

STANFORD HOSPITAL AND CLINICS
DEPARTMENT OF NURSING

GOALS FOR DEMONSTRATION OF LEADERSHIP SKILLS

Staff Nurse III: Choose and initial a total of two activities. **Staff Nurse IV:** Choose and initial a total of four activities.

Partial Credit (completion of a minimum of 50% of activity) in different areas can be combined to achieve full credit in certain areas: Resource Nurse Role, Preceptorship, audits, surveys and interviews. An activity may count for double credit if the target number is doubled: Preceptorship, Resource Nurse Role, audits, surveys and interviews. Tenure credit: 20 years = 1 credit, 30 years = 2 credits.

TECHING/ROLE MODELING ACTIVITIES

- ____ A. Identified and recognized as an expert in a particular disease process or procedure, e.g., PICC management, cystic fibrosis, pain management, VAD access, delirium rating scale, OR orthopedic service coordinator, etc.
- ____ B. Seeks opportunities to develop personal competency and become an expert user when new interventions are introduced (such as procedures, equipment, forms); trains, supports and coaches other staff during implementation, for a minimum of 2 interventions.
- ____ C. Completes and maintains non-mandatory certification in _____ (agreed upon by Staff Nurse and Evaluator) using education (“B”) time. Credit is for all years that certification is valid.
- ____ D. Precepts new staff and/or students. Target =10 shifts per year. See Preceptor Expectations.
- ____ E. Identifies and acts upon opportunities to improve patient and family outcomes and satisfaction, considerably beyond what is expected to address patient needs.
- ____ F. Unit-specific activity (agreed upon by Staff Nurse and Evaluator): _____

LEADERSHIP ROLE ACTIVITIES

- ____ A. Audits documentation of patient care interventions and responses (e.g., Nursing Admission Assessment, MAR, Flowsheet, perioperative records, etc.) on a target of 30 charts, as approved by Nurse Manager.
- ____ B. Completes a target of 30 surveys, measures, audits or other tools that assess patient care quality in areas such as pain, perioperative documentation, restraints, patient/family interviews, etc.
- ____ C. Community Service to meet criteria (8 hours per year of unpaid, volunteer time may count as 1 leadership activity). Must have verification.
- ____ D. Participates in one unit-based or hospital-wide committee or taskforce with 75% attendance.
- ____ E. Effectively handles the Resource Nurse Role. Target = 10 shifts per year, according to regional expectations of the Resource Nurse Role.
- ____ F. Unit-specific activity (agreed upon by Staff Nurse and Evaluator): _____

Annual review and **BLS** must be completed and current. The above activities will be documented on the “Record of Leadership Activity Form”. Our signatures signify that the goals indicated above have been agreed upon.

IMPORTANT: Discussion with manager is required before the next evaluation date if goals are changed or target numbers cannot be met.

Staff Nurse Signature

Evaluator Signature

Date

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STAFF NURSE CLINICAL PERFORMANCE CRITERIA

The following are examples of activities to meet the SN III & IV Leadership Requirements. This is not an exhaustive list of activities. Additional activities may be approved through the Nurse Manager.

- 1. Preceptor and/or Orientation and/or Mentorship.**
Plan, assess, Evaluate, discuss with Manager/Instructor and Document.
- 2. Hospital unit based committee/task forces (not limited to):**
 - Ethics.
 - Latex.
 - Nurse Week Activities.
 - Nurse Practice.
 - Strategic Initiatives.
 - Patient Care Documentation.
 - Performance Evaluation.
 - Quality Improvement.
 - Wound and Skin.
- 3. Patient Teaching.**
- 4. Resource Nurse Role.**
- 5. Device Expert.**
- 6. Specialty Certification.**
- 7. Active Participation in Professional Nursing Organization.**
- 8. Expert in disease Process or Procedure.**
- 9. Audits, Surveys, interviews.**
- 10. Teach ACLS/BLS for Stanford Hospital and Clinics.**
- 11. Primary Nursing, for units with this nursing care model.**
- 12. Float Out of Region.**
To an area that requires additional training.
- 13. Community Service (limited to one of the following activities per year):**
(Activities not listed must have prior approval from Manager.)
 - American Heart Association Blood Pressure Checks.
 - Any activity that involves community health teaching or disaster preparedness.
 - Any activity that promotes nursing as a career (i.e. career fairs, schools, community, hospitals), partnering high school students.
 - Assist with health related screenings in schools and community centers.
 - Charitable Fund Raising (Stanford/LPCH sponsored).
 - Stanford/LPCH sponsored health fairs (i.e. Friends of Nursing)
 - Interplast.
 - Pro Bono Health Care Organizations (i.e. Roto-Care Clinic, Doctors Without Borders, Suicide Hotlines).
 - Teaching health/nursing related topics (schools, colleges, universities).
- 14. Education Program.**
 - Organize and provide an inservice to staff (may include posttest/CEU credit).
 - Publish professional article.
 - Teaching or precepting a graduate course.

FREQUENTLY ASKED QUESTIONS (FAQs) ABOUT THE STAFF NURSE CRITERIA

Q1: Why does Stanford have a Clinical Ladder?

A1: Stanford developed the clinical ladder in order to recognize professional development as well as clinical expertise. The clinical ladder allows you to direct your own professional growth, thereby increasing personal satisfaction along with increased monetary recognition.

Q2: Where do I find information about the criteria?

A2: Ask your NM/ANM for a copy of the Staff Nurse Clinical Performance Criteria Orientation Module.

Q3: I want to go up Staff Nurse level. How do I do this?

A3: At either an interim evaluation or your regular evaluation, tell your evaluator that you want to set goals that would allow you to increase your staff nurse level. Discuss with your evaluator the time frame in which to meet these goals.

Q4: How soon can I reach a Staff IV level?

A4: This depends upon your level of experience. A nurse with a lot of experience could master the clinical skills and could be doing the extra activities very quickly, and could conceivably be promoted directly from a II to a IV within 6 months to a year. However, most nurses take at least two years to reach the Staff IV level and progress one level per year.

Q5: I did not set goals to advance a Staff Nurse level at my last evaluation but I am doing activities that meet a higher Staff Nurse level. How do I get promoted?

A5: If you are performing satisfactorily at a higher level you may be reclassified at that level and receive a corresponding increase in salary. You may want to request an interim evaluation to set goals for promotion.

Q6: Where do I get the correct forms and what do I need?

A6: Ask your NM/ANM for the appropriate forms. You will need to do a Goal Worksheet for Staff II, III and IV. A Staff III and IV will also have to complete the Goals for Demonstration of Leadership Skills and the Record of Leadership Activity. If increasing a staff level, you may be asked to do the Staff Nurse Performance Appraisal Form as well.

Q7: What activities can be used to demonstrate Leadership Skills?

A7: Some examples are: precepting/orienting/mentoring, Hospital or unit committees/task forces, patient teaching, Resource role, device expert, specialty certificate, clinical expert in a disease process or procedure, audits/surveys/interviews, teaching ACLS/BLS, inservices, CE program, professional articles, unit-specific activities agree upon by you and your manager. More activities are listed in the Staff Nurse Performance Criteria Orientation Module.

Q8: Can I use community activities as credit towards my Staff Nurse level?

A8: You may use one Community Service Activity. To meet criteria, 8 hours of participation per year is required. Examples of community activities are listed below. You and your manager must agree on the activity.

- ✓ American Heart Association blood pressure checks
- ✓ Assist with health related screenings in schools and community centers
- ✓ Stanford/LPCH sponsored charitable fund raising (i.e. Friends of Nursing)
- ✓ Health fair
- ✓ Any activity that involves community health teaching or disaster preparation/response
- ✓ Interplast
- ✓ Pro bono health care organizations, e.g. Roto Care Clinic, Doctors without borders suicide hotlines.
- ✓ Any activities which promote nursing as a career, e.g., career fairs (schools, community, hospitals), partnering high school students
- ✓ Teaching health/nursing related topics (schools, colleges, universities)
- ✓ America Corps (President Bush's New Program)
- ✓ Flu shots at senior center

Frequently Asked Questions (FAQs) about the Staff Nurse Criteria

- Q9: I work nights and don't precept many new hires or students, but I am frequently orienting Travelers to the night shift. Does this count towards the precepting goal?**
A9: Yes, if you are orienting the Traveler for the entire night. You need to keep track of the dates and names as you would do for new hire or student.
- Q10: Can I use floating on my criteria?**
A10: If you cross train and/or volunteer to float to a unit outside your region, you can use it for one credit. You can use it for two credits if you volunteer to float first within the region (unless your skills are needed on home unit). These credits are given because the person who frequently floats develops a wide clinical knowledge base and skills, e.g., Med/Surg Float Nurses.
- Q11: I have a 2-hour commute to the hospital, so I don't attend staff meetings if I'm not working that day. Can I be denied promotion or be demoted for not attending staff meetings?**
A11: No, but you are responsible for knowing the information presented in these meetings so you will need to consistently read the meeting minutes.
- Q12: One of my goals was to do Resource but I am an 8-hour nurse on a unit with mostly 12-hour shifts and I am not reaching the target of 10 shifts. I have done some audits but usually it is difficult to make time to do these during my shift and I have not reached the target numbers for those either. Can I combine these two activities to use for my leadership activities?**
A12: Yes, you can combine partial credits in order to meet your goals. The criteria are intended to recognize our professional development and our contributions to our unit and the hospital, not to restrict us.
- Q13: I went from 0.9 to Relief "A". I have been told that I can't be a Staff IV because I am Relief and am not here often enough. Is this true? Can I be demoted to a Staff II?**
A13: No, you cannot be automatically demoted, but it may be difficult to do some of the leadership activities such as precepting and Resource. You can do other activities, e.g., audits, surveys, inservices, a community activity, etc. to meet the criteria. If you do not meet criteria, you can only be demoted one Staff level per year.
- Q14: I was on a committee that did not meet this year so I did not meet that goal. Can I be demoted?**
A14: You should go to your evaluator as soon as you realize there is a problem and set a new goal. You have three months from your evaluation to meet your goals before demotion so you can set a new goal to complete your year. Don't forget that you can get double credits for certain activities, e.g., if you have done Resource or precepted over 20 shifts.
- Q15: I am a Staff IV transferring to a specialty care area. Will I be able to keep my Staff IV level?**
A15: Anyone transferring to a specialty area has nine months to meet the criteria in the new area. If you are not meeting the criteria at that time you will be reclassified downward to a Staff III with a corresponding decrease in salary. We recommend that you establish what you need to do to meet both the clinical and leadership criteria at the six-month evaluation.

Developed by the Staff Nurse Performance Criteria Committee, 10/02

Activities

Examples

Resource
QI committees
Audits
Surveys
Hospital or unit
committees
Task force
Research
Community Health
related Services

Precepting
Clinical expert
Certifications

Any activity determined
by unit needs

CLINICAL LADDER

**Staff I – Basic clinical skills with close supervision and assistance.
Cares for a limited number of lesser acuity patients**

**Staff II – Average clinical skills with general supervision.
Cares for patients with obvious as well as subtle needs.
Begins to develop leadership skills.**

**Staff III – Functions independently and manages/supervises care given by others.
Cares for patients with obvious, subtle and potential needs.
Leadership skills are demonstrated by:**

2 Activities

**Staff IV – Functions independently and supervises, teaches and is a resource/consultant to others.
Cares for patients with complex needs with a high degree of consistency.
Leadership skills are demonstrated by:**

4 Activities

Additions to Recognized Community Services

- American Heart Association blood Pressure Checks
- Assist with health-related screenings in schools and community centers
- Charitable Fund Raising (Stanford and/or LPCH sponsored)
- Health Fair (Stanford and/or LPCH sponsored)
- Any health fair
- Any activity which involves community health teaching
- Interplast
- Pro Bono Health Care (recognized organizations, e.g. Roto Care Clinic, Doctors Without Borders, Suicide Hot Lines, etc.)
- Any activities which promote nursing as a career: career fairs in schools, community, hospitals, partnering high schools students
- Teaching health/nursing related topics in schools, colleges, university

***The activity needs to be mutually agreed with your manager.
Eight (8) hours of community service = 1 activity.***

Obtain confirmation of activity in writing.

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STAFF NURSE: RECORD OF LEADERSHIP ACTIVITY
TEACHING/ROLE MODELING ACTIVITIES

Name _____ Staff Nurse Level _____ Unit _____ Date _____

A. Clinical Expert

Area of Expertise: _____

Method(s) used to acquire and maintain expertise: _____

How have you shared your expertise with individual staff or the unit as a whole?

B. Expert User (New Intervention #1)

What have you done to train, support and coach other staff during the implementation period? _____

Expert User (New Intervention #2)

What have you done to train, support and coach other staff during the implementation period? _____

C. Certification: _____ **Date:** _____

D. Preceptor

New Hire and/or Student Name(s): _____

Date(s) and Shifts(s): _____

E. Actions to improve patient and family outcomes and satisfaction beyond what is expected to address patient needs: _____

F. Unit-Specific Activity (complete box on Page 2)

STAFF NURSE: RECORD OF LEADERSHIP ACTIVITY
LEADERSHIP ROLE ACTIVITIES

A., B., (circle one): Completed _____ audits, surveys, measures or patient interview.

C. Community Service (verification required)
Activity: _____
Total Number of Hours: _____

D. Committee and/or Taskforce Participation
Committee/Taskforce: _____
Attendance Dates: _____
Contribution(s): _____

Committee/Taskforce: _____
Attendance Dates: _____
Contribution(s): _____

E. Resource Nurse and/or Clinical Coordinator
Dates and Shifts or Set Schedule: _____

F. Unit Specific Activity (includes Community Service, Research, Special Projects, Teaching, Publishing, etc.)

G. Tenure: _____ years of employment.

**Complete form prior to performance appraisal and submit to
Nurse Manager or Assistant Nurse Manager.**