



**Clinical Nurse Sessions with Appraisers/  
Nursing Unit Tours**



**University of Arkansas for Medical Sciences**

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**What to Expect:** Appraisers will assess a variety of topics with clinical nurses.

Themes	Questions	Answers
<p align="center"><b>General Information</b></p>	<p>How was the Magnet process and application activities communicated to you?</p>	<p><i>Quarterly updates given in NQUEST councils, information shared in staff meeting minutes, updates in Nursing Excellence newsletters</i></p> <p><i>Magnet Stories and evidence were sent to nursing unit/clinic leaders as they were accepted into the document</i></p>
	<p>What unique needs do the patients on this unit have? How do you meet these needs?</p>	
	<p>What do you like about practicing here?</p>	
<p align="center"><b>Communication</b></p>	<p>How do you interface and communicate with nursing leaders?</p>	
	<p>In the past 6 months, how have you interacted with the CNO?</p>	<p><i>State of Nursing Address; Tammy rounds on Saturdays; Talk with Tammy sessions; Unit award presentations; Nurses Week CNO kick-off;</i></p>
	<p>How do nurse leaders support you? Provide an example.</p>	
	<p>How are nurse leaders and the CNO visible and accessible to you? How do you contact the CNO about an issue or question? Give an example.</p>	<p><i>Tammy is always accessible via email JonesTammy@uams.edu;</i></p>
<p align="center"><b>Participation in Shared Decision-Making</b></p>	<p>How do you participate in decisions related to nursing and patient care?</p>	
	<p>How do you communicate with the shared decision making group to provide input &amp; receive feedback?</p>	<p><i>Unit-based councils offer the opportunity to voice concerns and escalate issues. Each unit has a representative to the centralized council Inpatient and Ambulatory NQUEST (Nursing Quality, Experience, and Safety Council). Concerns raised at the centralized council are escalated to coordinating councils (Nursing Quality Oversight Committee, Falls Management Guidance Committee, Nursing Informatics, etc.), peer level councils (Manager, Clinical Specialist, Director Roundtables) or Organizational level councils (Management guidance teams, Medication Safety, Infection Prevention, etc.)</i></p>

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	On what shared governance committees and councils are you a member? As an officer (chair or co-chair)? How did you become a member and/or officer?	<i>If your unit does not have a current unit-based council, talk about the structure of a unit-based council and challenges your unit has experienced</i>
	Provide an example where you were involved in improving technology, work-flow or your practice environment.	<i>Doesn't have to be new technology – could be equipment or processes that are new to your patients/population, e.g., PD cyclers, external female catheters, US guided PIV insertion, etc.</i>
<b>Professional Development</b>	Who is involved in activities of professional nursing organizations? How is this supported and rewarded by the hospital? (i.e. scheduling around requests, reward through clinical ladder program)	<i>Think patient specialty organizations (AORN, ONC, AWHONN, etc.). Membership in a specialty organization receives extra points on annual performance appraisal. Nationally certified RNs receive 8 EDU hours per year to attend conferences and engage in activities to maintain certification</i>  <i>Professional development funds are available thru the CNE for RNs to attend specialty conferences</i>
	Who has taken advantage of hospital resources supporting education advancement and certification? Please share.	
	What expectations have been set to obtain higher education and specialty certification?	<i>Each unit has a goal to increase BSN and certification rates of 1% per year</i>
	How does nursing support your professional development? (in addition to online and classroom, consider educational support for advanced degrees and certification)	<i>UAMS offers 50% tuition discount for baccalaureate degrees at UofA schools. Achieving BSN receives salary increase.</i>  <i>UAMS supports obtaining national certification through exam fee reimbursement, paying for time to test, and a salary increase. Certified nurses receive 8 EDU hours for activities to maintain certification each year.</i>
<b>Recruitment &amp; Retention</b>	Who is the newest nurse to the hospital? What brought you to practice here?	
	Who has the longest tenure? Why do you stay here to practice nursing?	
	Are there vacancy or turnover problems on your unit? What has the hospital done to address recruitment and retention?	<i>We have both passive and active recruitment strategies. Passive includes UAMS Nurses Facebook page, featurettes in the Arkansas State Board of Nursing magazine, job positions featured on social media, sign-on bonuses, etc. Active recruitment efforts include Meet the Leaders event for nursing students, Nursing Expo, trips to visit nursing students at surrounding colleges, CCA Program and Job Shadowing program</i>

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	How are clinical nurses involved in discussions of recruitment and retention?	<i>Unit retention efforts include unit recognition programs (e.g., nurse of the month, GEM award, etc.) Each unit has a certification plaque recognizing nationally certified nurses. If you have an award wall or kudos board, share those types of programs</i>
<b>Performance Reviews</b>	How is your performance evaluated? (manager, self-evaluation, peer feedback)	<i>Annual evaluation consists of 2 processes: (1)online self-evaluation, peer evaluation which is uploaded into Workday and manager evaluation; (2) every nurse is required to submit a portfolio with evidence of completion of requirements in the Annual Performance Appraisal Guide to promote up the RN Clinical Ladder. During face-to-face meeting with manager, current engagement in activities should be evaluated and professional development goals should be documented</i>
	How do you participate in peer -feedback as part of your performance evaluation?	<i>Peer evaluation forms are typically handed out by managers or handed out by peers during annual evaluation time. Peer evals are discussed with individuals during their annual evaluation meeting with their manager and uploaded to Workday.</i>
	Discuss the last professional goals you created, where they are documented and how you chose those goals.	<i>Professional development goals should be documented in Workday as part of the annual evaluation</i>
<b>Patient Care Quality</b>	Describe the role of nurses on your unit in the improvement of patient care.	
	What quality indicators are you measuring on your unit? What results are you most proud of and what are the ones of concern? What are you doing to address? What comparison are you using to benchmark your data against? - Patient satisfaction - Nurse satisfaction - Clinical outcomes (falls, HAPI, CAUTI, CLABSI, etc.)	<i>Each unit should have at least 3 unit goals that are specified on the Improvement Huddle Boards.</i>
	Provide an example of a diverse patient care need and how it was handled.	
	Describe ways you are empowered to make patient care decisions and to practice nursing autonomously.	<i>Nurse driven protocols, standing orders, algorithms, etc.</i>
<b>Patient Education</b>	What educational resources are available for patients and families on this unit?	
	How do measure the effectiveness of your patient/family education?	

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<b>Evidence-Based Practice (EBP) &amp; Research</b>	What is your role in evidence-based practice (standards) and research?	<i>Reading nursing articles and engaging in evaluation of literature and review of policy and practice is built into the annual appraisal guides for each level in the clinical ladder</i>
	How is conduction of EBP projects and research studies supported and encouraged by nursing leaders and the organization?	<i>The UAMS EBP model guides nurses through development of a clinical question, gathering and appraising the evidence and implementation of new practice. The Director of Research and Excellence (Rebekah Thacker) provides consultation on projects as needed. Evaluation of literature is part of the annual performance appraisal guide and receives extra points during annual evaluation</i>
	What is the most recent EBP your unit/department has implemented?	
	What resources are available to you to conduct EBP projects and research studies?	<i>The UAMS EBP model guides nurses through development of a clinical question, gathering and appraising the evidence and implementation of new practice. The Director of Research and Excellence (Rebekah Thacker) provides consultation on projects as needed. Evaluation of literature is part of the annual performance appraisal guide</i>
	How are EBP and research disseminated internally and externally? How are nurses involved in the dissemination of EBP and research?	<i>Internally-NQUEST councils, unit-based poster presentations, unit-based councils Externally-Specialty conferences, UAMS Research Day</i>
	Provide an example where you applied research or evidence based practice into practice.	<i>Think of standardized practice guidelines for your specialty and how your practices in patient care are supported by those guidelines</i>
	What kind of interdisciplinary and interprofessional support and resources are available to you for patient care?	
	Who are the experts that support you when caring for complex patients? Give examples.	<i>Think Clinical Specialists, APRNs, Specialty Nurses (WOCN, IP, Vascular Access, etc.)</i>
	How does the organization support nurses to be involved in the community?	<i>Community Service is encouraged and credit is given during annual performance evaluation. Some volunteer opportunities are paid hours.</i>

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<b>Resources &amp; Support</b>	How does the organization recognize nurses, groups of nurses and interprofessional teams for improving patient care and addressing strategic priorities?	<ul style="list-style-type: none"> <li>* <i>Outstanding Area of the Month-for units achieving outstanding performance in quality metrics and patient experience</i></li> <li>* <i>Monday Metrics-recognition of nurses for achieving improvement of organizational priorities</i></li> <li>* <i>High-Reliability Awards-units that go long periods without incidents for quality outcomes</i></li> </ul>
	Describe how you are involved in improving documentation and the computer (IT) processes.	
	What resources do you have to handle patient complaints or ethical issues?	<ul style="list-style-type: none"> <li><i>Use AIDET model for services recovery</i></li> <li>* <i>Acknowledge</i></li> <li>* <i>Introduce</i></li> <li>* <i>Duration (give an accurate time estimate)</i></li> <li>* <i>Explanation</i></li> <li>* <i>Thank you</i></li> </ul> <p><i>Ethical issue - Ethics consultation service</i></p> <p><i>Patient complaints-Patient Safety &amp; Risk office</i></p>
	How are you encouraged to use innovation and autonomy to provide patient care?	
<b>Professional Practice Model/Care Delivery Systems</b>	Give an example of how you applied an aspect of your Professional Practice Model (PPM)	
	How is clinical nurse input sought in the development, implementation, and evaluation of the professional practice model?	<p><i>In August 2021 the Inpatient and Ambulatory centralized council members reviewed the PPM and engaged in an activity to establish nursing values. The theme of the PPM was voted on by the council and UAMS programs were incorporated into the pillars of excellence</i></p>
	What is/are the foundations/elements of your care delivery systems? (Relationship-based care, patient/family-centered care, staffing and scheduling, patient populations, etc.)	<p><i>Patient-family centered care; units are organized by patient population but there are overflow patients admitted off-service. Assignments are made taking into account skill-mix and patient complexity</i></p>
	Describe how the care delivery model has been implemented in a unit. What model is utilized, why was it chosen, how does it involve the patient and family?	<p><i>Patients and families are at the heart of our care. We deliver patient-family centered care in a collaborative, interprofessional, high quality way.</i></p>
<b>Interprofessional Relationships &amp; Collaboration</b>	Describe your relationship with other disciplines and physicians.	
	How do you collaborate with other departments and disciplines?	
	What are some nursing initiatives and/or interprofessional collaboratives that have improved patient care delivery?	
	What structures are in place to support nurses' safety in their work environment?	

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<b>Workplace Safety, Well-being, Diversity, Equity, &amp; Inclusion</b>	How are clinical nurses involved in decision-making related to workplace safety? What is the clinical nurse's role in the work environment/ work place safety process?	<i>Culture of Safety survey is included with every Employee Engagement survey. Results are used to identify areas of improvement.</i>
	What initiatives have been implemented to improve safety of the nurse practice environment? What initiatives are currently being implemented? Why?	
	Describe one workplace safety initiative that was implemented in the last 12 months and discuss its resolution.	
	How do you participate in initiatives that promote workplace safety, well-being, diversity, equity, and inclusion? Provide an example.	
<b>Stress &amp; Burnout</b>	What types of resources are available for nurses who are experiencing stress and burnout?	<i>Employee wellness support: *8 pillars of wellness *employee wellness convention *relaxation rooms/gardens for breaks *mindfulness sessions *employee assistance program</i>
	Provide examples of wellness programs that are in place to improve the health and work life balance for nurses.	<i>Employee wellness support: *8 pillars of wellness *employee wellness convention *relaxation rooms/gardens for breaks *mindfulness sessions *employee assistance program</i>
<b>Other Questions</b>	If you could change anything about practicing here, what would it be?	
<b>Review the SOEs that specifically discuss your unit/department and/or shared governance council: TL3EO (Nursing Strategic Plan), TL9 &amp; TL10 (Mentoring &amp; Succession Planning), TL11EO (Clinical Nurse Advocacy for Resources), TL13EO (Improvements in Patient Care or Practice Environment), SE1EO (Clinical Nurse Involvement in Org Decision-Making), SE2EO (Clinical Nurse Affiliation with Professional Organizations), SE3 &amp; SE4EO &amp; SE5 &amp; SE6EO (Certification Goals), SE7 &amp; SE8EO (Higher Education Goals), SE9EO &amp; SE10EO (Continuing Education), SE11 (Transition to Practice), SE12 (Community Volunteerism), SE13 (Delivering Cultural/Socially Sensitive Care), SE14 &amp; SE15 (Nurse Recognition), EP1EO (PPM), EP3EO (Nurse Satisfaction) EP4 (Partnerships), EP10 &amp; EP11 (Clinical nurses' Collaboration for Unit Need), EP13 (Performance Review), EP14 (Autonomy in Practice), EP15 (Ethical Resources), EP16EO (Workplace Security/Safety), EP17EO (Patient Safety). Be familiar with unit-level outcomes: EP3EO (Nurse Satisfaction), EP19EO - EP22EO (Clinical Outcomes &amp; Patient Satisfaction).</b>		