> Working well with others. Interacts effectively with a variety of individuals and groups               | Uses skills and knowledge of group dynamics to ensure effective communication; demonstrates skills in interdisciplinary communications that promote collaborative relationships.                    |
| <b>Speaks Confidently</b> and <b>articulately</b> to others.   | Uses public speaking skills to communicate information based on current literature.   |
| <b>Nursing Process:</b> Demonstrates skills and knowledge necessary to ensure assessment, treatment, and evaluation of populations served. | Is a role model in the application and adaptation of the nursing process to all patient and family populations, with complex needs and unpredictable outcomes within their practice setting.        |
| <b>Professional Growth &amp; Development Performance Criteria: CN 4</b>  |   |
| <b>Professional Growth &amp; Development Domain Description</b>  | <b>Professional Growth &amp; Development Performance Criteria</b>   |
| <b>Coordinating and collaborating:</b> coordinating the work of others, encouraging positive group relations                               | Identifies relationships between activities, resources, and outcomes; initiates and develops an agenda to drive quality outcomes; evaluates effectiveness of outcomes and collaborative activities. |

|  |   |
|--|---|
| <b>Leadership and Influence:</b> Delegates appropriately based on role and competencies of others; influences, directs, guides, and motivates others.              | Demonstrates appropriate leadership styles relevant to the situation; Evaluates appropriateness of delegated responsibilities; Makes revisions based on evaluation. |
| <b>Conflict Resolution:</b> Identifies sources of conflict and uses skills to resolve conflict; promotes consensus decision-making.                                | Demonstrates skills in resolving conflict; facilitates consensus in decision-making process.  |
| <b>Professional Accountability:</b> Acknowledges personal and professional limits – manages self.  | Guides others to function autonomously  |
| <b>Personal Strengths:</b> A variety of personal traits that assist individuals in dealing with day-to-day situations – Demonstrates adaptability and flexibility. | Fosters a spirit of cooperation and flexibility with team members and acts as a change agent.   |
| <b>Service Delivery Performance Criteria: CN 4</b>   |   |
| <b>Service Delivery Domain Description</b>   | <b>Service Delivery Performance Criteria</b>  |
| <b>Uses Knowledge</b> about people and their cultures in the delivery of care  | Identifies and collaborates with community resources to enhance patient care and the practice of nursing.   |
| <b>Decision Making:</b> Considers resources, appropriateness of tasks, and competencies of others  | Analyzes decisions and recommends change based on current research evidence and safety principles.  |
| <b>Advocacy:</b> Speaking on behalf of patients/families who may not have the knowledge or ability to speak for themselves   | Participates in initiatives to facilitate change for identified groups of patients/families   |
| <b>Speaks to patient's community groups</b> about the rights of patients and the mechanics of health care  | Recognized as a role model for patient advocacy   |
| <b>Research and Education Performance Criteria: CN 4</b>   |   |
| <b>Research and Education Domain Description</b>   | <b>Research and Education Performance Criteria</b>  |
| <b>Applies research findings</b> in nursing practice   | Influences research based change leading to evidence-based practice.  |

## APPENDIX E - *Basics to Getting Started:*

- 1-You will need a **three-ring binder**, 2”– 3” works well.
- 2- You will need **5 dividers with tabs** with the following headings:
  - Required In-service (s) for application level
  - Clinical Excellence
  - Professional Growth & Development
  - Service Delivery
  - Research & Education
- 3- You will need a copy of the **CAP Outline** (you are reading it right now) for reference. Carefully read eligibility requirements to ensure you are eligible to apply for the program and to your desired clinical level.
- 4- You will need a copy of the **Points Accumulation Tracking Form**: *The points accumulation tracking form* describes activities / projects for points; the number of points you need for your application level under each domain; and the name of the evidence documentation forms you need to use for the specific activity/program/ tool. Place the appropriate pages from this form under their respective dividers.
- 5- You will need to download and save all of the **documentation forms** to your home computer (Directions on how to do this are on the next page) – all evidence submitted must be typed and be on the correct form.
- 6- You will need to download and print out your **clinical level application** – there is an application for each clinical level. This is the only section of your entire application that can be hand written.

Before proceeding, here are the directions to download the REQUIRED CAP Forms on to your computer at home. Remember you must use the correct form to submit your evidence and all material with the exception of the Level Application Form (you may handwrite the Level Application form), must be type-written. All required signatures are placed on document after all evidence information has been completed (typed) and printed-out.

## DIRECTIONS FOR DOWNLOADING CAP EVIDENCE DOCUMENTATION FORMS:

Copies of the screens appear on the next few pages.

1 - In your browser type: <http://www.lourdesmed.org/>

2 - **Click** on the “**For Employees**” tab located in the blue section across the top of the page.

3 - **Click** on “**Clinical Advancement Program**”.

4- **Scroll down** to the forms section and **click** on the form you would like to save and open it (note: the documents are in Microsoft Word format). If you do not have Word on your computer, most current word processing programs (not Notepad or WordPad that come bundled with Windows) will have the ability to convert the document into a useable format. Another option is to download the free open-source program “Open Office” which can open Word documents. It can be found here: <http://www.openoffice.org/>

5 – (In Word) go up to the toolbar on the top left hand side and click on **file**.

6 - A drop down menu will appear: **click** on “**save as**” and a pop-up with files will appear.

7- Choose a file to save your document (s) under (usually, “my *documents*” or wherever you typically save your documents).

You can now keep all of your documents on your home computer and can update and edit them for final printing.

**TIP:** If you create a *folder* called **CAP** and save your documents in that folder, everything related to your application will be in one easy to access place.



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**Cancer Care at Lourdes**

As a member of the University of Pennsylvania Cancer Network, Lourdes Cancer Center offers patients and their families the compassionate care Lourdes is known for, complemented by the resources and expertise of one of the finest academic medical centers in the nation. This relationship allows us to deliver 95 percent of cancer care within the community while offering our patients access to the leading-edge cancer services of the Abramson Cancer Center of the University of Pennsylvania. Penn is one of a select number of Cancer Centers in the country designated by the National Cancer Institute as a Comprehensive Cancer Center because of its strength and expertise in research, education, clinical care and community outreach.



**News**

- ["Cool" Laser is Newest Tool To Treat Peripheral Vascular Disease](#)
- [Lourdes Medical Center of Burlington County Designated as a Bariatric Center Of Excellence](#)

**Upcoming Events**

- [Maternity Tea for Families to Be](#)  
February 26
- [Midpoint Menopause Support Group](#)  
February 27

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When you type this address in your browser, this is the page that will appear – click on “FOR EMPLOYEES” Tab

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## For Employees

This section of the Lourdes Health System website will be expanded to include information of specific interest to our Associates. Visit this page often for updates.

- [Access your Lourdes email](#)
- [Access your online benefits](#)
- [Clinical Advancement Program](#)
- [Angels Alley](#)  
Learn more about the on-site child care program for Associates of Lourdes Health System.
- [Partners in Care, June 2008](#) - The Newsletter for Lourdes Health System Associates


**Upcoming Events for Lourdes Associates:**

**Calling All Nurses!**  
Have you or your unit instituted a practice that has benefited patient care? Share your best practice in a poster presentation at the 4th annual Our Lady of Lourdes Medical Center Nursing Research Conference. Nurses at both Our Lady of Lourdes Medical Center and Lourdes Medical Center of Burlington County are invited to participate. The event is also open to external participants. There is a \$50 registration fee for external applicants.

The theme of this year's conference, to be held Friday, Oct. 17, is "The Joy of Research." Poster topics may include: unit-based projects, new practices, literature review, projects in progress and research proposals.

Posters are due by Tuesday, Sept. 12. Participation qualifies for Clinical Advancement Program (CAP) credit. In addition, individual and unit-

**Click on the Clinical Advancement Program Link**



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**EDUCATION >**

## Clinical Advancement Program

The Clinical Advancement Program (CAP) is designed to reward nurses' increasing levels of clinical expertise and commitment to patient care. The implementation and maintenance of such a program enhances the Lourdes Health System's ability to recruit and retain professional nurses who, in turn, contribute to the achievement of quality patient outcomes.

Participating nurses seek to improve through five levels of excellence that are based on minimum years of experience; advanced degrees and specialty certifications; and points attained through certain activities. Those activities include: service as a population-specific resource; educator in special areas (mock codes, fire drills, etc.); committee participation; service as a preceptor, mentor or adjunct faculty; recognition from local or national nursing organization; community service/volunteerism; participator or initiator nursing research; and author of an article published in a journal.

### 2008 CAP Nursing Award Recipients Announced

Ceremonies were held at Our Lady of Lourdes Medical Center and Lourdes Medical Center of Burlington County honoring nurses who have achieved higher levels of clinical care through this new Lourdes program. Those nurses are:

|  |   |
|--|---|
| <p><b>Clinical Nurse II</b><br/> Deborah Forbes, ICN<br/> Christine Gedling, SCN<br/> Catherine Hartzell, SCN<br/> Josephine Heisler, ED<br/> Sharon Hughes, 6 N<br/> Mary Kelly, MBU<br/> Donna Kensey, PCU</p> | <p><b>Clinical Nurse III</b><br/> Susan Costello, PASU<br/> Lucille Ettore, PASU<br/> Joyce Haag, OPCR<br/> Donna Hamlet, ICN<br/> Marcella Hebert, CC2<br/> Kelly Hoyt, ICN<br/> Wanda Martorano, Pediatrics</p> |
|--|---|

**Also See**

**Education**

[Clinical Advancement Program](#)

**Related Events**

[Big Brother / Big Sister Class](#)  
November 1

[Breastfeeding Support Group](#)  
November 4

[Promoting Excellence](#)

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To learn more about the program review the [CAP Program Outline](#) [MS Word, 547K]. To apply, download and complete the remaining documents. Contact information and deadlines are contained within the documents.

- [CAP Clinical Events Form](#) [MS Word, 64K]
- [CAP Committee Involvement Tool](#) [MS Word, 52K]
- [CAP Contact Hour Summary Form](#) [MS Word, 72K]
- [CAP Cover Sheet CNII](#) [MS Word, 52K]
- [CAP Cover Sheet CNIII](#) [MS Word, 52K]
- [CAP Cover Sheet CNIV](#) [MS Word, 52K]
- [CAP Educational Inservice 2008 Tool](#) [MS Word, 61K]
- [CAP Exemplar Tool - Clinical Expertise](#) [MS Word, 52K]
- [CAP Exemplar Tool - Professional Growth and Development](#) [MS Word, 52K]
- [CAP Exemplar Tool - Research and Education](#) [MS Word, 52K]
- [CAP Exemplar Tool - Service Delivery](#) [MS Word, 52K]
- [CAP Patient Care Conference Form](#) [MS Word, 42K]
- [CAP Patient Care Issue Form](#) [MS Word, 54K]
- [CAP Patient Education Tool](#) [MS Word, 47K]
- [CAP Points System](#) [MS Word, 182K]
- [CAP Service Delivery Program Summary](#) [MS Word, 52K]
- [CAP Shift Tracking Tool](#) [MS Word, 56K]

**CAP EVIDENCE DOCUMENTATION FORMS are posted here.**

***Click on each one to open and save to your home computer.***

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