

1. When was the Clinical Recognition Program implemented?

The Patient Care Services Clinical Recognition Program was implemented in 2002. It provides a way to formally recognize clinical staff for their expertise in caring for patients and families. The Clinical Recognition Program recognizes that valuable contributions are made by staff at every level (entry, clinician, advanced clinician, clinical scholar); and that excellence is a goal common to all clinicians.

2. Who is eligible for the Clinical Recognition Program?

Clinicians from six disciplines in Patient Care Services - Nursing, Physical Therapy, Occupational Therapy, Respiratory Therapy, Social Work and Speech-Language Pathology – whose primary responsibility is direct care of patients, are part of the program. Within the first year of employment at MGH, all staff are recognized for their expertise at either Entry or Clinician level of practice.

3. What is Entry level practice?

Clinicians practicing at the Entry-level are learning to apply newly acquired knowledge and skills to a multitude of patient care situations. Entry-level clinicians initially draw on learned facts and rules to organize care and guide practice. As they gain experience, they are increasingly able to recognize the uniqueness of each patient situation and modify care to meet each patient's needs. The Entry-level clinician understands the role of other disciplines and consults with peers in developing a plan of care.

4. What is Clinician level practice?

Those practicing at the Clinician level have acquired broad experience in caring for patients and have often developed a sound understanding about the care of a particular patient population. They act as a resource to other clinicians in their practice area and actively act as strong advocates for patients. They routinely draw on learned facts and experience as well as an understanding of possible outcomes when designing a plan of care. Their experience allows them to recognize patterns in clinical practice and use this knowledge as they make clinical decisions.

5. What is Advanced Clinician level of practice?

Clinicians at the Advanced Clinician level have typically acquired in-depth knowledge about the care of a particular patient population and an appreciation for the many factors that influence care. They focus on probabilities versus possibilities in a given clinical situation. They influence practice on their units by sharing their knowledge and/or putting systems or resources in place to ensure excellence in patient care.

6. What is Clinical Scholar level of practice?

Clinicians at the Clinical Scholar level demonstrate exquisite foresight in planning patient care, are recognized as experts in their area of practice, are adept at negotiating conflict and collaborating with others. They are able to respond intuitively to patient needs and to comfortably engage in clinically sound risk taking.

7. In the Clinical Recognition Program materials there are frequent mentions of the clinicians “current practice”, what does this mean?

In developing the Clinical Recognition Program the Professional Development Committee looked to the work by the Dreyfus brothers on skill acquisition as well as the work of Patricia Benner, RN, PhD. From their work the committee understood that in order for clinicians to gain expertise they must be actively engaged in their clinical work; challenging their preconceived notions, expectations and/or theory by means of encounters with actual clinical situations.

This requires time in the practice setting caring for and directly accountable for a caseload of their own patients. Building on this theory, the structure and process workgroup identified that six months of consistent practice at the applied for level would allow for evidence that the clinician is at the level they are applying for.

Current practice is then defined as the most recent six months of practice prior to the clinician submitting their portfolio. Therefore, all elements in the portfolio- the narrative, letters of support and the cover letter- must reflect the clinicians practice in the previous six months on their current unit/department.

8. I just transferred to a new unit after several years on my previous unit. Can I submit my portfolio based on my practice on my previous unit?

Your portfolio must reflect current practice that is defined as the most recent six months of your practice. Therefore, at the time you submit your application you must be practicing on the unit/department for six months with all elements of your portfolio- the narrative, letters of support and the cover letter- reflecting your current unit/department.

9. I am a resource nurse; can I participate in the clinical recognition program?

The Clinical Recognition Program is designed to celebrate clinicians providing direct care to patients and families. In 2001 the Professional Development Committee developed the themes, levels of practice and criteria based on narratives written by MGH clinicians who were actively engaged in caring for a patient caseload, were in direct relationship with those patients and accountable for their plan of care.

Nurses who are in the resource role are eligible for the clinical recognition program if they spend the majority of their time directly caring and accountable for their own caseload of patients.

10. How long do I have to work at MGH before I can apply for advanced clinician or clinical scholar?

Once recognized at clinician level of practice, an applicant is eligible to apply for advanced clinician or clinical scholar. This can occur within six months of employment. Because this program celebrates practice, a minimum number of years of experience are not required. Instead, the focus is placed on your level of expertise. The program recognizes that valuable contributions are made by staff at every level and that excellence is a goal common to all.

11. Is seeking recognition at the Advanced clinician or Clinical Scholar level mandatory?

No. Seeking recognition at the Advanced Clinician and Clinical Scholar levels is voluntary. The decision about whether to seek recognition is yours to make.

12. Is there an educational requirement to apply for Advanced Clinician or Clinical Scholar?

There is no educational requirement for advanced clinicians or clinical scholars. Staff who have received associate, diploma, bachelor's, master's and doctoral degrees are eligible for recognition and have been recognized.

13. Do you have to publish in order to be recognized as an Advanced clinician or Clinical Scholar?

While some advanced clinicians and clinical scholars have published articles in various journals, it is not a requirement for recognition at any level in the program.

14. Is it true that to be recognized a staff must be certified in an advanced competency such as ECMO, CVVH?

While some clinicians who have been recognized are accomplished in those therapies and others, those skills are not a requirement for recognition. Recognition is based on practice and whether or not clinicians meets the criteria for the level they are applying to, not their ability to perform a specific skill, therapy or intervention.

15. Do clinicians have to be a member of a committee to be recognized as an Advanced clinician or Clinical Scholar?

You do not have to be a member of a committee to be eligible for recognition.

16 How do I select a narrative for my portfolio?

Your narrative should be about a current clinical event or situation that is representative of your practice within the past six months and it must reflect the level of practice for which you are seeking recognition. Think of a situation where you felt your interventions made a difference or one that captures the essence of your practice- perhaps one of the situations that you thought about as you used the self-reflection tool. You can find a guide to writing narratives in your unit's Clinical Recognition Program resource book. The guide is also available on line at <http://massgeneral.org/pcs>

17.Can the Operations Coordinators and others in non-clinical roles write letters of support?

One of the many strengths of our practice model is the way in which it fosters teamwork. Operations Coordinators, patients, families, and others are important members of the care team and are familiar with some aspects of the clinician's role. However, non-clinicians are not able to assess all aspects of the clinical role. For this reason, only professional clinicians are eligible to write letters of support.

18. What is the Review Board's process in reviewing my portfolio?

Each member of the Review Board reads and reviews your portfolio as a way to understand your practice. They look for evidence of the criteria in the three themes of practice, at the level for which you are applying. At their weekly meeting, questions are developed that will serve as the foundation for the interview. Three members of the Review Board conduct the interview; the lead interviewer is always a member of your discipline. The purpose of the interview is for the questions raised by the Review Board to be addressed and for you to have the opportunity to provide further information that your practice reflects the level that you are applying for which you are applying. Following the interview, the team presents a detailed summary of the interview to the whole Review Board. After a thorough discussion based on the information from the interview

and portfolio, the Review Board members make a decision on recognition. All decisions are made by consensus.

19. I have heard that the interview part of the process is intense. How do I prepare for it?

Many clinicians feel that talking about themselves and their practice is difficult. Staff who have been recognized tell us the best way to prepare for the interview is to:

- Review your portfolio
- Ask a colleague, manager, or clinical specialist to conduct a mock interview with you
- Talk with someone who's been through the process who can share their experience and offer advice
- Review the "preparing for the interview" tip sheet on the Clinical Recognition web site [interview tips](#)
- Relax and remember you know your practice and the interview is an opportunity for you to discuss it

20. How can the Review Board understand the diversity of clinical practice within each discipline at the MGH?

The Review Board is comprised of members of each of the six disciplines within Patient Care Services. Members of the Review Board are experienced clinicians who are familiar with the range of practice within their own discipline. If a portfolio touches on a practice area unfamiliar to Board members, the Board brings in expert clinical consultants to help them understand practice in that area.

21. How are individuals practicing at the Clinician level rewarded?

All clinicians in Patient Care Services are expected to perform at the Clinician level after an appropriate period of orientation (the length of this period will vary depending on a clinician's needs). Practice at the Clinician level represents a level of excellence that is valued and rewarded by your manager as well as current systems. Your manager, for example, may choose to offer you a portfolio or journal, or thank you for the excellent work you do everyday. In addition the MGH offers annual salary and benefits review, there are opportunities for certification, tuition reimbursement, participation in collaborative governance, and eligibility for professional awards.

22. What happens if you transfer to a new practice area? Are you still recognized at the same practice level?

The group charged with implementing the Clinical Recognition Program has not yet developed a recommendation regarding transfers by Advanced Clinicians and Clinical Scholars. This will be best addressed at a later date by clinicians who have gone through the recognition process and are familiar with the program. Over the next few years, clinicians who have been recognized at the Advanced Clinician and Clinical Scholar levels will be asked to participate in a group that considers this issue and others, and that makes recommendations to Jeanette Ives Erickson, RN, MS, Senior Vice President of Patient Care and Chief Nurse.