Career Ladder
Reference Handbook

Last updated June 24, 2013
The Origin and Purpose of the Career Ladder

The Career Ladder was initiated at UVA Health System in 1988 and is based on Benner’s *From Novice to Expert.* The Ladder was developed to promote individual growth as a professional nurse according to personal goals and stage of demonstrated nursing practice. Each level of the ladder is associated with behaviors that represent increasing expertise, responsibility, and authority. Those wishing to advance on the Career Ladder must demonstrate to a panel of their peers that they consistently perform next-level role behaviors through a portfolio and interview process. This empowering shared governance model is fundamental to the Professional Nursing Staff Organization’s operation. The Ladder evolves to meet the needs of the nursing organization.

Overview of the Career Ladder

The Clinical Career Ladder at UVA Health System
-- Growth from Novice to Expert --

<table>
<thead>
<tr>
<th>Clinical Roles</th>
<th>Advanced Practice Roles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinician 1</td>
<td>APN 1 - NP</td>
</tr>
<tr>
<td>Clinician 2</td>
<td>APN 2 - NP</td>
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<tr>
<td>Clinician 3</td>
<td>APN 3 - NP</td>
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<tr>
<td>Clinician 4</td>
<td>APN 1 - CNS</td>
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<td>APN 2 - CNS</td>
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<td>APN 3 - CNS</td>
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The following information summarizes behaviors associated with each clinical level; for a detailed description of the behaviors associated with each clinical level, please refer to the appropriate behavior grid (Clinician I-IV; APN I-III).

**Clinician I-IV Roles**

**Clinician I:** Entry-level professional nurse, focused primarily on developing knowledge and skills. Provides safe patient care at a basic level and shows growth in ability to care for increasingly complex patients. Requires consultation with more experienced clinicians and benefits from feedback.

**Clinician II:** Capable clinician, focused on expanding knowledge and skills. Consistently provides effective direct care as part of the interdisciplinary team, to a variety of complex patients. Seeks as well as provides feedback for improved clinical practice. Assumes a beginning leadership role but seeks mentoring in this process.

**Clinician III:** An experienced and highly skilled clinician who is recognized for knowledge and skills by their peers. Utilizes an interdisciplinary approach to patient care service delivery across the continuum of care. Has an emerging leadership style and functions consistently and autonomously in this role. Is learning to negotiate the health care system to maximize the delivery of quality care and to minimize cost of patient care services. **A BSN is required for any clinician hired into or applying for advancement to the Clinician III level on or after 4/15/2015.**

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Clinician IV: BSN-prepared clinician with well-developed clinical expertise within a defined specialty, recognized by peers as a leader within the institution. Works predominantly with patients, families and nursing staff. Has aggregate responsibility at the regional level for nursing care, incorporating current literature and research. Identifies the strengths within the service area and takes the opportunity to develop and or mentor others to promote professional growth and improve patient outcomes. Has demonstrated expertise in chosen scholarly activities focused towards the advancement or promotion of the profession. Certification is required by 4/1/2013.

Advanced Practice Nurse (APN) Roles
Advanced Practice Nursing is based on educational preparation (graduate degree in nursing), practice preparation (speciality certification) and core competencies. The nurse must be practicing in a specifically defined APN Role such as Nurse Practitioner or Clinical Nurse Specialist.

Advanced Practice Nurse I (APN I): Masters prepared nationally certified clinician who manages the care of a defined patient population as a dominant aspect of the role. Recognized as an interdisciplinary leader within the service area. Consistently demonstrates core competencies of advanced practice in a defined specialty:

- Expert direct clinical practice
- Consultation
- Research skills
- Clinical and professional leadership
- Collaboration
- Ethical decision-making
- Expert coaching and guidance

Advanced Practice Nurse II (APN II): Masters prepared nationally certified clinician who manages the care of a defined patient population as a dominant aspect of the role. Recognized as an interdisciplinary leader within the service area and institution. Critically analyzes the health care delivery system and clinical outcomes to maximize the delivery of quality, cost effective patient care services.

Advanced Practice Nurse III (APN III): Masters prepared nationally certified expert clinician and consultant who designs, implements, and evaluates creative approaches to patient care and patient care systems thereby contributing to the body of nursing knowledge through research and scholarly works. An interdisciplinary leader recognized within and beyond the institution. Demonstrates expertise through scholarly work in a defined specialty. Establishes a culture for quality patient care through coaching, guidance and mentorship of others.
Key Concepts of the Career Ladder

Two Branches Support the Needs of all Nurses in Direct-Care Roles
The Career Ladder has two branches, one for Clinical Nurses (Clinician I-IV) and one for Advanced Practice Nurses (APN I-III). The two branches are parallel but separate to address the professional development of all nursing staff in direct-care roles. (Additional job titles exist at UVA Health System for nurses in non-direct-care roles, such as administration, quality, informatics, etc. These roles are not part of the Clinical Career Ladder.)

Entry to the Career Ladder Occurs at Different Levels
New graduate nurses enter the career ladder at the Clinician I level. Clinician I positions may also be available for nurses returning to practice, or returning to practice in a tertiary setting. Experienced nurses may enter the career ladder at other levels but must provide validation of practice at that level as outlined later in this handbook. APNs may enter the ladder at the APN I, II, or III level, as outlined later in this handbook.

Advancement is Based on the Ability to Demonstrate Next-Level Behaviors
The PNSO, through a shared governance process, has defined the behaviors associated with different levels of practice on the career ladder. In order to advance on the Career Ladder, nurses must demonstrate the ability to meet next-level behaviors. A portfolio and interview process provides applicants with the mechanism to demonstrate these behaviors to a panel of their peers (the Career Ladder Panels). Decisions to support or not to support advancement are made by the Career Ladder Panels during semiannual advancement periods. The Career Ladder behaviors also form the basis for ongoing evaluation of practice.

Advancement Is Optional Beyond the Clinician II Level
A Clinician I must submit advancement materials, successfully complete a 12-month probationary period, successfully complete the Nurse Residency Program (NRP), and advance to Clinician II to remain employed with the Health System. For all other levels of both branches of the ladder, advancement is optional. The decision to pursue advancement is an individual choice based on interest in professional development, increased responsibility, and increased accountability. It is not expected that all staff will move through all levels. A basic tenet of the Career Ladder is that each clinician will move at his or her own developmental pace and attain his or her optimal clinical level.

Advancement Takes Place One Level at a Time
It is the philosophy of the Career Ladder that clinicians will advance one level at a time, because each level defines a more complex, more advanced level of practice with expanded responsibility and accountability requiring defined knowledge, skills and abilities.

PNSO Members Govern Advancement through Bylaws and Nursing Cabinet
The PNSO Bylaws, which are approved and amended by a vote of the PNSO membership, govern aspects of the Career Ladder process. The PNSO Bylaws ensure that the Nursing Cabinet, as appointed by the PNSO membership, takes an active role in appointing the Panelists who conduct the fundamental peer review process of the Career Ladder. The PNSO is committed to inclusiveness, as outlined in the Position Statement on Diversity for the Health System. As part of this commitment, the Career Ladder process strives to create diverse panels which represent a broad cross-section of clinical perspectives.

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The PNSO Values Nursing Leadership, including Career Ladder Panel Service

Service on a Career Ladder Panel is valued as one indicator of demonstrated nursing leadership in the PNSO. Panel experience is a pre-requisite for service as PNSO President.

Resources are Available to Support Advancement

Resources are available to nurses interested in pursuing advancement. Interested nurses are encouraged to discuss readiness for advancement with their manager, director/administrator, or clinical leaders in their area. Clinicians are also encouraged to use the resource list of Career Ladder Mentors available on the PNSO website (click here). The mentor list is made up of individuals with recent experience on a Career Ladder Panel (currently-serving panelists are not permitted to serve as mentors during their term, to avoid conflicts of interest). Career Ladder mentors may be especially useful in guiding aspects of portfolio development and in interview preparation. Additional resources, including examples of portfolio materials and computer-based and in-person educational opportunities, are available on the Career Ladder website. Questions regarding the advancement process can be directed to the PNSO Office (pnso@virginia.edu).

Ongoing Revalidation of Practice is Required

All employees at UVAHS receive an annual performance appraisal. For Career Ladder clinicians, job descriptions and performance appraisals parallel many of the Career Ladder behaviors, so the annual performance appraisal provides self-evaluatory, peer-provided and managerial feedback relevant to ongoing practice based on Career Ladder level. In addition, Clinician IVs and APN I-IIIIs submit revalidation materials to the Career Ladder approximately every 2 years, as described later in this handbook, for the purpose of peer review and formal re-validation of practice at the designated level.
In addition to the Key Concepts described previously, the following regulations apply to the Career Ladder Process:

- An employee may not apply for advancement until s/he has satisfactorily completed the probationary period in their current position.

- Clinicians on the Career Ladder who transfer to another area cannot transfer to a higher level on the Career Ladder. It is an expectation that a clinician on the Career Ladder who transfers laterally to a different specialty area will exhibit all behaviors of their current clinician status within a 6-month period of the transfer.

- Clinicians who leave the Career Ladder (either for a non-ladder position at UVA or a position outside of UVA) may return to the ladder according to the following criteria:
  - If returning within 12 months:
    - At the discretion of the hiring manager, may return to the same level in the same practice area with no validation portfolio required.
    - At the discretion of the hiring manager, may return to the same level in a different practice area, with a validation portfolio required.
  - If returning more than 12 months after leaving the career ladder:
    - At the discretion of the hiring manager, may return to any level ladder position for which s/he is qualified in the same or different practice area with a validation portfolio required.

- A nurse without a BSN who is designated as a Clinician III on 4/15/2015 will continue as a Clinician III unless s/he leaves the Career Ladder for ≥ 12 months, in which case a BSN will be required for ladder re-entry.

Any case that falls outside of these regulations will be reviewed by the Career Ladder Committee. The Career Ladder Committee will make a recommendation for resolution to the Chief Nursing Officer. The final decision will be made by the CNO.
THE INFORMATION IN THE FOLLOWING SECTIONS DETAIL THE CAREER LADDER PROCESS FOR ADVANCEMENT, VALIDATION, AND RE-VALIDATION ACCORDING TO THE LEVEL BEING SOUGHT.

SECTION I: CLINICIAN I-IV CAREER LADDER PROCESS

Clinician I-IV Behavior Grid

Clinician I and II Career Ladder Processes
- Clinician I Probationary Requirements and mandatory advancement
- Clinician II Validation Process (for individuals hired/transferred into a Clinician II position)

Clinician III and IV Career Ladder Processes
- General Principles (Please Read Carefully)
- Clinician II to III and Clinician III to IV Advancement
- Clinician III and Clinician IV Validation (for individuals hired/transferred into a Clinician III or Clinician IV position)
Clinician I and Clinician II Process

At the Clinician I and Clinician II levels, the area manager is responsible for advancement and validation decisions. Copies of submitted materials are kept in the employee’s local file and should not be submitted to the PNSO office. The area manager is responsible for notifying Human Resources of Advancement and Validation decisions.

CLINICIAN I: PROBATIONARY REQUIREMENTS AND MANDATORY ADVANCEMENT

Clinician I positions are the level into which all new graduates are employed, and may be made available to clinicians returning to practice, or returning to practice in a tertiary setting. Like all new employees, a Clinician I must successfully complete a probationary period to remain employed with the Health System. For Clinician Is, the probationary period is 12 months. During that time all probationary requirements must be completed and the Clinician I must advance to Clinician II. If the clinician’s performance is determined to be below proficient by the 12th month of employment, the employee will be terminated.

Satisfactory completion of probation is determined by:

- Successful completion of orientation objectives within 6 months of hire
- Successful completion of the Nurse Residency Program (NRP)
- Submission of an advancement packet to the area manager that documents emerging Clinician II behaviors at 9 months after hire (see below).
- Demonstrated competency at the Clinician II level within 12 months of hire.

The Clinician I to Clinician II advancement packet must include:

- Checklist
- Curriculum vitae
- Certificate of Completion of NRP
- Clinician II Assessment Tool: The Clinician II Assessment Tool asks the clinician to evaluate their practice as it relates to each of the Clinician II Career Ladder behaviors. The Assessment Tool is submitted electronically to the Manager, who adds comments and reviews the tool with the clinician. A Professional Plan for Growth is developed by the manager and clinician.

Advancements of employees from Clinician I to Clinician II will be effective on the first day of the pay period following the manager’s decision to support advancement.

CLINICIAN II EXTERNAL HIRES/INTERNAL TRANSFERS FROM NON-LADDER POSITIONS: VALIDATION PROCESS

External hires for Clinician II positions and internal transfers from non-ladder positions into a Clinician II position must submit a validation packet to the hiring manager 5 months following the official start date. The validation packet must include:

- Checklist
- Curriculum vitae
- Clinician II Assessment Tool: The Clinician II Assessment Tool asks the clinician to evaluate their practice as it relates to each of the Clinician II Career Ladder behaviors. The Assessment Tool is submitted electronically to the Manager, who adds comments and reviews the tool with the clinician. A Professional Plan for Growth is developed by the manager and clinician.

At the end of the 6 month probationary period, the manager will evaluate the employee. Satisfactory completion of probation is determined by successful completion of orientation objectives and
demonstrated competency at the Clinician II level, as described in the CV and Clinician II Assessment Tool.

Clinician III and Clinician IV Process

The information in this section applies to:
- Clinician IIs applying for Advancement to Clinician III
- Clinician IIIs applying for Advancement to Clinician IV
- Nurses newly hired into Clinician III or IV positions
- Internal Transfers from Non-Ladder positions into Clinician III or IV positions
- Current Clinician IVs who are Revalidating at the Clinician IV level

About the Clinician III/IV Panels
At the Clinician III and Clinician IV levels, eight Clinician III/IV Panels, empowered by the Nursing Cabinet and the Chief Nursing Officer, are responsible for Career Ladder processes.

Oversight
- The Clinician III/IV Ladder Chair provides oversight and coordination of the ladder process for Clinician III-IV roles, as well as brokering any appeals. S/he is not generally a participating member of any of the eight panels, but instead guides the eight individual Panel Chairs.
- The eight panels each have a Chair, as described below. One of these eight chairs is also appointed as the Clinician III/IV Ladder Vice-Chair, in preparation for assuming the chair role the following year.
- The Chair and Vice-Chair of the Clinician III/IV Ladder, together with the Chair/Vice-Chair of the APN Panel and the Dean of the School of Nursing, comprise the Career Ladder Committee which steers the overall development of the career ladder.

Each of the eight Clinician III/IV Panels Includes:
- 1 Chair – a Clinician IV, appointed by the Nursing Cabinet
- 1 Medical Center Manager – appointed by the Nursing Cabinet
- 2 Clinician IIIs – from a variety of regions, appointed by the Clinician III/IV Ladder Chair

Three of the eight panels have an additional Clinician IV member, appointed by the Clinician III/IV Ladder Chair. These three panels will be responsible for reviewing all candidates for Clinician IV advancement, validation, and re-validation.

Members serve a minimum of a 2 year term, with no more than half the membership rotating off at one time. All Career Ladder Panel terms start in February.

Current panelists are prohibited from providing peer reviews or portfolio/interview mentorship for Career Ladder Advancement or Validation during their terms. Exemption may be requested for exceptions for special circumstances (for example, a limited number of RN staff in the practice setting). All exemptions must be approved by the Clinician III/IV Ladder Chair, and must be requested at least 2 weeks prior to the portfolio due date.
Advancement and Validation Process:
Clinician II to III and Clinician III to IV

**GENERAL PRINCIPLES AND REGULATIONS: PLEASE READ CAREFULLY**

These general principles apply to the Clinician III and IV advancement and validation process:

- **Deadlines are strictly followed, with materials due by 5 p.m. on the designated due date. If the due date falls on a weekend or holiday, the deadline for submission is 5 p.m. on the next business day.**
- **Late submissions will not be accepted. Advancement candidates who fail to meet established deadlines may re-submit during the next advancement cycle. Validation candidates who fail to meet established deadlines will receive communication from the Clinician III/IV chair copied to their manager and will need to discuss their options with their manager.**
- **Submission of an on-line Notice of Intent form is the first step in the process. Upon submission of the NOI form, the computer should display a message indicating that the form was successfully submitted. If you do not receive a confirmation message, please send an email to PNSO@virginia.edu immediately.**
- **Applicants who submit a Notice of Intent, and later decide to withdraw it, are asked to notify the PNSO office via email (PNSO@virginia.edu) so that the Panel will not expect your portfolio.**
- **All materials must be submitted online, using the Clinical Career Ladder Portfolio Submission form located at https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm. The level-appropriate Checklist from the Handbook guides what materials are required to be posted. Materials must be posted no later than 5pm of the deadline date; and no earlier than 90 days before deadline (both to ensure materials reflect your current practice, and to avoid confusion with or accidental deletion during another portfolio review cycle).**
- **The Panel will reject incomplete portfolios without additional review.**
- **Certain portfolio components (manager letter, peer reviews) require dates and signatures. If these documents are not dated and signed, the portfolio will be rejected by the panel. To preserve the signature, these items must be scanned from hardcopy. Scanners are available at the HS Library and the PNSO Office.**
- **Current panelists are prohibited from providing peer reviews or portfolio/interview mentorship for Career Ladder Advancement or Validation during their terms. (Exemption: Requests for exceptions due to extenuating circumstances because of a limited number of RN staff in the practice setting will be considered).**
- **Applicants are strongly encouraged to keep a copy of their entire portfolio as an emergency backup, and as a reference for interview preparation.**
- **It is the applicant’s responsibility to ensure the portfolio’s delivery in compliance with the stated guidelines. If you have any questions or concerns, contact the PNSO Support Office by phone 924-9357 or email PNSO@virginia.edu. Please plan ahead, before the deadline as much as possible – the very high volume of queries on the deadline date can make it difficult to connect with PNSO Support staff.**
- **E-mail is used as a primary method of communication between the PNSO support office, the Career Ladder Panels, and applicants. All applicants are expected to review and respond to emails promptly.**
- **In general, notifications related to Career Ladder decisions are sent via email to the candidate’s UVAHS email account. Copies are also sent to the applicant’s manager, Panel Resource, Panel Chair, and Ladder Chair. Expect an email to be sent on at least these occasions: the assignment of a portfolio to a specific panel for review; information regarding interviews (which requires an RSVP); and the final decision to advance/validate/revalidate. The email includes both a hyperlink which goes to the candidate’s web-based portfolio record, and a summary of “what’s new” to be reviewed.**
within that record. A candidate may also check his/her web-based portfolio record at any time during the process to check whether new information has been posted.

- Dates for Panel Assignment and Interview notifications vary significantly across panels. The PNSO Calendar advertises the dates on which Final Decisions are published (usually 5/31 and 12/1 for advancement); due to the volume of letters to be sent, the email may arrive at any time on that date.
- Candidates for advancement who do not advance may file an appeal if they have evidence that the advancement process was not followed correctly. Appeals must be based on the panel’s failure to adhere to the established process for candidate evaluation, and not on the panel’s decision regarding advancement.

A survey will be emailed to both successful and unsuccessful applicants to collect feedback on career ladder processes; feedback will be both anonymous and confidential. Survey data will be reviewed by the Career Ladder Committee and PNSO leadership to evaluate potential process improvements.
TIMELINE FOR SUBMISSION: INTERNAL CANDIDATES FOR ADVANCEMENT FROM CLINICIAN II TO III AND CLINICIAN III TO IV

Advancement from Clinician II to Clinician III, and from Clinician III to Clinician IV is offered twice a year, according to the following deadlines.

<table>
<thead>
<tr>
<th>Spring Deadline</th>
<th>Fall Deadline</th>
<th>Process Step</th>
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<tbody>
<tr>
<td>3/15</td>
<td>9/15</td>
<td>Notice of Intent to Advance web-form due to the PNSO Support Office.</td>
</tr>
<tr>
<td>4/1</td>
<td>10/1</td>
<td>Deadline by 5:00 pm for Portfolio to be submitted to the online webform at <a href="https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm">https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm</a>. Notification of Panel Assignment usually takes place within 5 days.</td>
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<tr>
<td>4/30 to 5/4 (dates are approximate)</td>
<td>10/29-11/2 (dates are approximate)</td>
<td>Timeframe in which interviews take place. Notification of interview schedule will be via e-mail, and requires a prompt RSVP.</td>
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<tr>
<td>5/31</td>
<td>11/30</td>
<td>Decisions regarding advancement emailed to candidates and submitted to Human Resources.</td>
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<tr>
<td>6/1 (or next pay period)</td>
<td>12/1 (or next pay period)</td>
<td>Effective date of advancement. If 6/1 or 12/1 is not the first day of a pay period, the effective date will be the first day of the first pay period following that date.</td>
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TIMELINE FOR SUBMISSION: CLINICIAN III AND CLINICIAN IV EXTERNAL HIRES/INTERNAL TRANSFERS FROM NON-LADDER POSITIONS

The table below describes the deadline for submission of validation portfolios for external hires and internal applicants (currently in non-ladder positions) for whom a validation portfolio is required (see guidelines under Career Ladder Regulations – [click here](https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm)). A Notice of Intent must be submitted indicating which portfolio submission deadline option is chosen.

<table>
<thead>
<tr>
<th>Hire Date</th>
<th>Portfolio Due (First Option)</th>
<th>Portfolio Due (Second Option)</th>
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<tbody>
<tr>
<td>January 1st to March 30th</td>
<td>July 1 (NOI due June 15)</td>
<td>October 1 (NOI due September 15)</td>
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<tr>
<td>April 1st to June 30th</td>
<td>October 1 (NOI due September 15)</td>
<td>January 2 (NOI due December 15)</td>
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<tr>
<td>July 1st to September 30th</td>
<td>January 2 (NOI due December 15)</td>
<td>April 1(NOI due March 15)</td>
</tr>
<tr>
<td>October 1st to December 31st</td>
<td>April 1 (NOI due March 15)</td>
<td>July 1(NOI due June 15)</td>
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STEP BY STEP PROCESS FOR CLINICIAN III AND CLINICIAN IV ADVANCEMENT AND VALIDATION

STEP 1: Submit a notice of intent (NOI) to advance according to the schedule noted above. Use the link below:
http://www.healthsystem.virginia.edu/pub/pnso/web-forms/notice-of-intent

STEP 2: Assemble your portfolio.
Applicants for advancement must submit a portfolio that addresses the behaviors established for the higher level position. A portfolio is an organized collection of documents which supports and expands an individual's curriculum vitae. It demonstrates the quality and extent of the clinician’s work (clinical, leadership, and professional behaviors).

The following information is required and must be submitted in the following order:

1. **Checklist (Clinician III/IV Advancement) | Checklist (Clinician III/Validation)**
2. **Cover Letter** - Must be dated and signed
3. **Curriculum Vitae**
4. **Copy of Specialty Certification (Clinician IV only)**
5. **Performance Appraisal** – a copy of the most recent performance appraisal printed from the Employee Self-Serve system. (Performance Evaluations do not require a hand-signature, but you should ensure the copy you obtain from the Employee Self-Serve is listed as "Status: Completed & Approval: Approved" which means your manager has officially authorized it. There is a printer icon as you view it in Employee Self-Serve; this opens a PDF version. Instead of printing and re-scanning, you can just Save As to your normal file storage location, and then upload it along with your other portfolio documents.)
   
   **Note:** For external hire candidates who have not completed a full performance cycle, the Manager Letter (below) must reflect specific feedback on your probationary performance.
7. **Self-Evaluation** – Must be in narrative form and should address each of the ladder behaviors: Clinical Behaviors, Leadership/Teamwork/Collaboration, Communication, Problem-Solving, Knowledge Development/Professional behaviors, Scholarly Activities, and Customer Service/Marketing.
8. **Peer Reviews** – Three peer reviews must be completed for the portfolio. Peer review by nursing colleagues is expected. Interdisciplinary peer review is acceptable but should add to the Panel’s understanding of how the applicant demonstrates next-level behaviors. The peer reviews must be recent (within the past 3 months) and should be written in narrative format. All peer reviews are shared with the applicant and then included for submission with the portfolio. All peer reviews must be dated and hand-signed (a typed signature is not acceptable).
9. **Medical Center Manager letter of support** – This is a templated letter which addresses the applicant's clinical skills, leadership, and professional development. The template MUST be used. The letter must be shared with the applicant and include a recommendation for or against advancement. The letter must be recent (within the past 3 months), dated, and hand-signed (a typed signature is not acceptable).

**Manager Letter of Support Template Clinician III Adv/Val**
**Manager Letter of Support Template Clinician IV Adv/Val**

10. **Medical Center Director/Administrator letter of support (Clinician IV only)** - This letter should be written in narrative format and support the ability of the clinician to meet the behaviors of the
role. The letter should provide specific examples which demonstrate the candidate’s competence in clinical skills, leadership, and professional development. The letter must be recent (within the past 3 months), dated, and hand-signed (a typed signature is not acceptable).

10. **Narrative Anecdotes (Exemplars)** - Two (2) narratives are required which describe situations in which the applicant demonstrated next level behaviors. One narrative MUST be clinically focused; the other may demonstrate another area of practice. The situations described must have occurred within the last 12 months. If supporting data is included, it should be specific to the Clinical Narrative and all names must be removed to protect confidentiality.

**STEP 3:** Make sure you have an electronic version of each of your portfolio components, so that you can submit them electronically. Most items you will have created electronically yourself, such as your Cover Letter, CV, Self-Evaluation, and Exemplars. Some items, such as your Performance Appraisal, can be downloaded and saved to your F:/ drive as a PDF. If you do not have an electronic copy of a component – or to preserve the hand-signature on a hard copy – use a scanner to create a PDF of those components [The HS Library and PNSO Office (McKim 2099) have scanners available; if you require assistance, please plan ahead of the deadline day, as scanner traffic can be very heavy on that date]. Be sure to retain a backup copy of each file, for your records.

**STEP 4:** Submit your portfolio to the PNSO Office by 5 p.m. on the due date by uploading all of the components listed on the Checklist into this web-based form.
[banner]
https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm

Detailed instructions for the web-based form are available here:

**STEP 5:** The portfolio will be reviewed by the Panel.
- Portfolios are assigned to one of the Clinician III/IV Panels for review. Once this takes place, your web-based portfolio record will be updated to show which Panel is reviewing your materials; you will receive an email notice to check your web-based record for further details (in the “Panelist Feedback and Decisions” section, “Which Panel Will Review My Portfolio?” will change from “To Be Determined” into one of the 8 panel names). Clinician III portfolios may be assigned to any panel; Clinician IV portfolios are assigned to a panel with two Clinician IV members. Assignments are random, and portfolios are reassigned to an impartial panel if it is discovered that a panelist has a conflict of interest.
- The Panel will receive the portfolio exactly as it was submitted by the candidate and will reject incomplete portfolios without additional review. Panel Members review the portfolio for evidence that the applicant is functioning at the clinical level for which s/he is applying, using the Clinician I-IV behavior grid to guide their review.

**STEP 6:** The Panel decides whether an interview will be granted, and notifies the candidate.
- Your web-based portfolio record will be updated with a link to a letter outlining your interview details; you will receive an email notice to check your web-based record (in the “Panelist Feedback and Decisions” section, look next to or below the “Interview Status” Browse button; click the hyperlink file name that appears there, to read your letter).
- A prompt RSVP is required to confirm your interview date and time.
- If there is consensus that the portfolio does not demonstrate a minimum of beginning behaviors at that level, the candidate is notified that they will not be interviewed.

**STEP 7:** Candidates are interviewed if criteria are met as described above.
The interview is based on assessment of the portfolio and serves as an opportunity to further discuss aspects of practice. If the portfolio meets minimum behaviors, Panel members interview the candidate.
Exhibit OO4.h
If the Panel reaches consensus that the candidate fully meets the behaviors for the level being sought, a
decision is made for advancement or validation.

STEP 8: The Panel communicates the decision.
• A recommendation regarding advancement or validation is made by panel consensus. A letter
supporting (or not supporting) advancement/validation will be provided for each applicant. Your
web-based portfolio record will be updated with a link to a letter outlining your Decision details; you
will receive an email notice to check your web-based record (in the “Panelist Feedback and
Decisions” section, look next to or below the “Final Decision” Browse button; click the hyperlinked
file name that appears there, to read your letter). This letter serves as the official documentation of
the outcome of the panel process. The PNSO Support Office notifies Human Resources of all panel
recommendations.

• A Panel member is assigned to each applicant as a resource for discussion of identified growth
areas and recommendations for professional development. It is through these discussions that the
panels can assist employees in their career planning and personal and professional development.
To protect the integrity of the appeals process, the Panel Chair cannot be assigned as the resource
for an unsuccessful candidate.

• Candidates who do not advance remain in their previous career ladder positions and may
reapply for advancement during a future advancement cycle. If an individual hired or transferred
(from a non-ladder position) into a Clinician III or Clinician IV position does not successfully validate
at the level at which they were hired, the area manager and Human Resources will be notified. The
clinician’s position may be reallocated to a lower level position, with the employee’s pay adjusted
downward. All clinicians who fail performance improvement counseling will be managed according
to Human Resources’ performance improvement guidelines and policies.

STEP 9: Ongoing evaluation of practice is provided.
All Career Ladder clinicians receive an annual Performance Appraisal that also validates their level of
practice. Performance is evaluated by the manager by comparing actual performance to performance
expectations based on the Job Description and the Career Ladder expectations therein. Self-evaluation
and peer reviews are incorporated into the performance evaluation process. Performance concerns are
addressed via standard Human Resources policies and procedures. This may include reallocation to a
lower level position on the ladder. Reallocation to a lower level position will result in the employee’s
pay being adjusted downward. In addition to the annual Performance Appraisal, Clinician IVs must
revalidate their practice with the Clinician III/IV Panel every 2 years.

PEER REVALIDATION PROCESS FOR CLINICIAN IVS
Clinician IV nurses must revalidate their practice with the Clinician III/IV Panel every 2 years according to
the following schedule:

<table>
<thead>
<tr>
<th>Birth Month</th>
<th>Date Revalidation Materials Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>January to June</td>
<td>April 1* by 5 pm</td>
</tr>
<tr>
<td>July to December</td>
<td>October 1* by 5 pm</td>
</tr>
</tbody>
</table>

If either of these dates falls on a weekend, the deadline will be 5:00 pm of the next business day.

Revalidation materials are required in the following order:
• Checklist
• Cover Letter
• Current curriculum vitae
• Copy of specialty certification
Exhibit OO4.h

- **Clinician IV Revalidation Assessment Tool**

You may wish to review the guidelines for completing these documents.

*Revalidation Review Process:*

1. Completed revalidation packets will be assigned to a Clinician III/IV Panel for review. If the Panel finds sufficient evidence of Clinician IV behaviors, the candidate is revalidated at the Clinician IV level and receives notification of the Panel decision.
2. If there are ANY concerns about the level of practice based on the written materials submitted, the panel will interview the clinician. If the interviewing panel members have no remaining concerns, the candidate is revalidated at the Clinician IV level and receives notification of the Panel decision.
3. If insufficient evidence to revalidate is determined, the candidate will be placed on a 6-month ‘ladder probationary period’. A mentor will be assigned to help the clinician establish appropriate goals. The clinician will be informed in writing of the need to resubmit their revalidation portfolio for the panel’s further consideration at the end of the 6 month ladder probationary period.
4. After review of the resubmitted portfolio, a decision regarding the clinician’s revalidation will be made by the panel in conjunction with the clinician’s mentor and the Chief Nursing Officer. This decision will be made based on progress documented by the revalidating clinician and may include an interview.
5. If there are no remaining concerns, the clinician will receive notice of revalidation.
6. If the Clinical Panel and the Chief Nursing Officer do not find sufficient support of Clinician IV behaviors to revalidate, the clinician will be reallocated to a Clinician III position.
7. Reallocation to a lower level position will result in the employee’s pay being adjusted downward.
Unsuccessful applicants may file an appeal if the process described in this handbook was violated. A panel decision not to advance a clinician does NOT constitute grounds for an appeal in the absence of a process violation.

The steps involved in filing an appeal are:

1. Applicant receives the decision letter as written notification of the Panel’s advancement decision.
2. Within **15 working days** of receiving written notification of Panel’s advancement decision, the applicant must contact his/her assigned Panel Resource.
3. A meeting with the Panel Resource is to occur at a mutually agreeable time, preferably within **10 working days** of initial contact with the resource. The purpose of this meeting is to clarify the Panel’s advancement decision as well as lend support to the applicant for goal setting.
4. If the applicant wishes to make an appeal based upon the applicant’s belief that the advancement process steps were incorrectly followed, the applicant is to contact the Panel Chair within **3 working days** from the date s/he met with the Panel Resource.
5. A meeting with the Panel Chair and the Panel Resource is to occur at a mutually agreeable time within **10 working days** of contact. The applicant should be prepared to discuss the reasons that s/he believes the PNSO Career Ladder process steps were incorrectly followed, using the portfolio materials originally presented to the Panel.
6. Within **5 working days**, the Panel Chair will issue a written summary of this meeting to the applicant* and the Clinician III/IV Ladder Chair.
7. If the applicant wishes to continue to appeal beyond this stage, the applicant must, within **3 working days** of receiving the written summary from the Panel Chair, contact the Clinician III/IV Ladder Chair with a formal letter of request.
8. Within **10 working days** of that contact, the Clinician III/IV Ladder Chair will review the original portfolio, the applicant’s letter of request for appeal, and the written summary from the Panel Chair, decide upon the appropriate action, and notify the applicant of the decision. It is not necessary for a meeting to take place. The Clinician III/IV Ladder Chair must confer with the Career Ladder Committee prior to making a final decision. The Clinician III/IV Ladder Chair will notify the applicant in writing* of the decision which may be either of the following:
   - Uphold the decision of the original Panel OR
   - Grant a new review of the original portfolio by a different Panel. The new review will be unbiased; there will be no consultation between the original panel and the newly assigned Panel. Portfolio review, and notifications regarding panel assignment, interview status and final decision, will take place via the web-based portfolio record as outlined above.
     - The newly assigned Panel will be notified of their assignment as soon as possible and not more than **5 working days** after the decision to grant a new review.
     - Upon review of the portfolio, the new Panel determines if a new interview will be granted. If an interview is granted, it will be conducted as soon as possible, in order to reach a prompt decision regarding the advancement appeal.
     - The decision from this Panel is final, and will be communicated to the applicant in writing.*
     - The Panel’s review and decision-making process must be completed within **14 working days** from the date the Ladder Chair notified the newly-assigned Panel.

* Copies of letters to the applicant will be sent to the applicant’s manager, director/administrator, panel resource, Panel chair, and Ladder chair.

There is no formal role for the applicant’s manager, director/administrator, or colleagues in this process. Their opportunity for input was through the portfolio. Contacts from anyone other than
Exhibit 004.h

the applicant regarding the appeals process will not be entertained.

This process will remain confidential and should be completed within **15 weeks (75 working days)** of the applicant receiving notification of the initial Panel’s advancement decision. Time frames will be strictly adhered to, unless extenuating circumstances exist, e.g., if individuals in the process are not available due to planned or emergent time off. In that case, revised time frames will be followed.
THE INFORMATION IN THE FOLLOWING SECTIONS DETAIL THE CAREER LADDER PROCESS FOR ADVANCEMENT, VALIDATION, AND RE-VALIDATION ACCORDING TO THE LEVEL BEING SOUGHT.

SECTION II: ADVANCED PRACTICE NURSE (APN) LADDER PROCESS

APN I-III BEHAVIOR GRID

APN LADDER PROCESSES

HIRES INTO APN POSITIONS
APN I TO II AND APN II TO III ADVANCEMENT
APN REVALIDATION (FOR APN I, II, AND III)
Advanced Practice Nurse (APN) Panel

**ABOUT THE ADVANCED PRACTICE NURSE (APN) PANEL**

The APN Panel, empowered by the Nursing Cabinet and the Chief Nursing Officer, is responsible for Career Ladder processes pertaining to the APN I, II, and III levels of practice.

The APN Panel Chair and Vice-Chair are always clinicians at the APN II or III level, appointed by the Executive Nursing Cabinet.

- The APN Panel Chair provides oversight and coordination of the ladder process for APN roles, as well as brokering any appeals.
- The APN Panel Vice-Chair has served on the Panel for at least one year before his/her appointment. The Vice-Chair assumes the role of Chair in the following year.

The Chair and Vice-Chair of the APN Panel, together with the Chair/Vice-Chair of the Clinician III/IV Ladder and the Dean of the School of Nursing, comprise the Career Ladder Committee which steers the overall development of the career ladder.

In addition to the Chair, APN Panel membership consists of the following, all of whom are appointed by the Executive Committee of the Nursing Cabinet:

- 2 APN IIIs
- 3 APN IIs
- 3 APN Is
- Dean of the School of Nursing

Members serve a minimum of a 2-year term, with no more than half the membership rotating off at one time. All APN Panel terms begin in January.

In addition to active participation in the advancement process, APN Panelist Partners work with administrators to provide ongoing re-validation of APN practice, and with administrators/Human Resources to review pre-hire portfolios for candidates for APN II and APN III positions.

Current panelists are prohibited from providing peer reviews or portfolio/interview mentorship for Career Ladder Advancement or Validation during their terms. (Exemption: Requests for exceptions due to extenuating circumstances because of a limited number of RN staff in the practice setting will be considered).
**APN I Roles:**
The APN I is the entry-level role of the Advanced Practice arm of the Clinical Career Ladder. All APN I positions are filled through a hiring process by the administrator. An employment application is submitted to Human Resources, and selected applicants are interviewed by the hiring administrator, who makes the hiring decision and negotiates the expectations of the role; a portfolio is not required.

**APN II or III Roles:**
In addition to an employment application submitted to Human Resources, applicants for APN II and APN III positions will also be required to submit a pre-hire portfolio to the Human Resources Nurse Recruiter. The HR Nurse Recruiter will coordinate prompt review of the portfolio by the hiring administrator and designated APN Panelist Partner for the hiring area, and will help guide the employment interview. The contents of the pre-hire portfolio should include:

- Cover Letter
- Current Curriculum Vitae
- Self-evaluation
- Two (2) exemplars (clinical narrative)
- Three (3) letters of recommendation

APNs hired into an APN II or III position must demonstrate proficiency at their level of practice by the end of the six-month probationary period. If a clinician’s performance is determined to be below proficient, the clinician’s position may be reallocated to a lower level position. All clinicians who fail performance improvement counseling will be managed according to Human Resources’ performance improvement guidelines and policies. Advanced Practice clinicians reallocated to a lower level position by human resources, who subsequently demonstrate and sustain proficiency as a result of performance counseling, may apply for advancement during a later advancement cycle. Proficiency must be demonstrated and sustained for at least 6 months following the completion of performance counseling to be eligible.

Ongoing validation of practice for all employees takes place as part of the annual performance appraisal process. In addition, APNs formally revalidate their level of practice every 2 years with the Advanced Practice Panel (see the Revalidation section below for details).
APN Advancement and Re-Validation Process

GENERAL PRINCIPLES AND REGULATIONS: PLEASE READ CAREFULLY

These general principles apply to the APN advancement process:

- Deadlines are strictly followed, with materials due by 5 p.m. on the designated due date. If the due date falls on a weekend or holiday, the deadline for submission is 5 p.m. on the next business day.
- Late submissions will not be accepted. Advancement candidates who fail to meet established deadlines may re-submit during the next advancement cycle. Re-validation candidates who fail to meet established deadlines will receive communication from the APN Panel chair copied to their administrator and will need to discuss their options with the administrator.
- Submission of an on-line Notice of Intent form is the first step in the process. Upon submission of the NOI form, the computer should display a message indicating that the form was successfully submitted. If you do not receive a confirmation message, please email PNSO@virginia.edu immediately.
- Applicants who submit a Notice of Intent, and later decide to withdraw it are asked to notify the PNSO Support Office via email (PNSO@virginia.edu) so that the Panel will not expect your portfolio.
- All materials must be submitted online, using the Clinical Career Ladder Portfolio Submission form located at https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm. The level-appropriate Checklist from the Handbook guides what materials are required to be posted. Materials must be posted no later than 5pm of the deadline date; and no earlier than 90 days before deadline (both to ensure materials reflect your current practice, and to avoid confusion with or accidental deletion during another portfolio review cycle).
- The Panel will reject incomplete portfolios without additional review.
- Certain portfolio components (manager letter, peer reviews) require dates and signatures. If these documents are not dated and signed, the portfolio will be rejected by the panel. To preserve the signature, these items must be scanned from hardcopy. Scanners are available at the HS Library and the PNSO Office.
- Current panelists are prohibited from providing peer reviews or portfolio/interview mentorship for Career Ladder Advancement or Validation during their terms. (Exemption: Requests for exceptions due to extenuating circumstances because of a limited number of RN staff in the practice setting will be considered).
- Applicants are strongly encouraged to keep a copy of their entire portfolio as an emergency back-up, and as a reference for interview preparation.
- It is the applicant’s responsibility to ensure the portfolio’s delivery in compliance with the stated guidelines. If you have any questions or concerns, contact the PNSO Support Office by phone 924-9357 or email PNSO@virginia.edu. Please plan ahead, before the deadline as much as possible – the very high volume of queries on the deadline date can make it difficult to connect with PNSO Support staff.
- E-mail is used as a primary method of communication between the PNSO support office, the Career Ladder Panels, and applicants. All applicants are expected to review and respond to emails promptly.
- In general, notifications related to Career Ladder decisions are sent via email to the candidate’s UVAHS email account. Copies are also sent to the applicant’s manager, Panel Resource, and Ladder Chair. Expect an email to be sent on at least these occasions: the assignment of a portfolio to a specific panel for review; information regarding interviews (which requires an RSVP); and the final decision to advance/revalidate. The email includes both a hyperlink which goes to the candidate’s web-based portfolio record, and a summary of “what’s new” to be reviewed within that record. A candidate may also check his/her web-based portfolio record at any time during the process to check whether new information has been posted.
Dates for notifications can vary significantly. The PNSO Calendar advertises the dates on which Final Decisions are published (usually 5/31 and 12/1 for advancement); due to the volume of letters to be sent, the email may arrive at any time on that date.

Candidates for advancement who do not advance may file an appeal if they have evidence that the advancement process was not followed correctly. Appeals must be based on the panel’s failure to adhere to the established process for candidate evaluation, and not on the panel’s decision regarding advancement.

A survey will be emailed to both successful and unsuccessful applicants to collect feedback on career ladder processes; feedback will be both anonymous and confidential. Survey data will be reviewed by the Career Ladder Committee and PNSO leadership to evaluate potential process improvements.

### ADVANCEMENT TIMELINE - APN II, APN III

Advancement to APN II or III is offered twice a year, according to the following deadlines:

<table>
<thead>
<tr>
<th>Spring Deadline</th>
<th>Fall Deadline</th>
<th>Process Step</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/15</td>
<td>9/15</td>
<td>Notice of Intent to Advance web-form due to the PNSO Support Office by 5:00pm.</td>
</tr>
<tr>
<td>4/1</td>
<td>10/1</td>
<td>Deadline by 5:00 pm for Portfolio to be submitted to the online webform at <a href="https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm">https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm</a>.</td>
</tr>
<tr>
<td>4/30 to 5/4</td>
<td>10/29-11/2</td>
<td>Timeframe in which interviews take place. Notification of interview schedule will be via e-mail, and requires a prompt RSVP.</td>
</tr>
<tr>
<td>5/31</td>
<td>11/30</td>
<td>Decisions regarding advancement emailed to candidates and submitted to Human Resources.</td>
</tr>
<tr>
<td>6/1 (or next pay period)</td>
<td>12/1 (or next pay period)</td>
<td>Effective date of advancement. If 6/1 or 12/1 is not the first day of a pay period, the effective date will be the first day of the first pay period following that date.</td>
</tr>
</tbody>
</table>

### STEP BY STEP ADVANCEMENT PROCESS FOR INTERNAL CANDIDATES FOR APN II AND APN III POSITIONS

**STEP 1:** Submit a notice of intent (NOI) according to the schedule noted above. [http://www.healthsystem.virginia.edu/pub/pnso/web-forms/notice-of-intent](http://www.healthsystem.virginia.edu/pub/pnso/web-forms/notice-of-intent)

**STEP 2:** Assemble your portfolio.

Applicants submit a portfolio that addresses the behaviors established for the higher level position. A portfolio is an organized collection of documents which supports and expands an individual’s curriculum vitae. It demonstrates the quality and extent of the clinician’s work (clinical, leadership, and professional behaviors).

The following information is required and should be submitted in the following order:

1. [Checklist](#)
2. [Cover Letter](#) – must be dated and signed
3. [Curriculum vitae](#)
4. **Self-evaluation** - the self-evaluation should include evidence that supports the behaviors of the level to which the APN seeks to advance. Also, a summary of outcomes achieved in the APN’s current advanced practice role, identification of the previous years’ goals and how they were addressed, and identification of current goals should all be included. Include your current APN Outcomes Assessment using the following template:  

5. **Performance appraisal** – a copy of the most recent performance appraisal, printed from the Employee Self-Serve system. (Performance Evaluations do not require a hand-signature, but you should ensure the copy you obtain from the Employee Self-Serve is listed as "Status: Completed & Approval: Approved" which means your manager has officially authorized it. There is a printer icon as you view it in Employee Self-Serve; this opens a PDF version. Instead of printing and re-scanning, you can just Save As to your normal file storage location, and then upload it along with your other portfolio documents.)

6. **Medical Center Director/Administrator letter of support** - This letter should support the ability of the clinician to meet the behaviors of the role to which the APN seeks to advance, and detail the clinician’s success in attaining the outcomes expectations negotiated for their current advanced practice role. The letter should provide specific examples which demonstrate the candidate’s clinical skills, leadership, and professional development. The letter must be recent (within the past 3 months), dated, and hand-signed (a typed signature is not acceptable).

7. **Peer Reviews** – Three (3) peer reviews must be completed for the portfolio. Peer review by APN colleagues and interdisciplinary peer review is encouraged. The peer reviews must be recent (within the past 3 months) and should be written in narrative format. All peer reviews should be shared with the applicant and then included for submission with the portfolio. All peer reviews must be dated and hand-signed (a typed signature is not acceptable).

8. **Narrative Anecdotes (Exemplars)** - Two (2) narratives are required which describe situations in which the applicant provided care consistent with the level being challenged. One narrative MUST be clinically focused; the other may demonstrate another area of practice. The situations described must have occurred within the last 12 months.

**STEP 3:** Make sure you have an electronic version of each of your portfolio components, so that you can submit them electronically. Most items you will have created electronically yourself, such as your Cover Letter, CV, Self-Evaluation, and Exemplars. Some items, such as your Performance Appraisal, can be downloaded and saved to your F:/ drive as a PDF. If you do not have an electronic copy of a component – or to preserve the hand-signature on a hard copy – use a scanner to create a PDF of those components [The HS Library and PNSO Office (McKim 2099) have scanners available; if you require assistance, please plan ahead of the deadline day, as scanner traffic can be very heavy on that date]. Be sure to retain a backup copy of each file, for your records.

**STEP 4:** Submit your portfolio to the PNSO Support Office by 5 p.m. on the due date by uploading all of the components listed on the Checklist into this web-based form.  
https://www.healthsystem.virginia.edu/pnso-careerladder/index.cfm

Detailed instructions for the web-based form are available here:  

**STEP 5:** The portfolio is reviewed by the Panel.  
Small teams of APN Panel members screen portfolios to see if they minimally meet APN behaviors at the level being challenged. Once this takes place, your web-based portfolio record will be updated to show that the APN Panel is reviewing your materials; you will receive an email notice that your web-

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5 Hand-signatures are required on Peer Reviews and Letters of Support, which usually means they must be scanned to PDF to retain the signature, before you can upload the document as part of your electronic portfolio. The HS Library and PNSO Office (McKim 2099) have scanners available; if you require assistance, please plan ahead of the deadline day, as scanner traffic can be very heavy on that date.
STEP 6: The Panel decides whether an interview will be granted, and notifies the candidate.

- Your web-based portfolio record will be updated with a link to a letter outlining your interview details; you will receive an email notice to check your web-based record (in the “Panelist Feedback and Decisions” section, look next to or below the “Interview Status” Browse button; click the hyperlinked file name that appears there, to read your letter).
- A prompt RSVP is required to confirm your interview date and time.
- If there is consensus that the portfolio does not meet the behaviors, the candidate is notified that they will not be interviewed.

STEP 7: Candidates are interviewed if criteria are met.

If the portfolio shows evidence of minimum behaviors, a team of Panel Members interviews the candidate. The interview is based on assessment of the portfolio and serves as an opportunity to further discuss aspects of practice. Recommendations from the interview are considered by the entire Panel and consensus reached. The Chief Nursing Officer reviews all panel decisions and will become involved in decision-making as needed at the request of the Chair.

STEP 8: The Panel communicates final decisions

Following review by the CNO, a letter supporting (or not supporting) advancement/revalidation will be provided for each applicant, with copies to the APN’s administrator and the Panel Resource. Your web-based portfolio record will be updated with a link to a letter outlining your Decision details; you will receive an email notice to check your web-based record (in the “Panelist Feedback and Decisions” section, look next to or below the “Final Decision” Browse button; click the hyperlinked file name that appears there, to read your letter). This letter serves as the official documentation of the outcome of the advancement challenge. The PNSO Support Office submits a list of advancement outcomes to Human Resources.

An APN Panel member will be assigned to the applicant as a resource to provide clarification regarding panel decisions. The Panel Chair cannot be assigned as the resource for an unsuccessful candidate to maintain the integrity of the appeals process.

STEP 9: Ongoing evaluation of practice is provided.

If an employee is advanced to a higher level position, a position description and outcomes expectations for the higher level position will be completed by the director/administrator and reviewed with the employee. A signed copy of the position description and performance plan must be kept in the employee’s competency file.

The annual performance appraisal provides an opportunity for the APN and supervising administrator to discuss the APNs ongoing ability to meet Career Ladder behaviors and progress towards identified outcomes. If the APN’s performance is determined to be below proficient, Human Resources’ performance improvement guidelines and policies will be followed, and the employee’s position may be reallocated to a lower level position. Reallocation to a lower level position will result in the employee’s pay being adjusted downward.

In addition to annual performance appraisal, APNs revalidate with the Advanced Practice Panel approximately every 2 years after the first year of APN practice at UVAHS (see below).
**PROCESS FOR ONGOING REVALIDATION OF PRACTICE FOR ALL APNs**

Revalidation decisions rely primarily on the input of the APN’s Administrator and the Panelist Partner for the region in which the APN practices, with review by the APN Panel Chair and the CNO. The Panelist Partner is a current member of the APN Panel and provides peer review of revalidation materials. In the event that additional review is needed, the full Panel will be convened to review the revalidation materials and/or interview the revalidating candidate.

No APN will be required to submit revalidation materials during the first year of practice at any given level on the APN Ladder. If an APN advances on the ladder, the advancement portfolio will serve as the revalidation packet if revalidation is scheduled within the next 12 months.

As noted in the tables below, for credentialed APNs, due dates for revalidation materials are roughly based on the credentialing packet deadline. For non-credentialed APNs, due dates are based on the date of birth.

<table>
<thead>
<tr>
<th>For Credentialed APNs:</th>
<th>For Non-Credentialed APNs:</th>
</tr>
</thead>
<tbody>
<tr>
<td>If your credentialing expiration date is...</td>
<td>Your revalidation materials are due by the preceding...</td>
</tr>
<tr>
<td>February 1st to April 30th</td>
<td>July 1st</td>
</tr>
<tr>
<td>May 1st to July 31st</td>
<td>October 1st</td>
</tr>
<tr>
<td>August 1st to October 31st</td>
<td>January 2nd</td>
</tr>
<tr>
<td>November 1 to January 31st</td>
<td>April 1st</td>
</tr>
<tr>
<td>If your Date of Birth is...</td>
<td>Your revalidation materials are due by the preceding...</td>
</tr>
<tr>
<td>2/1 – 4/30</td>
<td>7/1</td>
</tr>
<tr>
<td>5/1 – 7/31</td>
<td>10/1</td>
</tr>
<tr>
<td>8/1 – 10/31</td>
<td>1/2</td>
</tr>
<tr>
<td>11/1 – 1/31</td>
<td>4/1</td>
</tr>
</tbody>
</table>

*It is the individual clinician’s responsibility to track dates for revalidation.* An individualized schedule of revalidation dates is available on the PNSO website: [http://www.healthsystem.virginia.edu/pub/pnso/intranet/careerladder/apnladder/revalidation-schedule-for-2012-on.pdf](http://www.healthsystem.virginia.edu/pub/pnso/intranet/careerladder/apnladder/revalidation-schedule-for-2012-on.pdf)

**Revalidation materials are required in the following order:**
- Checklist
- **Cover letter** briefly summarizing clinical practice and contributions as an APN since last revalidation or advancement.
- Updated curriculum vitae
- **Outcomes Assessment** - a one to two page summary of progress towards the outcomes initiative(s) negotiated by the APN and their administrator since initial APN advancement or last revalidation. Previously initiated Outcomes templates can be updated and submitted to fulfill this requirement.
- **Medical Center Administrator/Director Letter** supporting the ability of the APN to meet current-level behaviors and detailing progress towards attaining negotiated outcomes. The APN and administrator/director should review this letter prior to submission. The letter must be recent (within the past 3 months), dated, and hand-signed (a typed signature is not acceptable).

**Step by Step Process for Revalidation Submission and Review:**
1. The APN updates his/her CV, completes/updates the Outcomes Assessment tool, and writes a brief cover letter following the guidelines noted above.
Exhibit O04.h

2. The Administrator/Director writes a letter addressing the APN's practice and discusses the letter content with the APN. The Administrator/Director provides the APN with a signed and dated copy of the letter for inclusion in the re-validation packet.

3. The APN submits their materials electronically via the web-based form by 5 p.m. on the due date. If the deadline falls on a weekend or holiday, the due date becomes 5 p.m. on the next business day. The assigned APN Panelist Partner reviews the materials. The Panelist Partner may contact the Administrator/Director to discuss re-validation decisions.

4. The APN Panelist Partner sends recommendations to the APN Panel Chair, who determines if any discrepancies exist that require review by the full APN Panel.

5. If review by the full APN Panel is required, the applicant may be asked to submit additional information or meet with Panel members.

6. The APN Panel Chair submits re-validation decisions to the CNO.

7. Within 45 days, the APN Panel Chair informs the APN and Administrator/Director of the final decision, reflecting the endorsement of the CNO. The Chair also sends a summary of the quarter's decisions to PNSO@virginia.edu.

If the Panel and the Chief Nursing Officer do not find sufficient support of behaviors to revalidate, the clinician may be reallocated to the next lower level on the APN ladder. Reallocation to a lower level position will result in the employee's pay being adjusted downward. All clinicians will be managed according to Human Resources' performance improvement guidelines and policies.
Appeals Process: APN Ladder

If an applicant has evidence that the process for advancement described in this handbook was violated, the applicant may file an appeal. A panel decision not to advance a clinician does NOT constitute grounds for an appeal in the absence of a process violation.

The steps involved in filing an appeal are:

1. Applicant receives written notification of the Panel’s advancement decision.
2. Within **15 working days** of receiving written notification of the Panel’s advancement decision, the applicant must contact his/her assigned Panel Resource.
3. A meeting with the Panel Resource is to occur at a mutually agreeable time, preferably within **10 working days** of initial contact with the resource. The purpose of this meeting is to clarify the Panel’s advancement decision as well as lend support to the applicant for goal setting.
4. If the applicant wishes to make an appeal based upon the applicant’s belief that the advancement process steps were incorrectly followed, the applicant is to contact the APN Panel Chair within **3 working days** from the date s/he met with the Panel Resource.
5. A meeting with the APN Panel Chair and the Panel Resource is to occur at a mutually agreeable time within **10 working days** of contact. The applicant should be prepared to discuss the reasons that s/he believes the PNSO Clinical Career Ladder process steps were incorrectly followed, using the portfolio materials originally presented to the Panel.
6. Within **5 working days**, the APN Panel Chair will issue a written summary of this meeting to the applicant, * the Advanced Practice Panel members, and the Chief Nursing Officer.
7. If the applicant wishes to continue to appeal beyond this stage, the applicant must, within **3 working days** of receiving the written summary from the APN Panel Chair, re-contact the APN Panel Chair with a formal letter of request.
8. Within **10 working days** of that contact, the Advanced Practice Panel Chair will decide upon the appropriate action. It is not necessary for a meeting to take place. The Advanced Practice Panel Chair must confer with the Chief Nursing Officer prior to making a final decision. The Advanced Practice Panel Chair will notify the applicant in writing* (within **10 working days**, as above) of the next step, which may be either of the following:
   a. Uphold the original decision of the Advanced Practice Panel.
   b. Grant a new review. Portfolio review, and *notifications regarding interview status and final decision, will take place via the web-based portfolio record as outlined above.
      i. Within **5 working days**, the Advanced Practice Panel Chair will re-submit the original portfolio to members of the Advanced Practice Panel for reconsideration, with a summary from the Advanced Practice Panel Chair of what career ladder processes were breached.
      ii. Upon review of the portfolio, the Advanced Practice Panel determines if a new interview will be granted. If an interview is granted, it will be conducted as soon as possible, in order to reach a prompt decision regarding the advancement appeal.
      iii. The decision from this Advanced Practice Panel review is final, and will be communicated to the applicant in writing.*
9. The Panel’s review and decision-making process must be completed within **14 working days** from the date the Advanced Practice Panel Chair notified the panel that a new review was needed.
   * Copies of letters to the applicant will be sent to the applicant’s director, administrator, and panel resource.

There is no formal role for the applicant’s director/administrator or colleagues in this process. Their opportunity for input was through the portfolio. Contacts other than from the applicant regarding the appeals process will not be entertained.
Exhibit OO4.h
This process will remain confidential and should be completed within 15 weeks (75 working days) of the applicant receiving notification of the Advanced Practice Panel’s initial advancement decision. Time frames will be strictly adhered to, unless extenuating circumstances exist, e.g., if individuals in the process are not available due to planned or emergent time off. In that case, revised time frames will be followed.
APPENDIX A: Clinician I through Clinician IV Behaviors
APPENDIX B: APN 1 through APN 3 Behaviors
APPENDIX C: Advancement Portfolio Checklist – Clinician I to Clinician II
APPENDIX D: Validation Portfolio Checklist – Clinician II
APPENDIX E: Advancement Portfolio Checklist – Clinician II to III, and Clinician III to IV
APPENDIX F: Validation Portfolio Checklist – Clinician III and Clinician IV
APPENDIX G: Advancement Portfolio Checklist – APN I to APN II AND APN II to APN III
APPENDIX H: Pre-hire Portfolio Checklist – APN II and APN III
APPENDIX I: Revalidation Portfolio Checklist – Clinician IV
APPENDIX J: Revalidation Portfolio Checklist - APN
## Career Ladder Behaviors

### Clinician I, Clinician II, Clinician III, Clinician IV Behaviors

<table>
<thead>
<tr>
<th>Summary Statement</th>
<th>Clinician I</th>
<th>Clinician II</th>
<th>Clinician III</th>
<th>Clinician IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Entry-level professional nurse, focused primarily on developing knowledge and skills. Provides safe patient care at a basic level and shows growth in ability to care for increasingly complex patients. Requires consultation with more experienced clinicians and benefits from feedback.</td>
<td>• Capable clinician, focused on expanding knowledge and skills. Consistently provides effective direct care, as part of the interdisciplinary team, to a variety of complex patients. Seeks as well as provides feedback for improved clinical practice. Assumes a beginning leadership role but seeks mentoring in this process.</td>
<td>• An experienced and highly skilled clinician who is recognized for knowledge and skills by their peers. Utilizes an interdisciplinary approach to patient care service delivery across the continuum of care. Has an emerging leadership style and functions consistently and autonomously in this role. Is learning to negotiate the health care system to maximize the delivery of quality care and to minimize cost of patient care services.</td>
<td>• Baccalaureate in Nursing prepared, clinician with well-developed clinical expertise within a defined specialty, recognized by peers as a leader within the institution. Works predominately with patients, families and nursing staff. Has aggregate responsibility at the region level for nursing care, incorporating current literature and research. Identifies the strengths within the service area and takes the opportunity to develop and or mentor others to promote professional growth and improve patient outcomes. Has demonstrated expertise in chosen scholarly activities focused towards the advancement or promotion of the profession.</td>
<td></td>
</tr>
<tr>
<td>Clinical Behaviors</td>
<td>Clinician I</td>
<td>Clinician II</td>
<td>Clinician III</td>
<td>Clinician IV</td>
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<tr>
<td></td>
<td>• Consistently delivers safe and appropriate patient care to a specific patient population, using the nursing process. • Demonstrates basic assessment skills. • Plans patient care based on assessment, validated by peers. • Implements well-defined interventions and standards of care. • Evaluates patient’s response to nursing interventions. • Beginning awareness of outcomes with regard to patient care delivery. • Accurately documents the components of the nursing process.</td>
<td>• Consistently and independently prioritizes and delivers dependable and effective patient care in a variety of patient situations, from common to complex, using the nursing process. • Demonstrates refined assessment skills, integrating appropriate data sources. • Plans individualized patient care. • Implements plans to address immediate care needs. • Evaluates patient’s response to interventions, adjusting plan of care accordingly. • Accurately documents the components of the nursing process, in a timely manner. • Manages time effectively.</td>
<td>• Experienced clinician who consistently provides comprehensive care to complex patients, using the nursing/problem-solving process. • Demonstrates advanced assessment skills. • Plans individualized care in collaboration with the interdisciplinary team. • Implements a plan to address short and long term care needs. • Evaluates and expeditiously alters the plan of care. • Documents precisely the components of the nursing/problem-solving process and relevant interventions. • Communicates effectively to achieve patient outcomes in a timely manner.</td>
<td>• Clinician within defined specialty who works predominantly with patients, families, and nursing staff to provide direct care. • Demonstrates a well-developed expertise in assessment skills of patients and processes of care delivery. • Evaluates and works to improve the process of patient care delivery within the unit and region. • Promotes evidenced based practice within area of specialty.</td>
</tr>
<tr>
<td>Leadership Teamwork Collaboration</td>
<td>Clinician I</td>
<td>Clinician II</td>
<td>Clinician III</td>
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<tr>
<td><strong>Utilizes the interdisciplinary team as a resource in the development of individual plans of care.</strong></td>
<td><strong>Works effectively as a member of the interdisciplinary team.</strong></td>
<td><strong>Assumes a reliable leadership role, partnering within the practice setting.</strong></td>
<td><strong>Demonstrates a self-directed interdisciplinary leadership style:</strong></td>
<td><strong>Demonstrates a self-directed interdisciplinary leadership style:</strong></td>
</tr>
<tr>
<td><strong>Delegates appropriately</strong></td>
<td><strong>Assumes a developing leadership role.</strong></td>
<td><strong>Seeks ways to identify and improve the quality of patient care.</strong></td>
<td><strong>Actively fosters growth and development of leadership skills in others</strong></td>
<td><strong>Actively fosters growth and development of leadership skills in others</strong></td>
</tr>
<tr>
<td><strong>Consults appropriately to interdisciplinary peers.</strong></td>
<td><strong>Precepts and supports the development of newly employed staff and students.</strong></td>
<td><strong>Assists with evaluation of patient care outcomes.</strong></td>
<td><strong>Critically evaluates and initiates changes within the region to improve overall patient outcomes</strong></td>
<td><strong>Critically evaluates and initiates changes within the region to improve overall patient outcomes</strong></td>
</tr>
<tr>
<td><strong>Evaluates the effectiveness of their delegation.</strong></td>
<td><strong>Evaluates the effectiveness of their delegation.</strong></td>
<td><strong>Explores ways to improve the use of human and material resources.</strong></td>
<td><strong>Effectively utilizes human and material resources to improve systems</strong></td>
<td><strong>Effectively utilizes human and material resources to improve systems</strong></td>
</tr>
<tr>
<td><strong>Actively participates in practice setting management (performance improvement, projects, committees, etc.).</strong></td>
<td><strong>Actively participates in practice setting management (performance improvement, projects, committees, etc.).</strong></td>
<td><strong>Assists others to manage time effectively.</strong></td>
<td><strong>Role models professional practice</strong></td>
<td><strong>Role models professional practice</strong></td>
</tr>
<tr>
<td><strong>Uses human and material resources in a responsible manner.</strong></td>
<td><strong>Uses human and material resources in a responsible manner.</strong></td>
<td><strong>Promotes cohesive team behavior amongst peers.</strong></td>
<td><strong>Maintains a dynamic clinical partnership with management</strong></td>
<td><strong>Maintains a dynamic clinical partnership with management</strong></td>
</tr>
</tbody>
</table>

Exhibit OO4.h
<table>
<thead>
<tr>
<th>Communication</th>
<th>Clinician I</th>
<th>Clinician II</th>
<th>Clinician III</th>
<th>Clinician IV</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Demonstrates respectful and effective communication with patients, families, and colleagues.</td>
<td>• Communicates clearly and effectively, both orally and in writing.</td>
<td>• Reduces barriers to facilitate communication.</td>
<td>• Demonstrates &amp; role models expert communication skills by example.</td>
<td>• Demonstrates respectful and effective communication with patients, families, and colleagues.</td>
</tr>
<tr>
<td></td>
<td>• Identifies barriers to communication and seeks assistance in facilitating communication.</td>
<td>• Role models effective listening skills.</td>
<td>• Is articulate orally and in writing.</td>
<td>• Identifies conflict and resolves conflict with assistance.</td>
</tr>
<tr>
<td></td>
<td>• Identifies conflict and resolves conflict with assistance.</td>
<td>• Demonstrates proficient and timely conflict management skills, working proactively to resolve unit concerns.</td>
<td>• Desire to hear and understand another's point of view.</td>
<td>• Demonstrates effective communication between nursing units, within the service area, and institutionally.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Demonstrates effective communication between nursing units, within the service area, and institutionally.</td>
<td>• Facilitates effective communication among individuals and groups.</td>
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<tr>
<td>Problem Solving</td>
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<tr>
<td><strong>Clinician I</strong></td>
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<tr>
<td>• Utilizes the nursing organization as resource for discipline-specific issues and needs.</td>
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<tr>
<td>• Developing an emerging awareness of ethical issues and how they relate to clinical practice.</td>
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<tr>
<td><strong>Clinician II</strong></td>
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<tr>
<td>• Identifies systems issues, bringing them to the attention of appropriate leaders, in a timely manner. May participate in issue resolution.</td>
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<tr>
<td>• Identifies ethical issues in the practice setting and brings them to the attention of other team members.</td>
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<td><strong>Clinician III</strong></td>
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<tr>
<td>• Solicits and offers feedback on patient concerns and practice setting issues and assists peers to do the same.</td>
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<tr>
<td>• Identifies and participates in resolution of system issues.</td>
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<tr>
<td>• Identifies ethical issues in the practice setting and participates in resolution.</td>
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<td><strong>Clinician IV</strong></td>
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<tr>
<td>• Assumes a leadership role in the resolution of systems issues.</td>
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<tr>
<td>• Develops creative approaches and solutions.</td>
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<tr>
<td>• Collaborates with Interdisciplinary staff and delegates effectively.</td>
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<tr>
<td>• Motivates/mentors others.</td>
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<tr>
<td>• Facilitates ethical decision-making.</td>
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<tr>
<td>Knowledge Development and Professional Behaviors</td>
<td>Clinician I</td>
<td>Clinician II</td>
<td>Clinician III</td>
<td>Clinician IV</td>
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<tr>
<td>• Consistently solicits assistance and feedback regarding patient and practice setting issues.</td>
<td>• Solicits and offers feedback on patient concerns and practice setting issues.</td>
<td>• Accepts accountability for the professional development of self and peers, through mentorship, formal and informal staff education and evaluation.</td>
<td>• Actively seeks mentorship from seasoned clinicians, and identifies, initiates and collaborates to provide mentorship and needed educational programs</td>
<td>• Actively evaluates own practice utilizing feedback from others</td>
</tr>
<tr>
<td>• Integrates feedback into practice, assumes an emerging role in patient education.</td>
<td>• Accepts personal accountability for professional development.</td>
<td>• Coordinates clinical activities to effectively provide for patient education.</td>
<td>• Accountable for managing professional boundaries of self and counseling others in same</td>
<td>• Demonstrates current evidenced-based practice and disseminates information</td>
</tr>
<tr>
<td>• Accepts personal accountability for and demonstrates growth in learning basic knowledge and skills related to practice setting.</td>
<td>• Initiates and provides patient education.</td>
<td>• Contributes to resolution of discipline-specific issues at the unit/care site level utilizing the nursing organization.</td>
<td>• Provides leadership and support within the PNSO for resolution of discipline-specific issues at unit, region and health system levels.</td>
<td>• Instills, cultivates and contributes to the vision and strategic planning for the PNSO</td>
</tr>
<tr>
<td>• Demonstrates familiarity with the requirements of membership in the Professional Nursing Staff Organization. (PNSO)</td>
<td>• Participates within the nursing organization to identify and address discipline-specific issues and needs.</td>
<td>• Works with others to achieve and support the mission of the PNSO.</td>
<td>• Demonstrates professional commitment through involvement in professional organizations beyond the PNSO</td>
<td>• Routinely utilizes and shares information from national specialty associations.</td>
</tr>
<tr>
<td>Scholarly Activities</td>
<td>Clinician I</td>
<td>Clinician II</td>
<td>Clinician III</td>
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<td></td>
<td>• Begins to question care as it relates to evidence-based practice.</td>
<td>• Interested in further education. • Identification of clinical areas of interest • Pursuit of specialty knowledge.</td>
<td>• Partners with other clinician leaders to develop an emerging role in applying research findings to practice. • Questions clinical practice as it relates to research.</td>
<td>• Demonstrates expertise and interest in areas of scholarly pursuits such as research • Teaching or Publishing</td>
</tr>
<tr>
<td>Customer Service/Marketing</td>
<td>Clinician I</td>
<td>Clinician II</td>
<td>Clinician III</td>
<td>Clinician IV</td>
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<tr>
<td>• Recognizes and responds to opportunities to promote and market the UVA Health System and the nursing profession. • Recognizes patient satisfaction issues and adjusts patient care delivery accordingly when appropriate.</td>
<td>• Recognizes and responds to opportunities to enhance patient satisfaction.</td>
<td>• Analyzes and acts to resolve patient satisfaction issues. • Has emerging awareness of diverse customer base of Health System.</td>
<td>• Actively promotes a positive image of the UVA Health System and professional nursing and responds to opportunities to market the UVa Health System. • Anticipates patient/family needs and requirements: utilizes patient satisfaction feedback as a factor in designing patient care delivery. • Identifies and systematically addresses the needs of extended customers to improve satisfaction.</td>
<td></td>
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</tbody>
</table>
Advanced Practice Nursing (APN) Behaviors

**Advanced nursing practice is based on educational preparation (graduate degree in nursing), practice preparation (specialty certification) and core competencies. The nurse must be practicing in a specifically defined APN Role such as: Nurse Practitioner, Clinical Nurse Specialist.**

<table>
<thead>
<tr>
<th>Summary Statement</th>
<th>APN I</th>
<th>APN II</th>
<th>APN III</th>
</tr>
</thead>
<tbody>
<tr>
<td>Masters prepared nationally certified clinician who manages the care of a defined patient population as a dominant aspect of the role.</td>
<td>Masters prepared nationally certified clinician who manages the care of a defined patient population as a dominant aspect of the role.</td>
<td>Masters prepared nationally certified expert clinician and consultant who designs, implements, and evaluates creative approaches to patient care and patient care systems thereby contributing to the body of nursing knowledge through research and scholarly works.</td>
<td></td>
</tr>
<tr>
<td>Recognized as an interdisciplinary leader within the service area.</td>
<td>Recognized as an interdisciplinary leader within the service area and institution.</td>
<td>An interdisciplinary leader recognized within and beyond the institution.</td>
<td></td>
</tr>
<tr>
<td>Consistently demonstrates core competencies of advanced practice in a defined specialty:</td>
<td>Critically analyzes the health care delivery system and clinical outcomes to maximize the delivery of quality, cost effective patient care services.</td>
<td>Demonstrates expertise through scholarly work in a defined specialty.</td>
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</tr>
<tr>
<td>- Expert direct clinical practice</td>
<td>- Clinical and professional leadership</td>
<td>- Establishes a culture for quality patient care through coaching, guidance and mentorship of others.</td>
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<td>- Consultation</td>
<td>- Collaboration</td>
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<tr>
<td>- Research skills</td>
<td>- Ethical decision-making</td>
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<tr>
<td>- Expert coaching and guidance</td>
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<tr>
<td>Clinical Behaviors</td>
<td>APN I</td>
<td>APN II</td>
<td>APN III</td>
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<tr>
<td></td>
<td>• Manages the care for a defined patient population, using a holistic perspective, as a dominant aspect of the role.</td>
<td>• Demonstrates advanced clinical assessment, diagnostic reasoning and problem solving skills.</td>
<td>• Demonstrates expert clinical assessment, diagnostic reasoning and problem solving skills.</td>
</tr>
<tr>
<td></td>
<td>• Demonstrates APN-level clinical assessment, diagnostic reasoning and problem solving skills.</td>
<td>• Incorporates patient outcomes, system processes, and research evidence to guide practice.</td>
<td>• Designs, implements, and evaluates creative approaches to patient care and patient care systems.</td>
</tr>
<tr>
<td></td>
<td>• Forms therapeutic partnerships with patients and families to achieve desired patient outcomes.</td>
<td>• Uses various quality and cost effective approaches to manage health and illness.</td>
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</tr>
<tr>
<td></td>
<td>• Incorporates patient outcomes and research evidence to guide practice.</td>
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<tr>
<td></td>
<td>• Uses diverse approaches to health and illness management [including quality and cost effective approaches to manage health and illness]</td>
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<td></td>
<td>• Uses reflective practice.</td>
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<tr>
<td>Leadership Teamwork Collaboration</td>
<td>APN I</td>
<td>APN II</td>
<td>APN III</td>
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<tr>
<td>Demonstrates characteristics of effective collaboration in both intra- and interdisciplinary teamwork.</td>
<td>• Demonstrates characteristics of effective collaboration in both intra- and interdisciplinary teamwork.</td>
<td>• Demonstrates, promotes and develops characteristics of effective collaboration among members of the interdisciplinary team.</td>
<td>• Adopts an assertive interdisciplinary leadership style, partnering across the UVA Health System and beyond.</td>
</tr>
<tr>
<td>Critically evaluates and initiates changes within the practice setting to improve overall patient outcomes.</td>
<td>• Critically evaluates and initiates changes within the practice setting to improve overall patient outcomes.</td>
<td>• Adopts an assertive interdisciplinary leadership style within and across practice settings.</td>
<td>• Achieves positive outcomes through effective teamwork and mentorship.</td>
</tr>
<tr>
<td>Provides coaching or guidance to peers and interdisciplinary clinicians mentoring and empowerment to intra- and inter-disciplinary colleagues.</td>
<td>• Provides coaching or guidance to peers and interdisciplinary clinicians mentoring and empowerment to intra- and inter-disciplinary colleagues.</td>
<td>• Acts as a consultant to improve patient outcomes, enhance problem-solving resources, provide education, and/or develop the consultee.</td>
<td>• Creates new patient care systems and leads system change initiatives.</td>
</tr>
<tr>
<td>Acts as a change agent and partners to improve services and care delivery.</td>
<td>• Acts as a change agent and partners to improve services and care delivery.</td>
<td>• Effectively utilizes resources to improve systems.</td>
<td>• Mentors others including other disciplines to use collaborative processes.</td>
</tr>
<tr>
<td>Demonstrates advocacy for patients in health system and policy arenas.</td>
<td>• Demonstrates advocacy for patients in health system and policy arenas.</td>
<td>• Demonstrates coaching, guiding or mentorship behaviors through the development of others.</td>
<td>• Anticipates, plans for and facilitates change.</td>
</tr>
<tr>
<td></td>
<td>APN I</td>
<td>APN II</td>
<td>APN III</td>
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<tr>
<td>Communication</td>
<td>• Demonstrates highly effective skills in oral and written communication.</td>
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<td>same</td>
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<tr>
<td></td>
<td>• Networks with other professionals to remain current in practice and professional issues.</td>
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<tr>
<td></td>
<td>• Guides others in the development of effective oral and written communication skills.</td>
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</tbody>
</table>

Exhibit OO4.h
<table>
<thead>
<tr>
<th>Problem Solving</th>
<th>APN I</th>
<th>APN II</th>
<th>APN III</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>• Assumes a leadership role in the resolution of practice setting issues.</td>
<td>• Assumes a leadership role in the resolution of systems issues.</td>
<td>• Anticipates and prevents barriers to care through the facilitation of system changes.</td>
</tr>
<tr>
<td></td>
<td>• Applies action-oriented approach to problem solving, accepts associated risks with willingness to persevere as necessary.</td>
<td>• Facilitates ethical decision making within the team using select strategies.</td>
<td>• Guides others in the application of ethical decision making strategies to create an ethical practice environment.</td>
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<td></td>
<td>• Identifies ethical issues in the practice setting and initiates efforts toward resolution.</td>
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<td></td>
<td>APN I</td>
<td>APN II</td>
<td>APN III</td>
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<tr>
<td>Knowledge Development</td>
<td>• Expands and negotiates activities as related to scope of</td>
<td>• Provides leadership and support within the PNSO for resolution of</td>
<td>• Coaches others in balancing responsibilities.</td>
</tr>
<tr>
<td>and Professional</td>
<td>practice.</td>
<td>discipline-specific issues at practice setting and system levels.</td>
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</tr>
<tr>
<td>Behaviors</td>
<td>• Actively evaluates own practice.</td>
<td>• Instills, cultivates and contributes to the vision and strategic</td>
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<tr>
<td></td>
<td>• Actively seeks peer review/mentorship from experienced</td>
<td>planning for the PNSO.</td>
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<tr>
<td></td>
<td>clinicians.</td>
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<td></td>
<td>• Demonstrates interaction of technical, clinical and</td>
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<td>interpersonal competencies through self-reflection and in</td>
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<td></td>
<td>coaching and guiding staff and patients.</td>
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<td>• Develops and evaluates patient and staff education</td>
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<td></td>
<td>programs.</td>
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<td></td>
<td>• Works with others to achieve and support the mission of</td>
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<td></td>
<td>the PNSO.</td>
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<td>• Demonstrates professional commitment through involvement</td>
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<td></td>
<td>in professional organizations.</td>
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<tr>
<td>Scholarly Activities</td>
<td>APN I</td>
<td>APN II</td>
<td>APN III</td>
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<td></td>
<td>• Shares expertise with professional colleagues through a variety of forums.</td>
<td>• Advances specialty through a variety of forums (teaching, outcomes management, presentations, publications, research.)</td>
<td>• Initiates and disseminates research.</td>
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<td></td>
<td>• Applies current research to clinical practice setting.</td>
<td>• Assists others to incorporate research evidence into practice.</td>
<td>• Develops programmatic and/or departmental research utilization process.</td>
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<td>• Uses existing databases to evaluate nursing practice and patient outcomes.</td>
<td>• Leads the implementation of evaluation studies recognized for advancement of specialty.</td>
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<td>• Recognized as a teacher within the specialty.</td>
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<td>• Disseminates specialty knowledge through publications and presentations.</td>
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<tr>
<td>Customer Service/Marketing</td>
<td>APN I</td>
<td>APN II</td>
<td>APN III</td>
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<td></td>
<td>• Exhibits a positive image of the UVA Health System and professional nursing; participates in opportunities to market the UVa Health System.</td>
<td>same</td>
<td>same</td>
</tr>
<tr>
<td></td>
<td>• Anticipates diverse patient/family needs and requirements: uses patient satisfaction feedback as a factor in designing patient care delivery.</td>
<td></td>
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</tbody>
</table>

Exhibit OO4.h
Please check this list before submitting your advancement materials. Submit this checklist along with your advancement materials to the Unit Manager no later than the ninth month of employment.

Your Name ___________________________________________________________________________

Required Portfolio Contents – submit materials in the following order to your Manager:

- CURRICULUM VITAE
- CERTIFICATE OF COMPLETION OF NRP
- CLINICIAN II ASSESSMENT TOOL

If you agree to authorize the use of your advancement materials by the PNSO and/or UVA School of Nursing to illustrate excellence in nursing, please sign below:

Signature __________________________________ Date__________________________

Manager Use Only

Please notify Human Resources of the decision to support or not support advancement to the Clinician II level.

Please consider submitting outstanding submissions (CVs and Clinician II Assessment Tools) to the PNSO for use as noted above. All materials will be de-identified.
Please check this list before submitting your validation materials to ensure that all required information is included. Submit this checklist along with your materials to your Manager at the end of your fifth month of employment, as part of your Probationary Period requirements.

Your Name ___________________________________________________________________________

Required Portfolio Contents – submit materials in the following order to your Manager:
It is the Applicant’s responsibility to ensure that all required information is included.

☐ CURRICULUM VITAE

☐ CLINICIAN II ASSESSMENT TOOL

If you agree to authorize the use of your validation materials by the PNSO and/or UVA School of Nursing to illustrate excellence in nursing, please sign below:

Signature ___________________________ Date____________________________

Manager Use Only

Please consider submitting outstanding submissions (CVs and Clinician II Assessment Tools) to the PNSO for use as noted above. All materials will be de-identified.
Please check this list before submitting your portfolio to ensure that all required information is included. Submit this checklist along with your portfolio to the PNSO Support Office by 1700 on the applicable deadline.

Name: _____________________________________________________________________________
Work Phone: _____________________________ Home Phone________________________________
Home Address: ______________________________________________________________________
Manager’s name: _________________________
Director/Administrator’s name (Clinician IV Only): _________________________________________
Career Ladder Level Sought:  
☐ Clinician III  ☐ Clinician IV

Required Portfolio Contents – submit materials in the following order:
☐ This Checklist, completed
☐ Cover Letter (dated and signed)
☐ Curriculum Vitae
☐ Copy of Specialty Certification (Clinician IV only)
☐ Performance Appraisal – Must be a copy of the most recent performance appraisal.
☐ Self-Evaluation – Must be in narrative form and address each of the ladder behaviors
☐ Three Peer Reviews - Must be recent (within the past 3 months) and written in narrative format. All peer reviews must be dated and hand-signed.
☐ Letter From Medical Center Manager – Must use template, be written within the past 3 months, and be dated/hand-signed.
☐ Letter From Medical Center Director or Administrator (Clinician IV only), dated/hand-signed
☐ Two Narrative Anecdotes (Exemplars) – at least one must be clinical

It is the Applicant’s responsibility to ensure that all required information is included. If any information is missing (including dates and/or signatures), your portfolio will NOT be evaluated by the panel. Submit your portfolio electronically to the PNSO Support Office using the web-based form. After submission is complete, watch your UVA Health System email for Interview Notification.

If you agree to authorize the use of your portfolio, or any of its individual components by the PNSO and/or UVA School of Nursing to illustrate excellence in nursing, please sign below:

Signature _______________________________ Date _______________________________
VALIDATION PORTFOLIO CHECKLIST
For Clinician III AND Clinician IV positions

Please check this list before submitting your portfolio to ensure that all required information is included. Submit this checklist along with your portfolio to the PNSO Support Office by 1700 on the applicable deadline.

Name: _____________________________________________________________________________
Work Phone: _____________________________Home Phone________________________________
Home Address: _____________________________________________________________________
Manager’s name: _________________________
Director/Administrator’s name: __________________________

Career Ladder Level Being Validated: (check one)  □ Clinician III  □ Clinician IV

Required Portfolio Contents – submit materials in the following order:

☐ This Checklist, completed
☐ Cover Letter
☐ Curriculum Vitae
☐ Copy of Specialty Certification (Clinician IV Only)
☐ Performance Appraisal – Must be a copy of the most recent performance appraisal.
   Note: For external hire candidates who have not completed a full JDPA performance cycle, the
   Manager Letter (below) must reflect specific feedback on your probationary performance.
☐ Self-Evaluation – Must be in narrative form and address each of the ladder behaviors.
☐ Three Peer Reviews - Must be recent (within the past 3 months) and written in narrative format.
   All peer reviews must be dated and hand-signed.
☐ Letter From Medical Center Manager - Must use template, be written within the past 3 months,
   and be dated/hand-signed.
☐ Letter From Medical Center Director or Administrator (Clinician IV Only), dated/hand-signed
☐ Two Narrative Anecdotes (Exemplars) – At least one must be clinical.

It is the Applicant’s responsibility to ensure that all required information is included. If any information is missing (including dates and/or signatures), your portfolio will NOT be evaluated by the panel. Submit your portfolio electronically to the PNSO Support Office using the web-based form. After submission is complete, watch your UVA Health System email for Interview Notification.

If you agree to authorize the use of your portfolio, or any of its individual components by the PNSO and/or UVA School of Nursing to illustrate excellence in nursing, please sign below:

Signature ____________________________ Date ____________________________ UNIVERSITY OF
Please check this list before submitting your portfolio to ensure that all required information is included. Submit this checklist along with your portfolio to the PNSO Support Office by 1700 on the applicable deadline.

Name __________________________________________________________________________
Work Phone ___________________________ Home Phone __________________________________
Home Address _____________________________________________________________________
Manager’s name________________________ Administrator’s name _______________________
Career Ladder Level Sought: (check one)  □ APN II  □ APN III

Required Portfolio Contents – submit materials in the following order:
□ This Checklist, completed
□ Cover Letter
□ Curriculum Vitae
□ Performance Appraisal – Must be a copy of the most recent performance appraisal
□ Self-Evaluation – Must be in narrative form and address each of the ladder behaviors. Include a copy of your most recent APN Outcomes Assessment as part of the self-evaluation.
□ Three Peer Reviews - Must be recent (within the past 3 months) and written in narrative format. All peer reviews must be dated and hand-signed.
□ Letter From Medical Center Director or Administrator, dated and hand-signed
□ Two Narrative Anecdotes (Exemplars) – At least one must be clinical

It is the Applicant’s responsibility to ensure that all required information is included. If any information is missing (including dates and/or signatures), your portfolio will NOT be evaluated by the panel. Submit your portfolio electronically to the PNSO Support Office using the web-based form. After submission is complete, watch your UVA Health System email for Interview Notification.

If you agree to authorize the use of your portfolio, or any of its individual components by the PNSO and/or UVA School of Nursing to illustrate excellence in nursing, please sign below:

Signature __________________________________ Date ______________________________
UNIVERSITY OF VIRGINIA HEALTH SYSTEM PNSO | Career Ladder

PRE-HIRE PORTFOLIO CHECKLIST
For External Hires to APN 2 and APN 3

Provide this completed checklist to the HR Nurse Recruiter when you submit your portfolio:

Name ________________________________________________________________
Address ________________________________________________________________Work Phone________________________
Prospective Hiring Director or Administrator ________________________________________________________________
Prospective Hiring Area (unit, region, or service):

Career Ladder Level Sought: (check one)  ☐ APN II  ☐ APN III

Required Portfolio Contents – submit materials in the following order:
☐ Cover Letter
☐ Curriculum Vitae
☐ Self-Evaluation, including a summary of quality- or patient care-related outcomes impacted by your role in the past year
☐ Minimum Of 2 Narrative Anecdotes (Exemplars) – One Must Be Clinical
☐ Letters of Recommendation (3)

****It is the applicant’s responsibility to ensure that all required information is included. If any information is missing, your portfolio will NOT be forwarded for consideration.****

☐ Submit your complete portfolio to your nurse recruiter. The nurse recruiter will ensure that the portfolio is submitted to the PNSO Office. All applicants are encouraged to make and keep a complete copy of their portfolio for their own records. Following portfolio submission, you will be contacted by the Panel Chair to arrange interview times.

☐ Original portfolios will be returned via U.S. mail. If you would like to make other arrangements, please contact the PNSO Support Office at 434-924-9357.
Re-Validation Checklist
For Clinician IV

Please check this list before submitting your revalidation materials to ensure that all required information is included. Submit this checklist along with your materials to the PNSO Support Office by 1700 on the applicable deadline.

Name ____________________________________________________________________________

Work Phone _____________________________ Home Phone________________________________

Home Address ______________________________________________________________________

Manager’s name ________________________ Administrator’s name _________________________

Required Contents – submit materials in the following order:
It is the Applicant’s responsibility to ensure that all required information is included. If any information is missing (including dates and/or signatures), your materials will NOT be evaluated by the panel.

☐ This Checklist, completed
☐ Cover Letter
☐ Curriculum Vitae
☐ Copy of Specialty Certification
☐ Clinician IV Revalidation Assessment Tool

Submit your portfolio electronically to the PNSO Support Office using the web-based form. After submission is complete, watch your UVA Health System email for any important notifications.

If you agree to authorize the use of your re-validation materials or any of the individual components by the PNSO and/or UVA School of Nursing to illustrate excellence in nursing, please sign below:

Signature ___________________________ Date ___________________________
Please check this list before submitting your revalidation materials to ensure that all required information is included. Submit this checklist along with your materials via the PNSO Support Office by 1700 on the applicable deadline.

Name ____________________________________________________________________________

Work Phone _____________________________ Home Phone __________________________________

Home Address ______________________________________________________________________

Director’s name _________________________ Administrator’s name ___________________________

Clinical Ladder Level being Re-validated: ☐ APN I ☐ APN II ☐ APN III

Required Revalidation Materials – submit in the following order:
It is the Applicant’s responsibility to ensure that all required information is included. If any information is missing (including dates and/or signatures), your materials will NOT be reviewed.

☐ This Checklist, completed
☐ Cover Letter
☐ Curriculum Vitae
☐ Outcomes Assessment and Contributions
☐ Medical Center Director/Administrator Letter of Support, dated and hand-signed

Submit your portfolio electronically to the PNSO Support Office, using the web-based form. After submission is complete, watch your UVA Health System email for any important notifications.

If you agree to authorize the use of your revalidation materials or any of the individual components by the PNSO and/or UVA School of Nursing to illustrate excellence in nursing, please sign below:

Signature __________________________________ Date __________________________