

NURSING CLINICAL LADDER GUIDELINES

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NURSING CLINICAL LADDER GUIDELINES

INTRODUCTION

As we enter the 21st century, Nursing at Loyola University Health System will strive to:

- Be the premier provider of nursing practice in the Chicago area.
- Be the catalyst that initiates, drives, and sustains delivery of holistic patient care and quality outcomes.
- Exemplify a service excellence focus on the patient and the entire family unit to include physical, psychosocial, spiritual, and cultural needs in collaboration with the health care team.
- Exhibit evidence-based care throughout the continuum of services provided.

The clinical ladder is a tool developed specifically at Loyola University Health System to assist in reaching our vision for nursing. The clinical ladder is a structured system to provide staff nurses' career advancement while remaining in the clinical setting, providing direct patient care. It is used to recognize professional development and differentiates levels of nursing expertise and contribution. The purpose of the clinical ladder is to:

- Enhance, recognize and reward professional development among staff nurses.
- Retain staff nurses in direct patient care positions.
- Enhance staff nurse employee satisfaction.
- Facilitate recruitment of registered nurses by becoming recognized as a “nurse friendly” organization.
- Promote the nursing vision throughout Loyola University Health System.
- Enhance nursing care by recognizing and utilizing nursing expertise in the care of Loyola University Health System patients.

This *Clinical Ladder Guideline* is developed to assist staff nurses in understanding what opportunities for advancement are available to them, how the clinical ladder system is structured and the process for participation in the clinical ladder. In addition, Clinical Ladder Ambassadors are available with expertise in each clinical area and welcome the opportunity to assist you in your clinical ladder application process.

It is our desire to assist all interested staff nurses in reaching their career goals. We designed this system with your help. We recognize that the ongoing success of this program will be determined by staff nurses' interest in participation. If you have questions, comments or additional suggestions, please let us know.

THE CLINICAL LADDER OVERSIGHT STRUCTURE

The Clinical Ladder is administered under the direction of the Vice President of Patient Care Services, Chief Nurse. There are two committees that hold responsibility for the function of the Clinical Ladder.

The Clinical Ladder Oversight Committee is appointed by the VP Patient Care Services and will routinely include:

- VP Patient Care Services, Chief Nurse (Chair)
- VP Human Resources or designate as an Ad Hoc member
- AD Nursing Education and Support Services or designate
- AD who is an RN and responsible for clinical areas
- 1 Manager/Assistant Manager who is an RN and responsible for a clinical area
- 1 Staff Nurse Level 3 or 4 in the Clinical Ladder
- Additional participants as determined by the VP Patient Care Services, Chief Nurse

Available to consult with this committee on an as-needed basis

Director of Compensation

The VP Patient Care Services, Chief Nurse, will determine terms of service on the Clinical Ladder Oversight Committee.

The Clinical Ladder Oversight Committee is responsible for:

- General oversight of the Nursing Clinical Ladder program at Loyola University Health System.
- Review of the Clinical Ladder policies and procedures
- Review and revision of the Clinical Ladder Guidelines.
- Review and revision of the Clinical Ladder Criteria.
- Clinical Ladder Program Evaluation
- Monitoring program participation and setting limits on open level 3 and 4 positions as appropriate.
- Responding to written appeals concerning promotion decisions of the Clinical Ladder Review Committee.
- Educating the members of the Clinical Ladder Review Committee to their function.

The Clinical Ladder Review Committee is appointed by the VP Patient Care Services, with recommendations of the Clinical Ladder Oversight Committee, and will routinely include:

- *1 Administrative Director who is an RN and responsible for clinical areas (chair)
- *3 Managers/Assistant Managers who are RNs and responsible for clinical areas
- 3 Staff nurses participating in the clinical ladder at a level 3 and/or 4
- 1 Staff Nurse at large
- 1 Nurse Educator
- Additional participants as determined by the VP Patient Care Services, Chief Nurse

In addition to the regular members of the Clinical Ladder Review Committee, there will be alternate members appointed by the Vice President, Patient Care Services, Chief Nurse. These alternates will include Administrative Directors, Managers and staff nurses. They will be educated in the review process and be available as needed to participate in the application review process. This may occur because of the volume of applications, the absence of a regular committee member because of leave of absence or other reason, or to complete a term for a member who cannot continue to serve on the committee.

The Clinical Ladder Review Committee is responsible to:

- Review and recommend action for each application for promotion submitted to the committee
- Review and recommend action for each renewal application for maintenance of level
- Provide individual consultation when requested to assist eligible Registered Nurses in their career development planning

Members of the Clinical Ladder Review Committee will be expected to:

- Attend a minimum of 2 review days per year
- Cover the nursing clinical ladder hotline 3 weeks per year
- Be a willing and available mentor to others seeking leveling in the clinical ladder

Representation will be sought to include participants from different practice settings within Loyola University Health System. There will routinely be at least one representative from each of the following practice settings: In Patient Care Units, Ambulatory settings and Home Care & Hospice.

Terms for serving on the Clinical Ladder Review Committee will routinely be 2 years and may be renewed at the discretion of the Clinical Ladder Oversight Committee. Rotation of service will provide continuity by routinely retaining half of the members each year while the other half is serving in their first year.

*1 member in each of these categories will serve on both the Clinical Ladder Oversight Committee and the Clinical Ladder Review Committee concurrently

CLINICAL LADDER CRITERIA

The clinical ladder criteria define the behaviors and activities of staff nurses at each of the four levels of practice within the clinical ladder. At levels 1 and 2 all of the criteria is required to be recognized as functioning at that level. At levels 3 and 4 there are required criteria, which must be met to advance to these levels of the clinical ladder, and there is weighted criteria. The weighted criterion provides the opportunity for staff nurses to utilize their expertise in areas of their interest and areas of specific unit needs. To advance to level 3 or 4 required criteria and a specific amount of weighted criteria must be demonstrated and documented. Weighted criteria must be drawn from a minimum of 3 areas for level 3 and 4 areas for level 4 leveling. Weighted criteria are labeled with value attached. All criteria are required unless labeled as weighted.

The clinical ladder criteria are published on the Loyola University Health System Intranet. Criteria are reviewed and may change on a quarterly basis. This will be done via the intranet.

Professional Organization Definition for recognition within criteria:

A professional body may be known as an organization, association or society and are non-profit having the purpose of advancing a profession and protecting the public interest. Many professional organizations include voluntary certification processes among their functions as a vehicle to verify that members meet certain pre-specified standards; additionally professional organizations participate in professional standards of practice development and professional education.

LEVELING WITHIN THE CLINICAL LADDER

Leveling is the process of being placed in one of the four levels of the clinical ladder. This includes both moving up to higher levels of the ladder as well as moving down to less complex levels. Leveling occurs when a registered nurse applies for a new level and is recognized through the review process as having obtained that level.

Registered Nurses Eligible to Participate in the Nursing Clinical Ladder

Loyola University Health System employees who hold a regular status position with a job titled staff nursing providing direct patient care* a minimum of 80% of work time are eligible to seek leveling within the clinical ladder if the following criteria are also met. *Direct patient care is applying all components of the nursing process in the care of individual LUHS patients with responsibility for ongoing patient management for an episode of care.

- a. Be currently licensed in the state of Illinois.
- b. Be holding of an FTE of 0.5 or greater.
- c. Have functioned in the role of staff nurse for 24-36 months to apply for Level 3. This may include work in a staff nurse position outside of Loyola University Health System.
- d. Have functioned in the role of staff nurse for 36-48 months to apply for Level 4. This may include work in a staff nurse position outside of Loyola University Health System.
- e. Not be in receipt of a **written** warning entered into the on-line system in the past 12 months or a final warning in the past 24 months.

Leveling from Level 1 to Level 2 will occur with an application process between the level 1 staff nurse and the unit manager. It is the responsibility of the staff RN to initiate this process by providing the following documentation to the manager.

Completed skills check list

Peer review check list from three peers (Available on the website)

1. The nurse's main preceptor
2. A regular charge nurse that works with the nurse
3. Any additional registered nurse from the unit

The manager will assess that the

Skills checklist is complete

Peer reviews support competence with Staff RN job expectations

No discipline has entered into the on-line system for past 12 months

Fulfills all requirements of position as well as maintaining policies
and work rules at the level expected for experience

Collaborates as a member of the health care team

A conference between the staff nurse and manager should verify that both agree the staff nurse has obtained a level 2 performance at which time the manager will complete an EIF to transfer this RN to level 2.

The expectation for all staff nurses at Loyola University Health System is to reach a level 2 position in the clinical ladder within the first 18 months of employment in an eligible position.

Leveling from Level 2 to Level 3 and Level 3 to Level 4

Advancing to a higher level on the clinical ladder will occur when an eligible staff nurse:

- Initiates an application process to demonstrate successful completion of the appropriate criteria,
 - For level 2 to level 3, along with demonstrating required criteria, the applicant must demonstrate a minimum of 20 points in weighted criteria from at least 3 areas.
For level 3 to level 4, along with demonstrating required criteria, the applicant must demonstrate a minimum of 40 points in weighted criteria from at least 4 areas. At least 15 of these points must be from level 4 weighted criteria.
- The Clinical Ladder Review Committee has reviewed and recommended accepting the application for promotion, and
- The VP Patient Care Services, Chief Nurse has approved the application for promotion.

Preparation to Apply for Leveling to Level 3 or 4

Clinical ladder liaisons are available across the health system to assist with application development. These staff members will meet with you if you request an appointment. In addition, members of the Clinical Ladder Review Committee will be available to assist staff in assessing the completeness of their application, as well as, make suggestions of appropriate documentation. These resources are listed on the Nursing Clinical Ladder Website. There is also an e-mail address for questions.

Last Revision Date: November 1, 2013

Application Process

An eligible Registered Nurse may submit an application for promotion by one level of the clinical ladder at a time. Registered Nurses must remain in each level a minimum of one year prior to seeking advancement to a new level. Following the completion of one year at a level 3 a Registered Nurse may apply for level 4. The quarter deadline at which the Registered Nurse is leveled at level 4 becomes the annual renewal date for this Registered Nurse.

Registered Nurses, who transfer or are in the process of transferring, are eligible to maintain their current level in the clinical ladder, but are not eligible to seek a higher level in the clinical ladder until they have been in their new department for a minimum of six months. For a level 3 or level 4 Registered Nurse maintaining their level after transfer is clarified under the *Transfers* section, Clinical Ladder Guidelines, page 13.

Three copies of your application must be submitted to the review committee by the deadline. Deadlines for application are every quarter, January 31, April 30, July 31, and October 31. Applications should be submitted to the office of the Administrative Director of Professional Development. The Review Committee and VP Patient Care Services, Chief Nurse will have eight weeks from the deadline to review and communicate the decisions concerning the applications received.

Applications must be typed documents. Peer Review Letters may be hand written if printed and legible.

The completion of the application, including providing supporting documentation, is the responsibility of each registered nurse for his or her own application. The application must use the current criteria, which is published on the Loyola University Health System Intranet. An incomplete application will be returned with information as to what is missing.

A NEW application must be submitted when applying for level 3 and when applying for level 4 or when resubmitting an application when the timeframe is longer than one quarter since the application has been returned. A NEW Application includes:

- A Completed Application Form
- In-Service Education records for the past 12 months, including certificates of attendance for outside programs attended
- A current Resume, Curricula Vita, or history of work experience.
- A Clinical Ladder Manager Letter
- Three peer review forms: one completed by a staff nurse in the next higher level when possible. All of the peers must regularly work with the applicant in the applicant's unit.

OR

- For Registered Nurses whose work environment does not include three registered nurse peers, letters of 360° feedback may be a supplement to available peer letters to total three letters. This may include feedback from a Registered Nurse Manager who is not the direct supervisor, a physician with whom the applicant works regularly, or other co-workers such as Licensed Practical Nurses, Patient Care Technicians or Service Representatives who regularly work together.
- One paragraph demonstrating your planning and critical thinking skills while dealing with a difficult patient, providing triage, a challenging care situation, or

- organizing a discharge. This is utilized to meet the required criteria, it does not have to be a unique case, but an example of your general practice as a nurse.
- A clinical log is required, which documents specific occurrences or events to demonstrate clinical, leadership and overall level of **nursing practice** that meets required and weighted criteria of the level for which the Registered Nurse is applying. **DO NOT ENTER MEETINGS, CONFERENCES, EDUCATION PROVIDED, ETC.** Each entry must be verified with a witness signature other than the applying Registered Nurse. These entries must reflect consistent activities over the past year with entries from a minimum of eight different months. Attendance at or presenting meetings, in-services, taskforces and CEUs are not specific events demonstrating level of nursing practice.
 - “Required documentation” items identified in the criteria for required and weighted criterion for which the Registered Nurse is seeking credit toward leveling.
 - For Level 4, a nationally recognized nursing certification is required.
 - Additional supporting documentation must be included to demonstrate completion of the required and selected weighted criteria. This may include:
 - Copies of EPIC notes or other documentation that have patient identifiers removed.
 - Committee Participation Letter completed and signed appropriately.
 - Copies of materials, patient education handouts, policies, etc. developed with documentation that verifies the applicant’s participation in development.
 - Attendance sheets for educational activities provided which include objectives of in-service.
 - Copies of quality improvement reports, service excellence projects.
 - Patient letters
 - Letters of support from additional members of the multidisciplinary team that articulate examples of meeting specific criteria that this professional has observed.
 - Documentation of examples where decisions or interventions made a difference in a patient outcome.

Sufficient information to demonstrate performance of specific weighted criteria is all that is needed.

Clearly label all supporting documentation to identify which criterion is being supported by the documentation. This may include labeling entries in your clinical log, manager letter, peer letters, or supporting documents such as teaching forms, etc. If you participated in developing a teaching sheet, form, etc. but your name is not on the form, include verification in the clinical log with a signature of other participants or include verification in the manager letter.

Many activities may fit more than one criterion. However, the same project or activity may not be used to support achieving more than one weighted criteria. It is appropriate to determine the activity that awards the most points for any specific project or activity and document the activity for that criterion.

Two to three members of the Clinical Ladder Review committee will review the application and contribute to the recommendation to the VP Patient Care Services. A majority of the reviewers must recommend promotion to advance the application to the

Last Revision Date: November 1, 2013

VP of Patient Care Services. When possible, members of the review committee who work directly with the applicant or directly supervise an applicant will not participate as one of the reviewers.

Communication of Leveling Decisions

The Clinical Ladder Review Committee will forward recommendations to the VP, Patient Care Services, Chief Nurse, who will review and finalize decisions related to promotion and maintenance of level. This decision will be communicated in writing to the Registered Nurse who applies, their direct supervisor and the Department of Human Resources to implement appropriate position and salary adjustments. This communication will be within an eight-week period from the application deadline. Leveling salary adjustments will be effective the beginning of the pay period following the staff nurse's receipt of a letter of promotion from the Vice President, Patient Care Services, Chief Nurse.

Returned Applications

There are several reasons an application may be returned without being accepted for leveling at a higher level. The major reasons include the following:

- If the application is incomplete because it does not contain all of the application elements it will be returned with notation as to what is missing. These applications will not be reviewed for verification of required or weighted criteria.
- If the reviewers are unable to validate all of the weighted criteria in the application and this causes the application to have insufficient weighted criteria for leveling, the application will be returned with information concerning what was not validated.
- If the reviewers are unable to determine what supporting documentation validates which specific criteria, the application will be returned.

In each of these instances, the Registered Nurse may revise and resubmit their application at the time of the next application deadline provided the additional documentation supporting the application is available. Resubmitted applications will be reviewed with the other applications submitted for that review quarter. If resubmitted the immediate next quarter, the applicant may seek the same level as held previously. If the resubmittal is delayed to later quarters, a new application must be submitted for level 3.

- For an application to be leveled, all required criteria for the levels up to the level for which the applicant is applying must be demonstrated. If the reviewers are unable to validate the applicant meets the applicable required criteria the application will be returned with information concerning the required criteria at issue. These applications will not be reviewed for weighted criteria.

In this instance, the applicant may resubmit the application at any of the following application deadlines when they are able to document meeting the applicable required criteria consistently for a minimum of one year. These resubmitted applications must be complete with all materials required of a new application. Resubmitted applications will be reviewed with the other applications submitted for that review quarter.

- If the application is returned for some other reason, the review committee will provide information at the time the application is returned.

A Registered Nurse may contact a chair of the review committee or the review committee contact person on their review documents to make an appointment to review their application with a member of the review committee. This may assist the applicant in understanding the Review Committee's decision and in preparing to resubmit their application.

Resubmitted applications must include the entire application and three copies with the additional materials the applicant wishes to contribute to assist the peer reviewers in validating the required and weighted criteria. These submissions must comply with the most updated criteria and have a manager letter dated within two months of the application deadline. To facilitate resubmission, the applicant may pick up the copies of the original application from the office of the chief nurse to minimize additional copying.

An applicant may appeal the decision of the Clinical Ladder Review Committee by responding in writing within two weeks of the return of their application. The written appeal is to go to the Clinical Ladder Oversight Committee in care of the Vice President of Healthcare Operations, Chief Nurse Executive. The Clinical Ladder Oversight Committee will review the written appeal and application information. The Clinical Ladder Oversight Committee may make the decision to level the Registered Nurse.

Recognition and Compensation

To recognize the additional contribution of staff at the different levels of the clinical ladder, a leveling adjustment will be awarded to a Registered Nurse at the time they are promoted to level 3 and to level 4 in the clinical ladder. Leveling adjustment will alter base salary and will, therefore, be included on all hours paid, including benefit hours. Registered Nurses in the level 3 and 4 will receive a leveling adjustment reflective of their ongoing role as clinical expert, preceptor and charge nurse. Therefore, they will not be eligible for the designate and preceptor differential. Preceptor and Designate differentials will be available for level 1 and level 2 registered nurses when they function in the role of preceptor or designate.

When a registered nurse decreases his/her participation in the clinical ladder by moving to a lower level, a leveling salary adjustment will be made to reflect the level at which they are functioning.

Maintenance of Levels

Registered Nurses at level 2 will maintain their level through an annual performance review that demonstrates key contributor in the functions of their job description.

Registered Nurses who have obtained a level 3 or 4 on the Clinical Ladder will be required to annually demonstrate their continued function at these levels for a total of three years. This will be accomplished by an annual renewal application presented to the Clinical Ladder Review Committee.

This renewal application will contain the following information:

- A Completed Renewal Application Form
- In-Service Education records for the past 12 months, including certificates of attendance for outside programs attended

- A Clinical Ladder Manager Letter
- Three peer review forms: one completed by a staff nurse in the next higher level when possible. All of the peers must regularly work with the applicant in the applicant's unit.

OR

- For Registered Nurses whose work environment does not include three registered nurse peers, letters of 360° feedback may be a supplement to available peer letters to total three letters. This may include feedback from a Registered Nurse Manager who is not the direct supervisor, a physician with whom the applicant works regularly, or other co-workers such as Licensed Practical Nurses, Patient Care Technicians or Service Representatives who regularly work together.
- A clinical log is required, which documents specific occurrences or events to demonstrate clinical, leadership and overall level of nursing practice that meets required and weighted criteria of the level for which the Registered Nurse is applying. Each entry must be verified with a witness signature other than the applying Registered Nurse. These entries must reflect consistent activities over the past year with entries from a minimum of eight different months. Attendance at or presenting meetings, in-services, taskforces and CEUs are not specific events demonstrating level of nursing practice.
- “Required documentation” items identified in the criteria for required and weighted criterion for which the Registered Nurse is seeking credit toward leveling.
- Additional supporting documentation must be included to demonstrate completion of the required and selected weighted criteria. This may include:
 - Copies of progress notes, PIE notes, LUCI notes or other documentation that have patient identifiers removed.
 - Verification of participation in a task force or committee from the chair, manager or copies of minutes denoting applicant's participation.
 - Copies of materials, patient education handouts, policies, etc. developed with documentation that verifies the applicant's participation in development.
 - Attendance sheets for educational activities provided which include objectives of in-service.
 - Copies of quality improvement reports, service excellence projects.
 - Patient letters
 - Letters of support from additional members of the multidisciplinary team that articulate examples of meeting specific criteria that this professional has observed.
 - Documentation of examples where decisions or interventions made a difference in a patient outcome.

Sufficient information to demonstrate performance of specific weighted criteria is all that is needed.

If at any time the registered nurse wishes to seek a higher level in the clinical ladder an application for leveling may be submitted. At the higher level the registered nurse will again need to maintain that level for three years prior to going to every other year renewal applications.

Each year the staff nurse may participate in and document different weighted criteria. The Clinical Ladder Review Committee will review these renewal applications and make recommendations to the Vice President of Patient Care Services, Chief Nurse, as to acceptance of the renewal application. The Vice President of Patient Care Services, Chief Nurse, will make the final decision as to the acceptance of the renewal application.

Applications may be approved at a level other than the level applied for by the Registered Nurse. The Clinical Ladder Review Committee will provide written feedback to the Registered Nurse as to what documentation resulted in the recommendation to renew at a level different than sought.

At the time of renewal a Registered Nurse may choose to apply for a higher level in the clinical ladder rather than to seek renewal at their current level. These applications will be handled in the same way as other applications for promotion and must include a complete application rather than the expedited renewal application.

Each renewal application will be reviewed in the same way that original applications are reviewed. If the renewal application is returned the same procedure applies as with an original application. The applicant may resubmit as a level 3 at the next application deadline. In this case, the applicant will need to continue at level 3 practice for one calendar year prior to seeking leveling at level 4.

Failure to complete a renewal application will result in leveling the Registered Nurse at level 2. A Registered Nurse who fails to renew will have the opportunity to be leveled again by reapplying at the time of any of the application deadlines.

Application Sabbatical (Every Other Year Renewal Application)

Once a person has maintained a specific level in the clinical ladder for three years they will move to every other year renewal applications. This is considered an application sabbatical with the expectation that clinical ladder activity will continue throughout both years of the renewal cycle. At the regular renewal application deadline the applicant will submit only a completed Sabbatical Letter and documentation of 16 CEUs completed during this sabbatical year. One copy of the sabbatical letter is sufficient. The following year, a renewal application will be required which is identical to all other renewal applications. Only activity in the final 12 months of this two year cycle should be included in the renewal documentation.

No letter is sent out in response to a sabbatical letter. The review committee will only contact the person submitting a sabbatical letter if there is a question about the sabbatical letter.

If an applicant fails to submit a sabbatical letter and/or evidence of 16 CEUs, he/she will revert back to a level 2. The applicant must submit a renewal application by the next review cycle to maintain their clinical level status.

Employee Discipline for Level 3 and 4 staff

In the event that a level 3 or 4 Registered Nurse is given a written warning in the on-line discipline system that nurse will be ineligible to renew their level for 1 year from the warning. Receipt of a final warning or evaluation with “reevaluation required” while in the clinical ladder, level 3 or 4 will result in leveling to a level 2 at the time of the suspension. Receiving a final warning will result in the registered nurse being ineligible for reapplication to the clinical ladder for a period of 2 years.

In the event of professional misconduct; such as falsification of a clinical ladder application or non-professional behavior; a registered nurse may be given a period of required non-participation in the clinical ladder. This will be determined by the Vice President of Patient Operations, Chief Nurse; the nursing leadership over the clinical area of practice for the registered nurse and a member of the clinical ladder oversight committee.

Voluntary Leveling from Level 4 to 3, Level 3 to 2 or Level 4 to 2

A Registered nurse may choose to decrease involvement with the clinical ladder and seek to return to functioning at level 2, for example, when returning to school or experiencing a change in personal commitments outside of work. This may be done through a letter requesting a return to level 2. The letter must include the current year’s evaluation showing key contributor performance. A level 4 RN may choose to apply for renewal as a level 3 to decrease involvement in the clinical ladder. This renewal will be handled in the same way as other renewal applications, requiring the Registered Nurse provide documentation demonstrating meeting required and selected weighted criteria.

Transfers

Transferring within LUHS from eligible position to eligible position:

A Registered Nurse who chooses to transfer from one clinical setting or department to another may remain in their level following transfer provided there is a position of that level available in the new clinical setting. The leveled Registered Nurse should communicate via letter to the chair of the Clinical Ladder Review Committee that s/he has transferred complete with date of transfer. The Registered Nurse will remain at the level at which s/he transferred and have six months to complete orientation and begin functioning at that level. The renewal date for the transferring Registered Nurse will be the first application deadline after the six month anniversary of the transfer. At this time the Registered Nurse must complete a renewal application. This application may include activities from the previous twelve months, however, the manager and peer letters must be from the new unit. A transferring Registered Nurse is not eligible to seek a promotion in the clinical ladder for the first six months in a new clinical area.

Transferring from a position not participating in the clinical ladder into a position participating in the clinical ladder:

A Registered Nurse who transfers from a position not eligible for participation in the Nursing Clinical Ladder into a position eligible for participation in the Nursing Clinical Ladder will be reviewed by the hiring manager, Chair of the Review Committee and the VP, Patient Care Services to determine an appropriate level. Criteria for this placement will include: most recent clinical experiences, clinical content of the most recent job, per cent of time spent in clinical activities, work history, and professional expertise related to the population of position into which the person is transferring. Following this transfer, the Registered Nurse will provide a clinical ladder application to

maintain their level when they have been in the new position for six months (submitted at the first application deadline following their six months in the new clinical area).

Leave of Absences

A Registered Nurse at level 3 or 4 may be granted an extension to their renewal date for maintaining their level if they have been on an approved, non-personal leave of absence (i.e. medical, military, FMLA) for 25% or more of the renewal period. To be considered for an extension, the Registered Nurse must write a letter to the Vice President of Healthcare Operations, Chief Nurse and chairperson of the Clinical Ladder Oversight Committee, which is received prior to their original renewal date. This letter shall include the length of time they were on LOA, the type of the LOA and their original renewal date. For LOAs that are longer than three months a renewal date of six months following return may be requested upon return from LOA. Material for renewal will be from the immediate previous 12 months. Clinical log entries will be pro-rated for the period of time actually worked. Once a letter of request is received, the oversight committee will consider the request and respond by communicating the renewal date that will be enforced.

Decreasing FTE

A Registered Nurse at level 3 or 4 who decreases their FTE to below 0.5 will be returned to a level 2 position.

Hiring Registered Nurses into the Clinical Ladder

A newly licensed Registered Nurses, will be hired into level 1 of the Clinical Ladder until they complete the required process allowing for transition to level 2.

Registered Nurses who have 9-24 months of experience as a staff nurse, documentation of clinical competence through references and a current RN license in the state of Illinois will be hired into level 2 of the Clinical Ladder. Their level will be confirmed at the time they have completed their system wide and unit specific competency skills check list and they have their first performance appraisal.

Registered Nurses who have greater than 24 months of experience as a staff nurse will be hired into level 2 of the Nursing Clinical Ladder. They may apply for promotion when:

- Orientation is completed,
- They have received their 90 day review and
- Their system wide and unit specific competency skills check list is complete.
- Have had one year of experience on their unit of hire.

They may apply at the next application deadline.

**A SPECIAL THANKS TO ALL OF THE NURSES
WHO HELP DEVELOP LOYOLA'S CLINICAL LADDER:**

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