

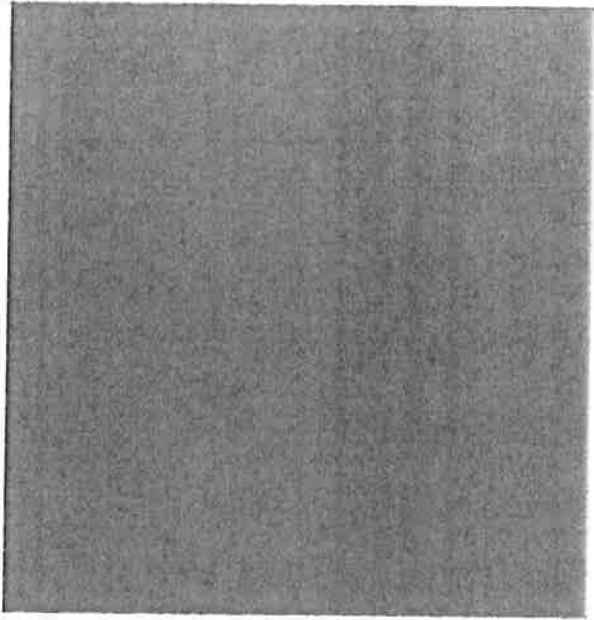


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RNPA Proposal 55, January 11, 2024 (revised)

DPNP Program

RNPA accepts the last County proposal from Nov/Dec 2022 - see attached.



**Distinguished Professional Nurse
Program (DPNP)
Santa Clara Valley Healthcare**




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Santa Clara Valley Healthcare

Distinguished Professional Nurse Program (DPNP)

GENERAL INFORMATION FOR NURSING STAFF

I. Philosophy

The **Distinguished Professional Nurse Program** (DPNP) promotes the life-long pursuit of expertise of the clinical nurse.

Santa Clara Valley Healthcare recognizes and rewards nurses who strive for excellence in the delivery of the highest quality of patient care, while demonstrating commitment to the profession of nursing.

The DPNP is based on the work of Dr. Patricia Benner. Dr. Patricia Benner identifies five (5) stages of academic knowledge applied in the nurse's clinical practice.

Evaluation of the nurse's performance is further measured by exemplars which are written illustrations of the nurse's performance. These exemplars represent the nurse's contribution to a patient's welfare, and they reflect the nurse's clinical knowledge.

As part of the evaluation of the nurse's professional development, Benner's seven (7) domains further indicate his or her competence (pages 14-15). These competencies within each domain are evaluated as met or not met and demonstrate to the nurse and their manager or mentor that knowledge and clinical application for each level is present.

A professional practice environment supports the registered nurse to practice autonomously to provide excellent quality and safe care. Nursing practice is evidence-based, innovative, applies critical thinking and advances the profession. Furthermore, it supports collaboration and collegiality to achieve optimal patient outcomes.

There are four key reasons for developing a professional practice model:

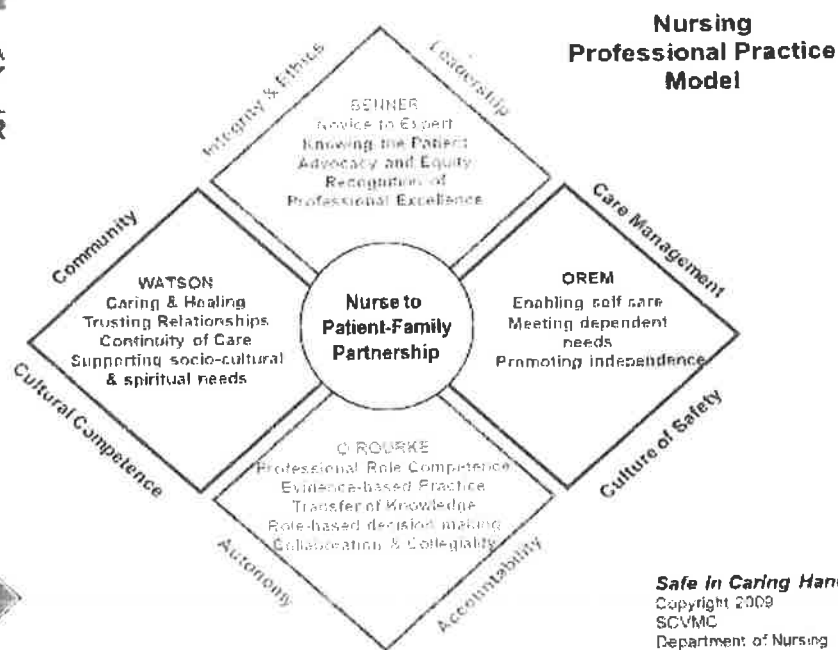
- To increase reliability of patient outcomes
- To set expectations and reduce variability in practice
- To count on each person's commitment to a common standard of practice
- To be a source of dialogue about practice, guiding policies and approaches to patient care situations.

Santa Clara Valley Healthcare's belief is that the nurse-patient relationship is central to exemplary professional nursing practice.

The professional nursing core values are:

- Caring and healing
- Advocacy and equity
- Autonomy and accountability
- Ethical practice and integrity

In 2009, Santa Clara Valley Medical Center's Department of Nursing developed a Professional Practice Model that embodies the practice of nursing. This model aligned with the core values of nursing then and holds true today and is described by four nursing theorists: Patricia Benner, Maria O'Rourke, Jean Watson and Dorothea Orem.



Patricia Benner

Seven Domains of Nursing (Benner, Patricia, *Novice to Expert*, 1984)

1. The helping role
2. The teaching-coaching function
3. The diagnostic and monitoring function
4. Effective management of rapidly changing situations
5. Administering and monitoring therapeutic interventions and regimens
6. Monitoring and ensuring the quality of health care practices
7. Organization and work-role competencies

Maria O'Rourke

According to O'Rourke, "...scope of practice and professional standards are the foundation for practice accountability and decision authority"...

Nursing practice is driven that "*the key principle of the professional practice model is that accountability for determining the patient's condition and directing care activities in relation to the patient's changing status is a professional role responsibility.*"

In nursing, the professional role that is responsible for managing the patient condition and determining the nature and extent of the clinical work to be carried out must maintain the position of leadership on the care team. Effective leadership and advocacy for quality patient care by the professionally practicing nurse will require a set of core competencies and professional behaviors outlined in the California Nurse Practice Act: Evidence based practice, self-directed decision making authority, transfer of information and providing care.

(Rebuilding a Professional Practice Model the Return of Role-based Practice Accountability, Maria Williams O'Rourke *Nursing Administration Quarterly*, Volume 27, No. 2 2003)

Jean Watson

Watson's curative model has six fundamentals:

- Uses scientific problem methods for decision making
- Promotes interpersonal teaching- learning
- Cultivates help-trusting relationships & instillation of faith-hope
- Science of Caring using interpersonal curative factors to meet human needs.
- The cultivation of sensitivity to one's self and others
- The promotion and acceptance of the expression of positive and negative feelings

Dorothea Orem

Orem in her theory of self-care describes three major components:

- Universal Self Care: meeting normal basic needs to maintain health and wellness
- Developmental Self Care: interventions/teachings to return person to or sustain a level of optimal health
- Health Deviation: when a health situation limits ability to maintain own health & wellness, healthcare is needed

II. Program Objectives

- a. Provide an opportunity for nurses to develop a career path while recognizing nurses who demonstrate excellence in practice
- b. Attract and retain high quality nursing staff resulting in improved patient outcomes
- c. Create an environment where nurses are empowered as a valued member of the healthcare team
- d. Demonstrate academic advancement, obtaining specialty certifications and increase participation in professional activities
- e. Develop standards and evaluate nursing practice based on evidence-based research
- f. Identify and develop leaders in the clinical staff
- g. Recognize expert nurses at the point of service
- h. Promote excellence in providing patient/family centered care
- i. Encourage lifelong learning through personal and professional development.
- j. Increase personal job satisfaction

III. Definition

Nurses earning the Distinguished Professional Nurse Program differential have an intuitive grasp of each situation and have the ability to zero in on the accurate region of the problem without wasteful consideration of a large range of unfruitful, alternative diagnoses and solutions.

IV. Components/Criteria Identified

The following components comprise the criteria for the DPNP:

- A. Qualifications
- B. Clinical Expertise
- C. Leadership/Professional Growth and Contribution
- D. Continuing Education
- E. Performance Appraisal

The criteria for the program are outlined in detail in the Summary Requirements.

V. Eligibility

- No nurse can be required to participate in the DPNP program offered.
- All coded Clinical Nurses in the RNPA represented bargaining unit are eligible to participate in the hospital's Distinguished Professional Nurse Program.
- All criteria must be met annually regardless of benefit status/hours worked. Annually shall be defined as within the 12 month period prior to the application due date, as provided in Sections VIII, IX, and X. A Distinguished Professional Nurse who has

been on an approved Leave of Absence, other than a personal leave, will have an additional period of time equal to the length of the leave to renew their participation in the program, up to six months after return from leave.

- Except as provided in Section XV below, nurses who have received an unfavorable or greater within the last 12 months are not eligible to apply or maintain status as an Distinguished Professional Nurse Program. At the next application period following twelve (12) months from the date of the unfavorable report, the nurse who meets all the other criteria may apply or reapply.

VI. Composition of the DPNP Panel

The Clinical Nurse Selection Panel (“Panel”) shall be composed of ten (10) voting members. Four (4) of the members shall be Clinical Nurses selected by RNPA. After the first year at least three (3) of whom shall be Distinguished Professional Nurse Program Nurses. The members appointed by RNPA shall be from at least three (3) of the four (4) regions. The four (4) regions are defined as (1) Valley Medical Center, (2) OCH, (3) SLRH and (4) Custody, Behavioral Health and/or ACHS. RNPA shall also select four (4) alternate Panel members. The alternate Panel members shall be from at least three (3) of the four (4) Regions. After the first year, of RNPA’s four (4) designated alternate Panel members, at least three (3) shall be Distinguished Nurse Practice Programs. If circumstances make an alternate from the same region unavailable for a particular Panel interview, the alternate replacing a Clinical Nurse Panel member may be from a different region as long as they are the same clinical nurse status or greater than the Panel member they replace.

The remaining six (6) members of the Panel shall be, Nurse Managers and/or including Nursing Directors, selected by the Hospital. The Hospital shall also designate four (4) alternate members of the Panel from the same categories. The Chief Nursing Officer (CNO) may participate in meetings, serve as an advisor, and contribute to discussions. The CNO shall be a non-voting member, except in the event of a tie vote. The CNO will be the tie-breaker.

There shall be 2 Co-Chairs of the Panel. The Co-Chair positions shall each rotate annually between a member appointed by the Hospital and a Clinical Nurse member. For all years after the first year, the Clinical Nurse members of the Panel will select who among them shall serve as Co-Chair and the Hospital-appointed members of the Panel will select who among them shall serve as Co-Chair during their rotations.

Appointments to the Panel shall be for a two-year period. Appointees to the Panel are not eligible for successive terms as a Panel member, but Panel members may be appointed to serve a successive term as an Alternate and an Alternate may be appointed to serve a successive term as a Panel member. In no event, however, may an appointee be appointed to serve more than two successive terms, whether as a Panel member or as an alternate. An appointee who has been appointed to serve two successive terms may be reappointed to a Panel or Alternate position after the lapse of an intervening full two-year term. If an alternate assumes the role of panel member, they will finish out the term of the person for

whom they are replacing. This does not preclude the alternate Panel member from seeking their own term but will not exceed four (4) years total.

VII. Initial application process for CNIII nurses to apply for Distinguished Professional Nurse Program differential:

It is the applicant's responsibility to notify their manager in advance of their intention to apply for the Distinguished Professional Nurse Program differential in a timely manner (in writing via email) at least 30 business days prior to the deadline for submitting the application packet), so that the manager can provide the appropriate support before the due date. For the purpose of this program, the manager is the manager in their chain of command who possess a registered nursing license, even though it may not be their direct manager/supervisor. It is the applicant's responsibility to present a complete application package with all required documentation to their manager no later than 10 business days prior to the deadline for submitting the application packet. The applicant is responsible for final submission of their portfolio to the Panel via email by the deadline (April 1 or October 1).

Copies of documentation must be retained by applicant for possible future verification of achievement.

- Application for Distinguished Professional Nurse Program is initiated by the nurse.
- Applicant will complete required forms including documentation to validate achievement of criteria.
- Application portfolios will be due to the Nurse Manager or to the Nursing Director, if the manager is not a nurse (herein after referred to jointly as "Nurse Manager") 10 business days prior to the application deadline
- DPNP application portfolio must be reviewed and approved or rejected by the Nurse Manager within ten (10) business days of its submission by the nurse. Once reviewed, the Nurse Manager will inform the applicant via email of their decision.
- The applicant submits their final portfolio to the Panel via email by the deadline (April 1 or October 1)
- The Panel meets to discuss the application.
- Applicant attends a Panel interview and presents their exemplars to all Panel members within 45 business days of the application due date.
- The Panel will determine if the applicant meets the criteria and can award achievement by an affirmative vote of no less than a majority (6 of the 10) Panel members. Any Panel member who is from the same unit as the applicant may recuse themselves from the discussion and consideration of that applicant. The Panel will notify the applicant of its decision by letter and e-mail within ten (10) business days. If the nurse is denied, a written explanation will be provided at the same time as the notification.
- No change will be made to the status of the nurse's differential until written notification of acceptance, or in the case of denial, until the appeal process is complete.
- If a Nurse is denied the Distinguished Professional Nurse Program differential by the Nurse Manager or Panel, they may exercise the appeal rights as set forth in Section XIII below.

VIII. Renewal Application Process – (Panel Year)

It is the applicant's responsibility to notify their manager in advance of their intention to apply for renewal of their clinical status differential in a timely manner (in writing via email) at least 30 business days prior to the deadline for submitting the application packet), so that the manager can provide the appropriate support before the due date. For the purpose of this program, the manager is the manager in their chain of command who possess a registered nursing license, even though it may not be their direct manager/supervisor. It is the applicant's responsibility to present a complete application package with all required documentation to their manager no later than 10 business days prior to the deadline for submitting the application packet. The applicant is responsible for final submission of their portfolio to the Panel via email by the deadline (April 1 or October 1).

Copies of documentation must be retained by applicant for possible future verification of achievement.

- Application for renewal of clinical nurse level is initiated by the nurse.
- Applicant will complete required forms including documentation to validate achievement of criteria.
- Application portfolios will be due to the Nurse Manager or to the Nursing Director, if the manager is not a nurse (herein after referred to jointly as "Nurse Manager") 10 business days prior to the application deadline
- DPNP application portfolio must be reviewed and approved or rejected by the Nurse Manager within ten (10) business days of its submission by the nurse. Once reviewed, the Nurse Manager will inform the applicant via email of their decision.
- The applicant submits their final portfolio to the Panel via email by the deadline (April 1 or October 1)
- The Panel meets to discuss the application and renewal request.
- Applicant attends a Panel interview and presents their exemplars to all Panel members within 45 business days of the application due date.
- The Panel will determine if the applicant meets the criteria, and can award achievement by an affirmative vote of no less than a majority (6 of the 10) Panel members. Any Panel member who is from the same unit as the applicant may recuse themselves from the discussion and consideration of that applicant. The Panel will notify the applicant of its decision by letter and e-mail within ten (10) business days. If the nurse is denied, a written explanation will be provided at the same time as the notification.
- No change will be made to the status of the nurse's differential until written notification of acceptance, or in the case of denial, until the appeal process is complete.
- If a Nurse is denied retention of the Distinguished Professional Nurse Program differential by the Nurse Manager or Panel, (s)he may exercise the appeal rights as set forth in Section XIII below.

IX. Renewal Application Process (Non-Panel Year)

It is the applicant's responsibility to notify their manager in advance of their intention to apply for renewal of the Distinguished Professional Nurse Program in a timely manner (in writing via email) at least 30 business days prior to the deadline for submitting the application packet), so that the manager can provide the appropriate support before the due date. Copies of documentation must be retained by applicant for possible future verification of achievement.

- A nurse who has achieved Distinguished Professional Nurse Program differential status will maintain that status for two (2) years provided that the nurse continues to meet the required criteria and points each year, and in the interim year the nurse's portfolio has been submitted, reviewed and approved by the Manager. This nurse will not be required to appear before the Panel in the interim year. If denied by the Nurse Manager, the nurse will have the appeal rights set for in Section XIII, below.
- Applicant will complete required forms including documentation that all criteria are met for the designated level and submits the forms.
- Re-application portfolios will be due to the Nurse Manager by **April 1 or October 1**, as applicable, based on the original achievement date.
- The DPNP re-application portfolio must be reviewed and approved or denied by the Nurse Manager by letter and email, within ten (10) business days after the nurse's submission of the portfolio. If the Nurse is denied, a written explanation will be provided at the same time as the notification.
- No change will be made to the status of the nurse's level until written notification of acceptance, or in the case of denial, until the appeal process is complete.

X. Failure to submit renewal documents

The reapplication documents must be submitted to the Nurse Manager no later than **April 1 or October 1**. If reapplication is not submitted by the deadline, the manager must initiate the process for removal of the Distinguished Professional Nurse Program differential via the e-Par process. There will be **no** grace period. Exception: a written letter from the Distinguished Professional Nurse Program CNIII to the Nurse Manager of a valid reason (i.e extended medical LOA) must be submitted.

XI. Voluntary Removal of Differential

If a CNIII who is receiving Distinguished Professional Nurse Program differential elects to opt out of the DPNP they will notify their Nurse Manager who will initiate an e-par request to remove the differential and send documentation of this decision to the Panel Chair/Co-Chair and maintain documentation in the management file. Should the nurse

desire to reapply, they must wait until the next application window.

XII. Roles-Defined

A. Role of the Panel

- The Panel will review and act upon all submitted portfolios based solely on the criteria provided in this DPNP
- The Panel will provide consultation to Clinical Nurses, and Nurse Managers about the DPNP
- Within ten (10) business days of the exemplar presentation/interview, the Panel will notify the applicant by letter and email of achievement or will give a written explanation for the denial at the same time as the notification
- The Panel will maintain confidentiality of the proceedings
- The Panel will notify new members of ongoing rules and regulations
- The Panel, by majority vote (i.e. at least six (6) votes), will be the decider for all DPNP interpretation
- The Panel may make recommendations for changes to the DPNP by a majority vote (i.e. at least six (6) votes). Changes may be made if approved by the CNO
 - The County will abide by its duties under the MMBA, including meeting and conferring over negotiable impacts of changes to terms and conditions of employment.
- The Panel will be responsible for problem solving issues that arise within the DPNP
- The Panel will be responsible for follow-up on employee issues/concerns regarding the administration of the DPNP

B. Role of the Nurse Manager/Director

- The Applicant's Nurse Manager will review and approve the applicant's portfolio prior to submission to the Panel for those applications that require Panel approval
- The Nurse Manager shall provide a copy to the Applicant of all references received by the Nurse Manager related to the DPNP, within three (3) business days of the Nurse Manager's receipt of the completed reference
- The Nurse Manager shall provide a copy to the applicant of the completed Assessment of Clinical Expertise within thirty (30) calendar days of notification of the applicant's intent to apply for promotion. The Applicant's Nurse Manager will verify applicant's compliance with eligibility criteria (e.g., no corrective action as defined in Section XV; meets or exceeds overall rating on performance evaluation; and rating as expert or proficient based on the Assessment of Clinical Expertise)
- The Nurse Manager will review and either accept or deny interim year renewal applications
- The Nurse Manager will initiate all e-par actions/requests for status changes

C. Role of the DPNP Liaison

RNPA may appoint a Liaison to act as a resource on DPNP process and requirements questions. For that purpose, the liaison will be forwarded inquiries submitted by Nurses

to the DPNP mailbox. The Liaison will not participate directly in the application portfolio review, applicant interviews, or decisions. Time spent in the RNPA DPNP Liaison role will not be considered paid work time.

XIII. Appeals Process

- The applicant shall first discuss the situation with the Nurse Manager of their department. The applicant will then decide if they choose to appeal.
- The applicant shall submit the concern in writing to the Chief Nursing Officer within 15 business days from the date of the denial being appealed.
- The Chief Nursing Officer will investigate, consult with the Panel and the applicant's Nurse Manager and then provide a written response (via email) which will include their understanding of the problem and the action to be taken, if any. The response of the Chief Nursing Officer shall be in the mail within 15 business days from the receipt of the appeal.
- If the applicant requests a meeting during the appeal process, a meeting will be held and the denied applicant can choose to have a RNPA representative present at the meeting.
- The decision of the Chief Nursing Officer is final and not subject to the grievance process or further appeals.

XIV. Inter and Intra Department Transfers

In the event of a transfer, the nurse will maintain their current Distinguished Professional Nurse Program differential, if they meets the following requirement(s): (1) renews their Distinguished Professional Nurse Program status pursuant to Section IX by the same date they would have been required to do so had no transfer occurred, except that their clinical expertise and performance appraisal shall be made by the Nurse Manager in the unit from which they transferred based on work performed by the nurse in that unit prior to the transfer, and (2) applies for and obtains Clinical Nurse III Distinguished Professional Nurse Program status in the new unit, during a designated application period that occurs within nine (9) months from the date of transfer, using any points earned during the preceding twelve (12) months as of the relevant application due date, and demonstrating that they meets the required criteria based on the preceding twelve (12) months as of the relevant application due date.

XV. Employee Unfavorable Report or Unsatisfactory Performance Appraisals

A nurse who has received corrective action of an Employee Unfavorable Report or greater is not eligible to apply for Distinguished Professional Nurse Program differential for twelve (12) months after the disciplinary action is issued.

A nurse who has received a 'below standard' in ANY single line-item category on their annual performance evaluation is not eligible to apply for Distinguished Professional Nurse Program differential status for twelve (12) months.

A nurse who has received either (i) two corrective actions of a written counselings, or (ii) a greater level of discipline, including an Employee Unfavorable Report, is not eligible to maintain Distinguished Professional Nurse Program differential status during the rolling twelve (12) month period after the last such action was issued.

A nurse who has received a rating of “below standard” on any single line item on their annual performance evaluation is not eligible to maintain Distinguished Professional Nurse Program differential status during the rolling twelve (12) month period after the last evaluation was issued.

“Corrective actions” do not include oral/documented verbal counselings.

XVI. Exemplars (see section XX)

The Panel will evaluate the exemplars on the basis of whether the applicant included all components of format and not to evaluate the applicant’s oral or written presentation skills. Panel will use content of exemplar only to evaluate the demonstrated expertise of the applicant (using the Benner Assessment of Clinical Expertise tool). Each exemplar shall cover at least three domains. No exemplars shall be required during a Non-Panel Year.

Distinguished Professional Nurse Program

XVII. Nurse III Differential

<p>QUALIFICATIONS</p>	<p>Active and unrestricted California RN licensure</p> <p>BSN or Bachelors in a non-nursing degree is required***</p> <p>Member of a professional nursing organization</p> <p>Equivalent of 1 year of full time employment at Santa Clara Valley Healthcare greater/equal to 3 years experience as a professional nurse</p> <p>***Note: Nurses with validated 20+ years of Registered Nursing experience who do NOT possess a BSN or Bachelor's are eligible for participation in the Distinguished Professional Nurse Program Differential if they have a nationally recognized certification in their CURRENT area of practice. Nurses who meet this eligibility will only be able to apply for the DPNP differential for one (1) two-year period. If the nurse does not obtain their BSN within the initial two-year period, the nurse may NOT reapply for the differential until such time that they have earned their BSN, (at which time they may reapply during the normal application period.) This provision is only applicable until (DATE). After (DATE), all nurses who apply for the DPNP differential must meet all criteria of this document.</p>
<p>CLINICAL EXPERTISE</p>	<p>Expert in all but two categories of the Clinical Expertise Assessment. (see page)</p> <p>1 Exemplar (Panel Years Only)</p>
<p>LEADERSHIP/ PROFESSIONAL GROWTH & CONTRIBUTION</p>	<p>Obtains <u>30</u> DPNP points annually from 3 categories</p>
<p>CONTINUING EDUCATION</p>	<p>Completes annual competencies</p> <p>Completes all assigned e-learning modules</p> <p>23 CE hours annually</p> <p>CE Hours shall be principally related to nursing practices within the County</p> <p>Academic nursing courses for which CE hours are earned may be used to</p>

	<p>satisfy this requirement</p> <p>Courses required of employment (i.e ACLS, PALS, BLS, etc) CEU's may not be counted towards CE hours</p>
PERFORMANCE APPRAISAL	<p>Overall Score : Standard/Above Standard</p> <p>No areas noted to be 'below standard'</p>
ATTENDANCE STANDARDS	<p>Applicant must have no counselings for attendance and/or tardiness</p>

XVIII. Distinguished Professional Nurse Program Summary Requirements

Clinical Expertise Assessment

*Must meet or exceed all “Proficient” criteria for a CN III. This section is worth a total of 11 points. Points awarded as follows: Competent ranking =0, Proficient ranking =0.5, Expert ranking =1. Minimum score for this section to be eligible for the Distinguished Professional Nurse Program Differential is 10. Applicant must have at least 9 points assigned in the Expert ranking and no more than 1 point total in the Proficient ranking.

Domain	Expert (Intuitive responses)	Meets	Proficient (Ability to Read Situations)	Meets	Competent (Ability to anticipate the likely course of action)	Meets
1) Therapeutic Relationships	Able to establish on the spot relationships with patients/families in difficult or crisis situations.		Consistently able to adapt approach readily when patient/family displays unexpected response.		Demonstrates ability to build effective therapeutic relationships.	
	Advocates for the patient/family perspective and works toward resolution of conflict.		Monitors patient satisfaction and takes action to improve care.		Assumes responsibility and accountability for patients.	
2) Patient Teaching	Able to develop and implement complex teaching plans.		Uses creative strategies to ensure patient/family possess understanding of the plan.		Collaborates with peers to develop and implement individualized teaching plans.	
3) Staff Teaching	Recognized by other staff nurses and physicians for their expert knowledge.		Provides guidance to new staff.		Utilizes educational resources available in hospital for promoting self learning needs.	
	Heightened responsibility in supporting less experienced RNs.		Serves as coach or preceptor to evaluate and validate a colleague’s clinical judgment.		Offers recommendations to enhance learning needs of unit staff.	
4) Diagnostic and Monitoring	Recognizes and reports subtle variations in patient responses.		Able to quickly evaluate when data may indicate a diagnosis not already identified.		Focuses on the whole clinical picture of the patient.	
	Sense the needs of other patients and the capabilities of the nurses assigned to them.		Sees changes that require actions other than those anticipated or planned.		Integrates input from other disciplines for decision making.	
5) Therapeutic Intervention	Develops innovative strategies to enhance patient care.		Utilizes critical thinking skills to interpret complex data.		Responds in a timely manner to changes in patient condition.	

6) Professional Accountability	Models high performance leadership behaviors i.e. thoughtful listening, effective questioning, and empowerment.		Fosters an environment of that promotes mutual respect and professional growth.		Models professional accountability for one's own clinical practice.	
	Acts as a change agent and facilitates implementation and evaluation of change.		Supports and actively participates in the change process.		Takes initiative by offering help to other colleagues without being asked.	
7) Organizational and Work role	Performs skillfully under pressure. Able to juggle and integrate needs and requests of multiple patients without losing important information or missing significant needs.		Able to balance competing demands. Able to plan and coordinate multiple patient needs and reshuffle their priorities in the midst of constant patient changes.		Knows when to escalate issues when demand exceeds capacity. Responds to patient requests and needs with some ability to reshuffle priorities.	

- References: Benner, P. From Novice to Expert. Menlo Park, California: Addison Wesley Publishing Company, 1984.
- Benner, P., Tanner, C.A., & Chesla; C.A. Expertise in Nursing Practice. New York, Springer Publishing Company, 1996.
- Curley, M.A. Patient-nurse synergy: optimizing patients' outcomes. American Journal of Critical Care Medicine, 1998.

Signature of Manager

Date

XIX. Distinguished Professional Nurse Program Points

The *Points Program* allows credit for time and expertise in precepting, giving in-services or presentations, publishing original materials, obtaining specialty certification or recertification, and participation in various leadership activities. Points are broken down into six categories for ease in determining your points. A log is included to help keep track of your points.

POINTS REQUIRED FOR PROMOTIONS / RENEWAL:

- From a Clinical Nurse III to an Distinguished Professional Nurse Program III status: must accumulate 30 Points during the twelve (12) months preceding the application due date. Minimum of 3 categories.
- To maintain an Distinguished Professional Nurse Program status: must maintain 30 Points per year. Minimum of 3 categories. At the end of the first year of the two (2) year appointment, the portfolio must be submitted to the Nurse Manager for review and approval by the Nurse Manager. In the event of a denial, the nurse will have the appeal rights set forth in Section XIII. At the end of the two (2) year appointment, the nurse must follow the procedure for renewal by the Panel.

Category A: Clinical Expertise

Description of Activities

This category is based on a annual assessment of unit expertise conducted by the Nurse Manager. The tool "Clinical Expertise Assessment" will be utilized to determine each nurse's current level.

Points Awarded = 9-11 points

Clarification: As long as the Nurse maintains his or her level of expertise, these points can be used every year, not just the year of assessment.

Category B: Academic Credit Courses or CE Credit Courses

Description of Activities

This category encompasses academic courses offered by an accredited college or university. These courses should address the bio-psychosocial knowledge base of professional human services. It is not essential that the course content be patient focused.

Examples include psychology, sociology, philosophy, social or cultural anthropology, research, education statistics, chemistry, biology, human anatomy and physiology, medical Spanish, health care management. College credits earned through challenge exams are acceptable.

Examples of courses that **ARE NOT** acceptable include but are not limited to: history, math, art, music, and English.

Credits earned under this category for nursing academic courses may also be used for meeting the applicant's CE requirement.

National/State Professional committee member	3
Adjunct faculty	5/semester (online or class) 10 points max
Performance Improvement Project Team Leader	5
Performance Improvement Project Team Member	2
Approved unit-based committee or activities positively impacting department and/or hospital goals	2

*In order to earn committee member points, nurse **MUST** not only attend the meetings but also communicate relevant information to their respective unit/department. This means relaying pertinent information via huddles, staff meetings, distribution of minutes, communication boards, etc. as well as engaging staff in changes that need to be implemented on the unit.

**For the Nurse Liaison/Champions/Super User, the Manager approves this designation on an annual basis.

***One time activity is completed in 3 months or less; on-going activity requires more than 3 months and at least two hours of ongoing project work each month

Limit = 12 points Acceptable Proof of Points

Completed committee or council participation evaluation. Committee must meet at least 4 times/year. Applicant must have attended at least 75% of meetings scheduled in the previous 12 months in order to be awarded any points. For applicants who served in multiple roles on a committee (e.g. chair, member) the applicant will be awarded points based on the role in which they spent the majority of their time over the last 12 months.

- For Committees/Task Forces: Chair to complete the “Hospital or Professional Committee Participation Evaluation” including % of attendance and comments regarding effectiveness/contributions (or, if applicant is the Chair, Sponsor to complete and sign in Chair’s place).
- For validation of approved Unit-based activities, performance improvement projects or status as Nurse Liaison/Champion/Super User/Warrior role: Manager must provide written documentation of rationale for points claimed.
- For adjunct faculty: Provide letter from academic institution validating faculty status and semesters/quarters classes taught and/or clinical instruction
- For professional organization: Provide copy of membership card.
- For approved activities positively impacting Hospital goals: Include description of activity and planned or actual impact on Hospital goals validated by manager.

Category G: Advanced Clinical Skills

The Nurse Manager, in consultation with the respective Unit Council if one exists, shall decide what qualifies as advanced clinical skills for that unit. Examples would be super users for skills days, certified instructors for certification courses (i.e. TNCC, ACLS, PALS, etc), Healthlink, etc.

Advanced Clinical Skills for a specific unit cannot be a skill that is required in order to work on the unit but must be a skill relevant to work performed on the unit as validated by the Nurse Manager. Examples would be Mobile Intensive Care Nurses in the ED or transport trained NICU nurse

Acceptable Proof of Points

Documentation from Dept. Manager that the Advanced Clinical Skill is currently on the approved list

and validation that training has been completed.

Three (3) points awarded per qualifying advanced clinical skill. Limit = 9 points

Category H: Professional Presentations

Description of Activities

Encompasses the RN's participation as an instructor delivering content to nurses, other health care professionals, students or the public. The presentation must be delivered within a structured framework of teaching/learning. This includes presentations given to the public to improve the image of nursing (e.g., career fair at a middle school).

A presentation includes a seminar, in-service, clinical conference, patient/family educational program, consumer education program, Basic Cardiac Life Support, Advanced Life Support, Pediatric Advanced Life Support, Professional organization chapter educational activities, and/or presenting an original paper or poster presentations.

The participation may be as primary instructor, guest lecturer, panel participant, skills day instructor.

Number of Points Awarded	
PALS, ACLS, BLS, TNCC, LVAD, NRP, TNCC	5 Points must be certified instructor and teach a minimum of 2 times a year
House wide orientation lectures	3 pts. Max 3 a year, must be on different topics
Nursing Grand Rounds / House wide In-service	5 pts.
Unit poster presentation	3 pts.
Unit level In-service	2 pts.
National Conference	15 pts.
Local Conference	10 pts.
Poster Presentation National	10 pts.
Local Chapter Conferences	3 pts.

Limit = 15 points Acceptable Proof of Points

Evidence of participation in the presentation (i.e., brochure, announcement, or verification from the sponsor recognizing the applicant's participation), including learning objective, sign-in list (if any) and outline of presentation.

Category I: Professional Publications

Description of Activities

Encompasses professional healthcare publications. The RNs responsibility in the publication may be authorship, co-authorship, or editorial. The item to be published may be a book, chapter in a book, paper, article, book review, etc. This item may be published in print or online in a book, journal, professional organization's national or local newsletter, or hospital newsletter or publication, etc. Professionally authored multimedia aids are acceptable.

Number of Points Awarded	
Editorial in a journal (healthcare related)	5
Writing a pamphlet (Pt or staff teaching tool)	3

Textbook Editor	15
Chapter in a book	15
Professionally authored multimedia aids, web	15
Journal article (healthcare related)	10
Journal Reviewer (review of articles or book chapter)	3
Book Reviews, published	5
Evidence based policy writing	5 new/3 revised

Limit = 15 points Acceptable Proof for Points

A copy of the publication should be submitted when possible. If not, a copy of the title page and table of contents is required. Publisher's notice of acceptance for publication should be submitted if Points are to be granted before printing.

For evidence-based policy writing, the Nurse must submit the policy showing supporting evidence and the Nurse's role.

Category J: Community Service

Description of Activities

Encompasses RN's participation as a volunteer in health or medical related only community service. The participant must be involved in the direct provision of medical care or in an organizational, leadership, facilitating, or presenter capacity. The activities must have occurred within the previous 12 months.

Number of Points Awarded	
Health Fair	1 (organizer=3 points)
Health fund raising events (MS Walk, Heart Walk)	1
Recruitment Fair	1
Career Fair	1
Health Literacy event	1 (organizer=3 points)
Medical Mission trip	1 point/day (organizer=5)
Support Group	1 point/day (chair=5)
Health care camp (Heart Camp, CF Camp, etc.)	1 point/day Health Care Legislative
Advocacy (Participation in Advocacy Days)	1
Other health related community service activities	1 point/day Serving on a Board/taskforce for an agency

Limit = 8 points

Acceptable Proof for Points

Documentation which outlines a description of duties and dates of service.

A brochure from the event listing applicant as a participant, organizer, facilitator, or chair.

Verification from Sponsor/Organizer recognizing applicant's leadership role (being a participant in a health fair with no active leadership role DOES NOT COUNT in this category)

Category K: Awards and Recognition

Description of activities:

Recognizes and acknowledges nurses for awards and recognition received in the nursing community or with nursing related/community professional organizations.

Number of Points Awarded	
Daisy Award	3 points per recognition
Nursing Excellence Award Recipient	3 points per recognition
Employee of the Month though SCC	3 points per recognition
Professional recognition from a nurse related organization	3 points per recognition
Community recognition award	3 points per recognition

Limit=6 points

Acceptable Proof for Points: Copy of award certificate or letter from agency confirming recognition.

XX. EXEMPLAR FORMAT

An exemplar is a clinical situation in which your professional skills as a nurse were instrumental in your ability to assess, teach or intervene to affect an outcome of value to the patient or to your own growth and development. Think of a story that was especially meaningful to you as a professional nurse; a story that helped shape your practice today. The exemplar must be applicable to your current clinical practice and must ideally, have occurred in the past year.

A. Name

- Department
- Date

B. Brief Background

- Patient History and Diagnosis
- Your role in the situation
- Physician involvement (if important)

C. Action Taken

- Specific situation
- What you did
- Motivation for action
- What problems were anticipated and how that affected decision-making?

D. Outcome

- How did your action affect the outcome of the situation?
- What made your decision the best course of action in this situation?

E. Debrief/Significance

- How did this story change you personally or professionally? Integration of nursing theory into the outcome/situation

Santa Clara Valley Healthcare DPNP
EXEMPLAR HINTS AND GUIDELINES

1. Minimum 3 pages in length, max of 4 pages per exemplar
2. Typed, double-spaced.
3. Must be a clinical situation that actually occurred in your nursing practice career applicable to your current practice, and preferably in the last year
4. Think of situations in which your actions affected the outcome of a clinical situation.
5. May not repeat same scenario from prior exemplar years

The following may be helpful hints in thinking of the specific situations in your nursing practice:

1. Have you been involved in situations in which your professional skills as a nurse were instrumental in your ability to assess, teach or intervene in that case?

Tell us about the care you deliver and the impact of that care on the patient

Focus on:

- Coordination of care
 - Available services
 - Physician participation
 - Benner Assessment of Clinical Expertise (See DPNP pp. 14-15)
 - RN practice autonomy
 - Family centered care
 - Integration of nursing theorists such as Orem, Watson, O'Rourke, Benner, Roy
2. How does this example of your clinical choices made as an expert/knowledgeable nurse align with your personal goals in nursing and the goals of your department and/or hospital?

DPNP APPLICATION PROCESS COVER SHEET

Name: _____ Date: _____

Department: _____

Length of employment in current department: _____ FTE: _____

TO BE FILLED OUT BY DIRECTOR/MANAGER:

Most recent performance appraisal Overall rating is Above Standard or Standard
Yes / No

Unfavorable Report or greater in the last 12 months?
Yes / No

Completed/attended all mandatory training/competency demonstration, e.g., Healthstream,
SkillsDay, annual competency validation
Yes / No

Has attended 75% of Staff Meetings conducted
Yes / No

I support this applicant for the Distinguished Nurse Practice Program differential
Yes / No

Signature of Director/ Manager

Print Name & Title of Director/Manager

DPNP Checklist for Submission of Documents

Name: _____ Date: _____

Department: _____ Employment Date: _____

Length of Employment in Current Department: _____

Required application components **due to Nursing Management 14 business days prior to submission deadline:**

Cover Sheet

Letter of Intent

Resume

Completed Assessment of Clinical Expertise

Verification of Membership Professional Nursing Association Verification of College Degree

Log and Copy of CEU Certificates (page)

References from each of the following:

- One (1) peer selected by Applicant
- One (1) peer selected by Manager
- One (1) physician/resident, NP or Non Nursing Professional
- One (1) Manager or Director

Written Exemplar

(Panel Year Only)

This completed sheet should also accompany materials due by April 1 or October 1.

Signature of Applicant

Date

Distinguished Professional Nurse Program Points and Continuing Education Log

NAME _____ DEPARTMENT _____

EMPLOYEE # _____

Directions: Print or type all information legibly. This form may be photocopied. Keep this log for your records and include in your portfolio along with the specifically required documentation for each section. It is the applicant's responsibility to keep track of contact hours.

CE Hours: These programs must be principally related to nursing practices within the County. You must have at least 23 CE hours annually. Credits earned under Category B that are for nursing academic courses may also be used for meeting the applicant's CE requirement.

Program Title	Dates	Sponsoring Organization	Contact Hours Obtained
		TOTAL	

Distinguished Professional Nurse Program

Category A: Clinical Expertise

DPNP Points: 11 points max
Total earned:

Attach supporting document with manager scoring

Category B: Academic Credit Courses/Proof of Continued Enrollment in MSN/DNP (as appropriate)

Course Title	Date	College / University	Quarter Credit	Semester Credit	DPNPDNP Points
Limit: Maximum of 9 Proof of Points: Copy of grade report from the school. Grade "C" or better or a grade of "Pass" for a course taken as "Pass/Fail".					Total

Attach supporting documents behind each applicable category.

Category C: Educational Degree

Advanced Degree		PDPNP Points
Limit: 9		Total
Proof of Points: Copy of diploma or official transcript		

Attach supporting documents behind each applicable category:

Category D: National Certification / Recertification

Type of Certification	Date	DNP Points
Limit: Maximum of 10 points per year. Proof of Points: Copy of letter from certifying body or certification card		Total

Attach supporting documents behind each applicable category.

Category E: Preceptorship/Mentorship/Resource Nurse

Employee or student name (for precepting shifts)	Dates	Hours	DPNP Points
<p>Limit: Maximum of 10 points per year. Proof of Points: Letter from manager/mentorship coordinator or educator listing name of student or new RN and precepting dates; Initial competency assessment as developed by the Department Mentor: Must comply with the requirements of the Department of Nursing approved program; Applicants must have attended a Nurse Mentor workshop</p>			Total

Attach supporting documents behind each applicable category.

Category F: Leadership

Professional Organization or Committee or Activities	Membership # or Signature of Committee Chair	DPNP Points
<p>Limit: Maximum of 12 points per year.</p> <p>Proof of Points:</p> <ul style="list-style-type: none"> ○ For Committees/Task Forces: Chair to complete the "Hospital or Professional Committee Participation Evaluation" including % of attendance and comments regarding effectiveness/contributions (or, if applicant is the Chair, Sponsor to complete and sign in Chair's place). ○ For validation of approved Unit-based activities, performance improvement projects or status as Nurse Liaison/Champion/Super User/Warrior role: Manager must provide written documentation of rationale for points claimed. ○ For adjunct faculty: Provide letter from academic institution validating faculty status and semesters/quarters classes taught. ○ For professional organization: Provide copy of membership card. <p>For approved activities positively impacting Hospital goals: Include description of activity and planned or actual impact on Hospital goals validated by manager.</p>		Total

Attach supporting documents behind each applicable category.

Category G: Advanced Clinical Skills

Skill	Date Certified and Signature of Manager	DPNP Points
Limit: 9 points per year Proof of Points: Signed documentation from the Department Manager that the Advanced Clinical Skill is currently on the approved list and validation that the training has been completed		Total

Attach supporting documents behind each applicable category.

Category H: Professional Presentations

Program Title	Date	Number of Contact Hours Taught	DPNP Points
Limit: Maximum of 15 points per year. Proof of Points: Evidence of participation in presentation (i.e., brochure, announcement or verification from the sponsor recognizing applicant's participation), including learning objective, sign-in list (if any) and outline of the presentation			Total

Attach supporting documents behind each applicable category.

Category I: Professional Publications

Title	Date	Type of Publication	No. of Authors	DPNP Points
<p>Limit: Maximum of 15 points per year. Proof of Points: Copy of publication to be submitted when possible. If not, copy of title page and table of contents is required. Publisher's notice of acceptance for publication should be submitted if points are to be granted before printing. For evidence based policy writing, the Nurse must submit the policy showing supporting evidence and the Nurse's role.</p>				Total

Attach supporting documents behind each applicable category

Category J: Community Service

Community Activity and Sponsoring Agency	Date of Service and Authorized Signature	DPNP Points
Limit: 8 Proof of Points: Documentation which outlines a description of duties and dates of service. A brochure from the event listing applicant as a participant, organizer, facilitator, or chair. Verification from Sponsor/Organizer recognizing applicant's leadership role		Total

Category K: Awards and Recognition

Awards/Recognition	Dates of Awards or recognition	DPNP Points
Limit=6 points Proof of Points: Copy of award certificate or letter from agency confirming recognition.		Total

Attach supporting documents behind each applicable category

Grand Total for All Points Categories	
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LETTER OF INTENT FORMAT

ADDRESS TO:

Distinguished Professional Nurse Program Panel

BODY OF LETTER:

1. Tell about your nursing experience and background
2. Explain why you should be granted the Distinguished Professional Nurse Program Differential
3. List any additional information that might be useful to the DPNP Panel.

CLOSING:

Include name, department and telephone extension, e-mail address, mailing address

ELEMENTS OF A PROFESSIONAL RESUME

A resume represents your experience and qualifications in an organized written format, targeted to a specific occupational interest.

Information to Include

Personal Data

Your name, address, and telephone number (home and work).

Employment Objectives

Identify the level for which you are applying.

Work Experience

List most recent first, include month and year going back a maximum of ten years. List duties and responsibilities. Focus on your accomplishments and contributions in each position, especially as they relate to the level for which you are applying.

Formal Education

Start with the most recent schools and pertinent specialized education. College graduates should list degree, college, and major and minor areas of study.

Professional/Community Activities/Memberships

Highlight leadership responsibilities.

Honors/Scholarships/Awards

List any achievements in college, community, or professional career.

Publication

Hospital or Professional Committee Participation Evaluation

Name: _____ Organization: _____

The person named above is seeking advancement or re-credentialing in the Distinguished Professional Nurse Program. Your assistance would be appreciated in evaluating their effectiveness in committee or activity participation. Please furnish the information requested below.

Committee: _____ Attendance: # attended out of possible: _____

EVALUATION	Meets Expectations	Doesn't Meet Expectations
Attendance (at least 75%) of scheduled meetings		
Participation		
Effectiveness/ Contributions		

Remarks: (Required)

Committee Chair Signature

Print Name and Title

Date

Please return directly to the manager below:

Thank you for your prompt attention to this request.

The undersigned, as authorized representatives of RNPA and SCVH, attest the ratification and approval of this Distinguished Professional Nurse Program.
