

MICHAEL E. DEBAKEY VETERANS AFFAIRS MEDICAL CENTER FY-2020

**FUNCTIONAL STATEMENT
REGISTERED NURSE: NURSE III**

I. ADMINISTRATIVE QUALIFICATION STANDARDS

CITIZENSHIP	RN LICENSURE	EDUCATION	RN EXPERIENCE	OTHER
United States	Current, full, active, and unrestricted in any US State, Commonwealth, Territory, or the District of Columbia	Master of Science in Nursing (MSN) or master's in a field related to nursing with BSN or bachelor's in a field related to nursing Master of Science in Nursing (MSN) from Bridge Program (a BSN is not issued or required) Doctoral degree in nursing or in a field related to nursing	2 to 3 years	(Upon Appointment only) (1) Satisfactory physical examination as determined by the Employee Health Unit (2) Verbal and written English language proficiency

All schools of nursing must be accredited by the appropriate State agency, and accredited by either the Accreditation Commission for Education in Nursing (ACEN) or the Commission on Collegiate Nursing Education (CCNE) at the time the program was completed.

FUNCTIONAL STATEMENT ISSUED:

I RECEIVED A COPY: _____ **DATE:** _____
Employee's Signature

IMMEDIATE SUPERVISOR: _____ **DATE:** _____
Immediate Supervisor's Signature

File a signed receipted copy in the RN's competency folder.

Additional standards	EDUCATION	BOARD CERTIFICATION	PRESCRIPTIVE AUTHORITY
NURSE PRACTITIONER	Master of Science in Nursing (MSN) with a major as a nurse practitioner	Full and current board certification as a nurse practitioner from a VA-approved certifying body, which must be in the specialty to which the individual is being appointed or selected	Requires a scope of practice
CLINICAL NURSE SPECIALIST	Master of Science in Nursing (MSN) with a major in the clinical nursing specialty to which the nurse is to be assigned	Full and current board certification as a clinical nurse specialist from a VA-approved certifying body, which must be in the specialty to which the individual is being appointed or selected	Requires a scope of practice
CLINICAL NURSE LEADER	Master of Science in Nursing (MSN) with a major as a clinical nurse leader	Full and current board certification as a clinical nurse leader from a VA-approved certifying body	Not eligible for prescriptive authority; is not an advanced practice nurse

II. GENERAL DESCRIPTION OF ASSIGNED DUTIES

The registered nurse provides care and counseling of persons or in the promotion and maintenance of health and prevention of illness and injury based upon the nursing process which includes systematic data gathering, assessment, appropriate nursing judgment, and evaluation of human responses to actual or potential health problems through such services as case finding, health teaching, health counseling; provision of care supportive to or restorative of life and well-being; and executing medical regimens including administering medications and treatments prescribed by a licensed or otherwise legally authorized provider (Alabama Board of Nursing). The nurse's primary commitment is to the patient, whether an individual, family, group, or community (ANA Code of Ethics for Nurses).

Birmingham VAMC (BVAMC) is a Level 1a major interdisciplinary teaching facility with service-lines serving medical, surgical, and neurological inpatients and outpatients, with a Level III Emergency Department, and multiple community-based outpatient clinics (CBOC). There is a large outpatient psychiatric population, with admissions for medical co-morbidities. The Southeastern Blind Rehabilitation Center provides services in a residential setting. Home-Based Primary Care is provided in the veteran's home.

Scope of Nurse III: Executes position responsibilities that demonstrates leadership, experience, and creative approaches to management of complex patient care. The Nurse III registered nurse demonstrates (a) Leading and organizing delivery of care to assure continuity of care and peer accountability for practice, including access to care and discharge planning; (b) Using advanced clinical knowledge/judgment to promote staff involvement in planning, decision-making, and evaluating outcomes, (c) Functioning as an expert in clinical practice and/or areas related to the assigned roles and responsibilities, (d) Systematically evaluating current practice, and formulating outcomes for groups of patients and/or organizational processes within an area of expertise, (e) Guiding, developing, and supporting staff from a leadership perspective, and (f) Using professional standards of care, scientific evidence, and practice to evaluate programs and/or service activities. (VA Handbook 5005, Part II, Appendix G6). The Nurse III registered nurse is an expert nurse who demonstrates expertise in leadership at the systems level that is sustainable, experience, and creative approaches to management of complex situations. Roles may include, but are not limited to

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clinical nurse leader, clinical nurse specialist, nurse coordinator, nurse educator, expert clinician, nurse manager, nurse practitioner, nurse recruiter, or researcher. Program or service level outcomes must be broad and complex and can be demonstrated at any organizational level within a program, service, facility level, VISN, or VACO. The focus must be broad and complex and must be demonstrated at the macrosystem level. The expert nurse incorporates professional standards and implements broad-reaching evidence-based change. Leads and organizes delivery of services at the to assure continuity and peer accountability for practice.

III. CAREER PATHS

Clinical

Clinical Nurse Leader (CNL): Must have a minimum of a master's degree in nursing/clinical nurse leader major and board certification as a CNL from a VA-approved certifying body required. Functions as a generalist at the point of care and manages and coordinates care of individuals and clinical groups. Responsible and accountable for the coordination of care focused on patient transition through the continuum of care, patient and family education, patient self-management after discharge, and supporting factors that impact customer satisfaction. Applies the nursing process and care management principles within a collaborative, interdisciplinary practice setting, which will then enable effective implementation of health promotion and prevention practices, management of acute and chronic illnesses, and attainment of appropriate lengths of stay and the effective level of care. Core functions include daily assessment of patient care needs to determine the most appropriate use of expertise in clinical coordination, patient and staff education, attention to systems issues that require intervention, and quality and performance measures. Assists the nursing staff in the provision of complex patient care.

Direct Care Nurse/Staff Nurse: Responsible and accountable for all elements of the nursing process when providing and/or supervising direct patient care. Assesses, plans, implements and evaluates care based on age-specific components. Assumes responsibility for the coordination of care focused on patient transition through the continuum of care, patient and family education, patient self-management after discharge, and supporting factors that impact customer satisfaction. Considers all characteristics of the individual, including age and life stages, state of health, race and culture, values, and previous experiences. Administers medications and procedures per established policies and guidelines. Influences care outcomes by collaborating with members of the interdisciplinary team. Core elements of performance include knowledge and active participation in unit/program level quality improvement processes and initiatives as well as customer service programs.

Supervisory

Nurse Manager: Master's degree in nursing or in a field related to nursing preferred. Designated first-line supervisory authority, responsibility, and accountability for the 24/7 operations of their units, ensuring that subordinate personnel provide timely nursing care which complies with generally accepted standards of clinical practice. This includes the authority to accept, amend, or reject the work of subordinates. Has continuing responsibility for all the following functions: (1) Planning work to be accomplished by subordinates, setting priorities and preparing schedules for completion of work; (2) Assigning work to subordinates based on priorities, selective consideration of the difficulty and the requirements of the assignments, and the capabilities of subordinates; (3) Evaluating the performance of subordinates; (4) Making recommendations for appointments, advancements or reassignments of subordinates; (5) Giving advice, counsel, or instruction to subordinate personnel on work and administrative matters; (6) Hearing and resolving complaints of subordinates and referring more serious complaints not resolved to higher level supervisors; (7) Recommending and/or taking disciplinary action where appropriate; and (8) Identifying developmental and training needs of subordinates and providing or making provision for such development and training (VA Handbook 5007, Part III, Chapter 8). Responsible for maintaining continuous accreditation readiness of his/her units. Responsible for performance improvement data, customer service/patient satisfaction, patient and employee safety, interviewing applicants, employee relations, standards of care and practice, the work

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environment, and accreditation and regulatory standards. Actively develops and manages collaborative partnerships with physicians and other clinicians. Responsible for staffing their units on a continual basis (24/7), ensures staffing meets established nursing hours per patient day requirements, and works with other Nurse Managers to identify and share resources. Responsible for time scheduling of the unit, coaches staff, deals with employee conduct and performance issues, completes recurring reports and performance evaluations in a timely manner. Participates on service and medical center committees and task forces to improve nursing practice and patient care. Identifies educational needs of staff and ensures that these needs are addressed. Has an integral role in supporting and facilitating student nurse clinical experiences, as well as orienting new Nurse Managers. Works in partnership with the union and adheres to EEO principles. Will designate a cross-covering Nurse Manager in his/her absence to handle administrative and clinical issues, such as staffing coverage, granting leave, and patient and/or staff issues.

Assistant Nurse Manager: Bachelor's degree in nursing preferred. Serve as an assistant with line authority to the unit Nurse Manager in providing leadership, supervision, and direction to nursing staff. Performs delegated duties, i.e., develops time schedules, completes performance evaluations, and initiates or recommends disciplinary actions, responsible for performance improvement, customer service/patient satisfaction, patient and employee safety, employee relations, standards of care and practice, the work environment, and accreditation and regulatory standards. Actively develops and manages collaborative partnerships with physicians and other clinicians.

Education Coordinator: Master's degree in nursing or in a field related to nursing preferred. Directs and coordinates activities of the Nurse Educators. Serves as a resource to staff and to the facility, and serves as a mentor or preceptor to new nurses, student nurses, and other staff. Works collaboratively with Schools of Nursing and staff regarding patient care needs and staff development issues. Will actively maintain the standards required by the Alabama Board of Nursing (ABN) and according to the ANA Scope and Standards of Practice for Nursing Professional Development. Will demonstrate excellent clinical practice and skills, problem-solving skills, and decision-making skills. Responsible for facilitating educational activities related to CPRS, VISTA, and BCMA, and directs BLS and ACLS classes.

Nurse Coordinator: Bachelor's degree in nursing preferred. In the absence of the Associate Director for Patient Care Services during non-administrative tours, is designated authority, responsibility, and accountability for managing and directing employees, staffing units, and allocating resources as necessary during the non-administrative tours of duty due to tour-to-tour unplanned leave or a change in patient acuity. Rounds to evaluate patient care. Plays an important supportive role in all patient and employee initiatives, such as encouraging staff to complete mandatory education modules. Assists the Nurse Managers by contributing to performance evaluations, educational development for the non-administrative tour employees, and meeting performance measures. Is a consultant to physicians in patient care and resources and discharge planning. Collaborates with the AOD as needed for decisions related to on-going patient care and actions taken in emergency situations and disasters. Will cover each other's planned and unplanned absences.

Other Nursing Supervisors: Bachelor's degree in nursing preferred. Scope of supervision and responsibilities is based upon the assignment from the service or service line. Practice is based on the nursing process and evidence-based research. Core competencies will depend upon the role and competency checklist.

Advanced Practice

Clinical Nurse Specialist (CNS): Must have a minimum of a master's degree in nursing/clinical nurse specialist major, and board certification as a CNS from a VA-approved certifying body required. A Scope of Practice will guide advanced practice beyond basic education and is renewed every two years. As an advanced practice registered nurse (APRN), is an expert clinician in a specialized area of nursing practice. The specialty may be identified in terms of a population, setting, or medical subspecialty. Designs, implements, and evaluates patient-specific and

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population-based programs of care. Influences care outcomes by providing expert consultation and guidance to nursing staff within the field of his/her specialty and by implementing improvements in health care delivery systems. Assesses plans, implements, and evaluates the total health care of a specialized patient population in a clinical specialty area. Resolves unusual or unique patient care problems or situation which requires analytical, interpretive, and constructive thinking. Might have prescriptive authority with a panel of patients.

Nurse Practitioner (NP): Must have a minimum of a master's degree in nursing/nurse practitioner major, and board certification as an NP from a VA-approved certifying body required. A Scope of Practice will guide advanced practice beyond basic education and is renewed every two years. As an advanced practice registered nurse (APRN), has prescriptive authority with a panel of patients. Core functions include diagnosing and treating acute and chronic health care problems, performing adult care check-ups, and prescribing medication and treatments. Diagnoses and manages minor trauma including suturing. Teaches health promotion and disease prevention to patients.

Consultant

Accreditation Coordinator: Responsible for continuous readiness of Patient Care Service for accreditation and regulatory agency review and compliance (Joint Commission, Inspector General, etc.); performance and quality measures; and program monitors and actions (Patient Family Centered Care [PFCC] and the CAT Team). Manages processes related to survey readiness, IPEC monitors, SAIL data, EPRP data, tracers, chart reviews, and environment of care surveillance. Oversight for falls program. Compiles data and communicates information to nurse leadership in a format that is conducive for utilization in decision making, strategic planning and performance improvement. Rounds frequently to work with staff at the unit-level on accreditation readiness issues. Troubleshoots issues related to quality of care and provides real time feedback to nursing leadership. Responds on site in real time as incidents occur to investigate and prepare follow-up reports during administrative hours; follows-up next administrative day on occurrences during non-administrative tours.

Care Coordinator/Case Manager: Possesses thorough knowledge of InterQual criteria, utilization management processes, clinical documentation requirements, current standards of care, and compliance guidelines. Accountable for utilizing critical thinking skills and sound judgment to ensure positive outcomes, maximizing third-party collections and delivering quality patient care performance improvement activities. Will develop and coordinate seamless transitioning of patients throughout the inpatient and outpatient care process with a focus on discharge planning needs. Demonstrates knowledge and ability to apply principles of evidence-based practice. Will provide support at the unit level, the service level, and the organizational level.

Inpatient: A key aspect of the role will be discharge planning assessment and implementation of home health services, supplies, and activities required to successful transition the patient to the appropriate non-acute care setting.

Outpatient: Collaborates with the Teamlet (patient, Primary Care Provider, and Clinical Support Technician) and larger Team (family/caregiver, internal and community-based services involved in providing care to the patient).

Nurse Educator: Responsible and accountable for the development and delivery of Patient Care Service staff development and education programs. Both Staff Development Educators and unit-based Educators will be responsible for the orientation of new employees, evaluation of their progress in the orientation process, and for developing and implementing a learning plan for improving identified deficiencies. Unit-based Educators will assume responsibility for the initiation and process for completing annual staff competencies. Works collaboratively with Patient Care Service leadership and all Services within the medical center and its affiliating CBOCs in the development and implementation of Patient Care Service and facility-wide educational programs and initiatives. The incumbent will actively participate in workshop/continuing education programs designed for career advancement as well as function in classroom teaching environments, clinical arenas, and as a group facilitator during training and implementation of changes in nursing related computer applications.

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Nurse Educators, Operating Room and Sterile Processing Services: Certification from a VA-approved certifying body in area of practice (i.e. CNOR and/or CRCST or higher) preferred; required for SPS. Demonstrates established knowledge and skills in sterile processing or operating room experience. Demonstrated ability to assess and prioritize training needs of the staff and complete competency assessments. Demonstrated computer skills to create and maintain data base performance improvement indicators.

Nurse Recruiter: Responsible for the recruitment and retention programs and other aspects related to the maintenance of a highly competent workforce for Patient Care Service. Functions as an internal consultant in evaluating programs, resources, and services. Initiates and maintains databases, prepares, reports, and works collaboratively with others to assess variances and project needs. Facilitates recommendations for systems and/or resource changes that will serve to improve the work force and resource utilization. Works collaboratively with nursing administration and Human Resources Management Service to meet resource needs. Forecasts needs based on trends in the VA and in the community. Conducts employee exit interviews and trends data. Serves as the Coordinator for NHPPD VA Staffing Methodology and extracts staffing data from VANOD for trending and reporting. Coordinates the DAISY Award program. Coordinates Nurses Week.

Nursing Informatics Coordinator: Possesses an understanding of clinical treatment modalities, organization and administration of the VA healthcare delivery systems, educational principles, clinical information systems, accreditation and regulatory standards, and program development. Assures that all managers are supported in the use of information technology, as well as educated and supported with tools. Responsible for menu development, periodic reviews of keys and menus, recurring reports as assigned, and collaborating with OI&T Service as needed. Rounds frequently to work with staff at the unit-level on computer and BCMA issues. Serves as the BCMA Coordinator and the Essentris Coordinator.

Performance Improvement (PI) Coordinator: Responsible for providing leadership for Patient Care Service in the aspects of assessment, measurement, and process improvement with regards to patient care and organizational functions. Will develop and coordinate Patient Care Service Performance Improvement Plan. Will provide active support at the unit level, the service level, and the organizational level. Responds on site in real time as incidents occur to investigate and prepare follow-up reports during administrative hours; follows-up next administrative day on occurrences during non-administrative hours. Tracks, analyzes, and trends process activities in patient care and organizational functions. Manages processes related to root cause analysis actions, peer review actions, process actions, LEAN actions, EPRP monitors, and employee surveys. Works in collaboration with the Accreditation Coordinator for tracers and chart reviews. Extracts and trends VANOD data on HAPU. Rounds daily to monitor restraint usage and falls; investigates each incident. Works with staff at the unit-level on PI issues and creates and maintains the quarterly and annual dashboards for the units. Serves as the PCS Service Recovery Contact. Prepares the annual Nursing Outcomes report.

Other roles, such as Infection Control Nurse, MRSA Coordinator, Patient Safety Coordinator, etc.: Practice is based on the nursing process and evidence-based research. Core competencies and role expectations will depend upon the role and competency checklist, as directed by the immediate supervisor.

IV. FUNCTIONS OF ASSIGNED DUTIES: PRACTICE QUALIFICATION STANDARDS

NOTE: Supervisors can attach specific position duties and additional roles as needed to this Functional Statement.

DIMENSION OF NURSING PRACTICE: PRACTICE
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Practice: Provides leadership in the application of the nursing process to patient care, organizational processes and/or systems, improving outcomes at the program or service level.

1. The nurse is responsible and accountable for individual nursing practice and determines the appropriate delegation of tasks consistent with the nurse's obligation to provide optimal care (ANA Code of Ethics for Nurses).
2. Leads and organizes delivery of care to assure continuity of care and peer accountability for practice, including access to care and discharge planning.
 - 2.1. Uses sound clinical judgment in assessing, planning, implementing, documenting, and evaluating nursing care, based on the ANA Standards of Nursing Practice.
 - 2.2. Guides staff in the application of critical thinking and process improvement to improve patient care.
 - 2.3. Anticipates and recognizes medical/surgical/psychiatric emergencies and initiates or leads others to implement appropriate and timely actions.
3. Uses advanced clinical knowledge/judgment to promote staff involvement in planning, decision-making, and evaluating outcomes.
4. Functions as an expert in clinical practice and/or areas related to the assigned roles and responsibilities.
5. Systematically evaluates current practice and formulates outcomes for groups of patients and/or organizational processes within area of expertise.
6. Guides, develops, and supports staff from a leadership perspective.
7. Uses professional standards of care, scientific evidence, and practice to evaluate programs/service activities.
8. Demonstrates grade-appropriate and consistent critical thinking skills.
 - 8.1. The nurse can recognize the patient has a problem.
 - 8.2. The nurse can manage the problem safely and effectively, recognizing his/her scope of practice.
 - 8.3. The nurse has a relative sense of urgency.
 - 8.4. The nurse takes the right action for the right reason (del Bueno).
9. Position-specific Competency Checklist is completed annually and is rated competent in all measured areas.

Ethics: Provides leadership in identifying and addressing ethical issues that impact patients and staff, including initiating and participating in ethics consultation.

1. The nurse, in all professional relationships, practices with compassion and respect for the inherent dignity, worth and uniqueness of every individual, unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems (ANA Code of Ethics for Nurses).
2. The nurse promotes, advocates for and strives to protect the health, safety and rights of the patient (ANA Code of Ethics for Nurses).
3. Listens to and honors patient and family perspectives and choices. Patient and family knowledge, values, beliefs, and cultural backgrounds are incorporated into the planning and delivery of care in a non-judgmental, non-discriminatory manner (Patient and Family Centered Care).
4. Demonstrates leadership in patient advocacy, in protecting the health, safety, and rights of patients.
5. Maintains professional boundaries with patients, families, and employees. Behavior as a role model is transparent and above reproach.
6. Demonstrates leadership by guiding practice in identifying and addressing concerns that impact patients and staff.
7. Initiates/participates in consultations to health care teams regarding ethical issues.
8. Safeguards patient privacy and maintains confidentiality of all electronic and printed patient information according to HIPAA guidelines, the Privacy Act, and as stated in the Medical Center Memo on ADP Security. Maintains confidentiality of assigned access code and by exiting (logging out) from the ADP system when leaving terminal.

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Does not share security codes and does not allow others to use the computer under own security codes. Maintains patient confidentiality by not discussing patient information except when necessary to authorized staff only in order to meet health care needs. Ensures application of institutional policy to protect information from unauthorized release, loss, alteration, or deletion. Does not use thumb-drives or other means, such as xeroxing, to remove patient data from the medical center, unless approval by the Director through OI&T has been granted.

9. Demonstrates a commitment to EEO principles and applies EEO principles in all decisions, such as hiring practices.

Resource Utilization: Manages program resources (financial, human, material, or informational) to facilitate safe, effective, and efficient care.

1. Analyzes resources available and identifies risk areas, including budgetary, staffing, supplies, equipment, and availability of data and information.

1.1. Effectively manages assigned resources and identifies creative strategies to increase efficiency within programs, the service, and the medical center.

1.2. Analyzes and forecasts for FTEE related to staffing ceiling.

1.3. Self-directed in collaborating with colleagues to review staffing and plan strategies together to solve issues.

1.4. Analyzes staffing patterns for methods to keep overtime costs down.

2. Participates in recruitment and retention of quality staff for the service.

3. Participates and takes a leadership role in providing input in the budgetary process at the service level.

3.1. Reviews equipment needs and submits equipment requests, providing vendor information and cost analysis.

3.2. Initiates, implements, and evaluates trial equipment.

4. Establishes patient care priorities based on patient needs that ensures patient care can be delivered in a safe, efficient, and cost effective manner.

5. Ensures staff comply with infection control practices, such as handwashing and wearing of appropriate personal protective equipment.

6. Ensures staff comply with safe work practices. Complies with safety rules and regulations for safe job performance and fire protection. Ensures staff practice safe body mechanics, uses mechanical devices, and/or requests help when needed in moving, lifting, or turning patients to prevent injury to patient, self or others. Encourages prompt reporting of all accidents and reporting of unsafe or unhealthy environmental situations/conditions. Corrects safety hazards promptly. Puts broken equipment out of service immediately, tags it as such, and follows-through for appropriate disposition of the broken equipment.

7. Conserves resources effectively by using supplies and equipment in a responsible manner. Will ensure employees follow appropriate standard operating procedures related to the equipment, devices, and work practices that impact or have the potential to impact the environment. Will comply with relevant environmental regulations, Executive Orders, and Green Environmental Management Systems (GEMS) initiatives. Will consider environmentally preferable recycled products in all purchasing decisions.

8. Leads within a framework of a High Reliability Organization with a culture of safety founded on a systems approach to developing health care solutions based on prevention, not punishment, with collective mindfulness.

DIMENSION OF NURSING PRACTICE: PROFESSIONAL DEVELOPMENT

Education/Career Development: Implements an educational plan to meet changing program or service needs for self and others. Maintains knowledge of current techniques, trends, and professional issues.

1. The nurse owes the same duties to self as to others, including the responsibility to preserve integrity and safety, to maintain competence and to continue personal and professional growth (ANA Code of Ethics for Nurses).

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2. Actively participates in the advancement of nursing through contributions to knowledge development and education. Mentors less experienced nurses.
3. Maintains professional knowledge and skills based on currently published or communicated information, such as through professional readings and refereed nursing journals, and attending workshops and seminars.
4. Assesses educational needs to implement program or service-level practice changes.
5. Develops and implements an educational plan to meet the needs for self and other staff in a program or service.
6. Validates competencies and assesses the need for interventions.
7. Practices and fosters in staff that access to understandable health information can empower individuals to participate in their health care (Patient and Family Centered Care; Planetree).
8. Initiates and participates in orientation, unit based in-services, and mandatory education activities in a self-directed manner.
9. Develops and presents three (3) in-services per rating year.

Performance: Uses professional standards of care and practice to evaluate programs and/or service activities.

1. The nurse participates in establishing, maintaining and improving healthcare environments and conditions of employment conducive to the provision of quality health care and consistent with the values of the profession through individual and collective action (ANA Code of Ethics for Nurses).
2. The profession of nursing, as represented by associations and their members, is responsible for articulating nursing values, for maintaining the integrity of the profession and its practice and for shaping social policy (ANA Code of Ethics for Nurses).
3. Actively involved in continuously evaluating practice for a program or service, based on established professional, community, or regulatory standards, such as clinical practice guidelines and The Joint Commission.
 - 3.1. Evaluates policies and procedures and provides suggested written revisions to immediate supervisor.
 - 3.2. Initiates and prepares necessary reports and correspondence and submits in a timely manner.
4. Recommends and implements changes at the program or service level to meet those standards.
5. Receptive to constructive feedback and accepts guidance in correcting performance deficits.
6. Submits completed annual self-evaluation to the supervisor in a timely manner by the requested deadline.
7. Annual self-evaluation is realistic as measured by the qualification standards and the functional statement.
8. *For supervisors only:*
 - 8.1. Ensures every employee under his/her supervision has a competency checklist that is completed by the end of each Fiscal Year.
 - 8.2. Ensures that the competency folders for his/her employees are complete and up to date.
 - 8.3. Completes Proficiency Reports and issues to the RN by the established deadline.
 - 8.4. Completes the 5-tier Performance Appraisal forms and ECF forms when applicable by the established deadline.

9. THIS SECTION ONLY FOR RNs WHO USE THE VA SCHEDULING SOFTWARE:

- 9.1. Incumbent schedules clinic appointments using VISTA in accordance with the business rules outlined in VHA Directive 2006-005, Outpatient Scheduling Processes and Procedures.
- 9.2. Demonstrates knowledge and use of general business rules outlined in VHA Directive 2006-005, Outpatient Scheduling Processes and Procedures.
- 9.3. Uses established business rules for Enrollment and Registration, Scheduling, Consult Management, Use of the VistA Electronic Wait List (EWL), Handling No-Shows, Patient Cancellations, and Clinic Cancellations as applicable to job.
- 9.4. Uses insurance software, as instructed, to insure the capture of all insurance information during the check-in process.

10. *THIS SECTION ONLY FOR RNs WHO PERFORM CLEANING AND STERILIZATION OF REUSABLE MEDICAL EQUIPMENT per VHA Directive 2009-004, Use and Reprocessing of Reusable Medical Equipment (RME) in Veterans Health Administration Facilities:*

10.1. Incumbent sets up, uses, reprocesses, and maintains all unit/department-specific equipment that is designed by the manufacturer to be reused for multiple patients. All steps and activities for set ups, reprocessing, and maintenance will be completed in accordance with steps outlined in the equipment Standard Operating Procedure (SOP).

10.2. Incumbent participates in training in the set up, use, reprocessing, and maintenance of their unit/department-specific equipment leading to the initial competency and validation of ongoing competency at least annually.

10.3. Incumbent uses equipment appropriately and demonstrates and/or verbalizes the proper use, reprocessing, and maintenance. The reprocessing may be done by the individual on the unit. Incumbent must demonstrate knowledge of use and reprocessing according to SOP's.

11. *THIS SECTION ONLY FOR RNs WHO SUPERVISE STAFF WHO PERFORM CLEANING AND STERILIZATION OF REUSABLE MEDICAL EQUIPMENT per VHA Directive 2009-004, Use and Reprocessing of Reusable Medical Equipment (RME) in Veterans Health Administration Facilities:*

11.1. Incumbent is trained in the set-up, uses, reprocessing and maintenance of their unit/department-specific equipment leading to the initial competency and validation of ongoing competency at least annually.

11.2. As the supervisor, the incumbent ensures that the staff under his/her supervision is trained in the set up, use, reprocessing, and maintenance of their unit/department-specific equipment leading to the initial competency and validation of ongoing competency at least annually.

11.3. Incumbent ensures that staff are able to demonstrate and/or verbalize the proper use, reprocessing, and maintenance of equipment used in their unit/department. The reprocessing may be done by the individual on the unit. Incumbent must ensure that staff are able to demonstrate knowledge of use and reprocessing according to equipment Standard Operating Procedures (SOP's).

DIMENSION OF NURSING PRACTICE: COLLABORATION

Collaboration: Uses the group process to identify, analyze, and resolve care problems.

1. Consistently demonstrates effective communication skills and professional behaviors that promote cooperation and teamwork with internal and external customers.
 - 1.1. Practices good customer service in all work activities.
 - 1.2. Displays courtesy, empathy, tact, and respect for patients, families/significant others, and hospital staff.
 - 1.3. Remains calm in stressful situations.
 - 1.4. Promotes personal and professional integrity in the workplace.
 - 1.5. Uses the proper chain of command for communication.
2. Initiates and leads the interdisciplinary group in critical thinking processes that lead to decisions that positively impact the program, service, or medical center.
3. Collaborates with peers and leaders to evaluate various outcomes based on strategic priorities.
 - 3.1. Patient care.
 - 3.2. Staff education and development.
 - 3.3. VA Performance Measures.
4. Encourages and supports patients and families to participate in care and decision-making at the level they choose. The opportunity for individuals to make personal choices related to their care is essential (Patient and Family Centered Care; Planetree).
5. Collaborates with patients, families, health care practitioners, and health care leaders in policy and program development, implementation, and evaluation, as well as in the delivery of care (Patient and Family Centered Care).
6. Practices and fosters in staff the belief that care giving is best achieved through kindness and compassion, and families, friends and loved ones are vital to the healing process (Patient and Family Centered Care; Planetree).
7. Collaborates with co-workers as a means of effectively utilizing the group process in completing workload in a timely manner.
8. Works effectively with others by resolving conflicts and assisting others to cope with stressful situations.

9. Refers and consults with the interdisciplinary healthcare team, and integrates recommendations for continuing patient care into the plan of care.

Collegiality: Coaches colleagues in team building. Makes sustained contributions to health care by sharing expertise within and/or outside the medical center.

1. Demonstrates professional behavior in interdisciplinary relationships.
 - 1.1. Effective verbal and written communication skills.
 - 1.2. Positive interpersonal relationships.
 - 1.3. Positive team building.
2. Makes sustained contributions to health care inside or outside the medical center as evidenced by professional presentations, publication in professional journals, academic teaching, and active participation in professional organizations.
 - 2.1. Actively participates on medical center or service-level ad hoc or standing committees or councils.
 - 2.2. Establishes active relationships with professional and/or other health related groups in the community, for example, with universities by teaching positions and holding offices or committee membership within professional organizations.
3. Initiates and applies a collaborative team approach in identifying, analyzing, and resolving problems at the service or medical center level.
4. Implements work place strategies that support the diverse needs of intergenerational staff as a way of reducing turnover and intergenerational tension.
5. Sought out by interdisciplinary staff as an expert consultant, one who is known in the service and medical center for expertise in a specialized area.
6. Communicates clearly and effectively. Completed written work is proofed and without errors.

DIMENSION OF NURSING PRACTICE: SCIENTIFIC INQUIRY
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Quality of Care: Initiates interdisciplinary projects to improve organizational performance.

1. Initiates and/or leads interdisciplinary committees, task forces, groups to improve patient care at the program or medical center level.
2. Develops and evaluates clinical guidelines or customer service initiatives at the unit, program, or medical center level.
3. Identifies opportunities for improvement and initiates the performance improvement process at the unit level.
4. Participates in performance improvement activities, demonstrating leadership in unit and service level performance improvement activities.
5. Utilizes innovations and creative approaches for changing nursing practice at the service and medical center level, based on performance improvement findings.

Research: Collaborates with others in research activities to improve care.

1. The nurse participates in the advancement of the professional through contributions to practice, education, administration, and knowledge development (ANA Code of Ethics for Nurses).
2. Promotes and assists staff in the application of evidence-based practice research to current practice.
3. Conducts or participates in evidence-based practice investigation designed to validate and/or improve patient care and health care delivery.
4. Shares information from evidence-based practice investigation finding or special projects through presentation (teaching) or publication.
5. Assists nursing personnel with assessment, implementation, and evaluation of new approaches, procedures, and standards of patient care, based on reliable nursing evidence-based practice investigation.
6. Can readily apply high-level critical thinking skills to problem investigation and resolution.

V. SUPERVISORY CONTROLS

Refer to the service Organizational Chart for the supervisory chain of command and the location of the position. The incumbent is under the supervision of a Nurse Manager or other immediate supervisor who provides the administrative supervision and general instruction, plans and assigns work, assigns time schedules, approves leave, and completes performance evaluations. Clinical supervision is provided by a registered nurse, physician, or other provider. Incumbent is responsible for being self-directed in the delivery of patient care under minimal supervision and instruction by a registered nurse. During non-administrative tours, the Nurse Coordinator provides general supervision and approves leave for Patient Care Service RNs.

VI. AGE, DEVELOPMENTAL, AND DIVERSITY FACTORS

The population of male and female veterans served ranges from the adult, age 18, to the elderly adult, age 65 and over. Age-related and cultural interventions appropriate to cognitive, physical, and emotional needs will be employed at all times, tailored to the individual patient, incorporating knowledge of changes associated with aging and principles of growth and development. The incumbent must be poised, articulate, adaptive, and respectful in communicating with and caring for people of varied educational, ethnic, religious, and cultural backgrounds. Care will be provided to Veterans without discrimination and harassment, tailored to his/her needs, regardless of a veteran's age, race, ethnicity, religion, culture, language, physical or mental disability, socioeconomic status, sex, sexual orientation, and gender identity or expression. Knows how to obtain translation services for patient or families with limited English language proficiency or who need sign language services.

VII. CUSTOMER SERVICE

BVAMC embraces patient-family centered care principles, with care of the veteran his/her priority. The incumbent practices good customer service in all work activities, treating veterans, their families/representatives, visitors, and other employees in a courteous, tactful, and respectful manner. Willing to work cooperatively as a member of a team in all assignments.

VIII. COMPUTER SECURITY

The incumbent consistently protects printed and electronic files containing sensitive data in accordance with the provisions of the Privacy Act of 1974 and other applicable laws, federal regulations, VA statutes and policy, and VHA policy. Protects the data from unauthorized release or from loss, alteration, or unauthorized deletion. Follows applicable regulations and instructions regarding access to computerized files, release of access codes, etc., as set out in the computer access agreement that the incumbent signs. Reports all known information security incidents or violations to the supervisor and/or the Information Security Officer immediately. Reports all known privacy incidents or violations to the Privacy Officer immediately. Compliance is measured by supervisory observation and periodic random monitoring by the Information Security Officer or Office of Information Technology staff. Major violations such as loss of or unauthorized release, alteration, or deletion of sensitive data are unacceptable.

IX. SAFETY

The incumbent embraces a continuous culture of safety for veterans, their families, visitors, and other employees.

Environment of Care: Follows Life Safety Management (fire protection) procedures. Reports safety hazards, accidents and injuries. Familiar with hazardous materials, Material Safety Data Sheets (MSDS), and waste management procedures. Follows Emergency Preparedness plan. Follows building security policies/procedures. Complies with federal, state and local environmental and other requirements preventing pollution, minimizing waste, and conserving cultural and natural resources.

Infection Control: Demonstrates infection control practices for disease prevention, i.e., hand washing, standard precautions, and isolation procedures, including TB requirement/precautions. No eating or drinking or the storage of such containers, applying cosmetics, or inserting contact lenses in patient care areas, including nurses' stations.

Health and Safety: Fosters a high profile of the VA Occupational Safety and Health Program by assuring employee awareness of potential safety hazards, promptly reporting all injuries and ensures supervisors are effective in corrective actions necessary to eliminate safety and health hazards in the work area.

X. ON-GOING EDUCATION, TRAINING, AND COMPETENCY VALIDATION

Basic Life Support (BLS) is required for RNs in direct patient care positions per policy; the supervisor may also direct BLS certification for other positions. Advanced Cardiac Life Support (ACLS) is required in specific specialty areas and assignments per policy. Incumbent will be self-directed in completing orientation and on-going mandatory education. Will actively participate in competency assessment and validation. Specialty assignments may require a scope of practice for procedures beyond basic education.

XI. PHYSICAL DEMANDS

This position requires visual acuity, keen hearing, clear distinctive speech, and manual dexterity. This position requires potentially long periods of continued walking, standing, stooping, sitting, bending, pulling, and pushing. Transferring patients and objects may be required. Mechanical inpatient lifts are provided. The incumbent may be exposed to infected patients and contaminated materials and may be required to don protective clothing in isolation situations, operative/invasive procedures, or home settings. The incumbent may occasionally be exposed to patients who are combative secondary to delirium, dementia, or psychiatric disorders. The incumbent must be a mature, flexible, sensible individual capable of working effectively in stressful situations, able to shift priorities based on patient needs. Must complete annual Employee Health requirements, such as annual TB screening or testing, as a condition of employment. The incumbent who provides care in home settings or other off-site locations may be required to drive and/or ride in GSA-vehicles.

XII. CONTINUED ACCREDITATION READINESS

Responsible for ensuring his/her actions contribute to a mode of continued accreditation readiness regarding Joint Commission (TJC), Office of Inspector General (OIG), Commission on Accreditation of Rehabilitation Facilities (CARF), VA surveyors, Laboratory College of American Pathologists (CAP), and other survey teams. Can articulate standards of care and practice, policies and procedures/SOPs; documentation is complete and timely; has situational awareness of safety and other environment of care issues; initiates corrective actions ("If not me, who? If not now, when?"); maintains safety and infection control standards; strictly protects verbal, written, and electronic patient personal and health information; maintains a professional, healthcare business environment; participates in and can articulate performance improvement data and how it impacts patient care.

XIII. OTHER FACTORS

This position potentially requires flexibility in schedule and assignments, as this is a 24/7 hospital. Some positions require rotation of tours or indefinite work on non-administrative tours as established by the immediate supervisor. Not all duties may be listed, so other duties may be assigned. Self-motivated in the pursuit of meeting professional work standards. National board certification in nursing specialty is encouraged; certification for Advanced Practice RNs and Clinical Nurse Leaders is a condition of employment. If the incumbent is a purchase card holder, performs the duties of a Government-wide Purchase Card Program cardholder in support of his/her service/department/service line. The cardholder is required to complete all required training courses as directed by the agency/organization

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program coordinator. Responsible for the proper use of the purchase card, being knowledgeable and complying with assigned spending regulations. Complies with all Federal, VA, and local purchase card program regulations. Verifies funds availability prior to making purchases and ensures receipt of goods ordered. Safeguards the purchase card at all times. Complies with all purchase card program audits. This position is boarded by the local Nurse Professional Standards Board. Supervisory RNs will be rated under the Executive Career Field (ECF) rating system and will be subject to additional performance standards under their ECF plan. Non-supervisory RNs will be rated under the Proficiency Rating system.

XIV. REFERENCES

American Nurses Association (ANA) Code of Ethics for Nurses.
American Nurses Association (ANA) Nursing Scope and Standards of Practice.
Benner, Patricia. From Novice to Expert.
del Bueno, Dorothy. Performance Based Competencies.
Patient and Family-Centered Care, Institute for Family-Centered Care.
Plaintree Incorporated, Patient-Centered Care.
VA Handbook 5005, Part II, Appendix G6, Nurse Qualification Standard.
VA Handbook 5007, Part III, Chapter 8, Nurse Manager Supervisory Responsibilities.