AMSN PRISM Award Scoring Tool

The five (5) categories for the award application along with related questions are provided below. Evidence must be included to indicate how the criteria are met. Provide a complete narrative description or response to the question rather than an answer with a few words or phrases. Examples are provided with each question to clarify the information being requested.

1. Questions will be scored based on explanations, evidence, and details provided that indicate the following levels of performance.
- **Met-** Unit evaluation strategies and processes are formal, systematic, and objective. Tools, improvements, and innovations are backed by strong data analysis and evident in 24/7 operations. Performance results and benchmarking data highlight above average performance.
- **Not Met-** Unit evaluation strategies and processes are not systematic and objective, and improvements are not evidence-based. Performance results and benchmarking data are absent or limited.

2. Questions are also scored based on the evidence of meeting the specific criteria of the question with data, explanations, stories, and other pertinent details. The score is downgraded when data is provided without discussion, or when discussion is provided without data.

All questions need a **met** score in order for the applicant to receive the AMSN PRISM Award. The five domains are derived from the AMSN Competency Framework. These five domains are further subdivided into subdomains and individual questions addressing specific criteria.

Through this distinguished honor, AMSN and MSNCB identify and celebrate medical-surgical units that achieve sustained excellence in the following areas:

#	AMSN Domain	Subdomains
1.	Patient /Care Management	Patient Safety
2.	Holistic Patient Care	Patient Centered Care, Diversity and Inclusion, Palliative/End-of-Life Care,
3.	Elements of Interprofessional Care	Interprofessional Collaboration, Care Coordination and Transition Management
4.	Professional Concepts	Communication, Healthy Practice Environment, Scope of Practice and Ethics, Quality Management, Evidence-Based-Practice and Research
5.	Nursing Teamwork and Collaboration	Professional Development

*Supporting evidence is required in the form of a graph and data table

Domain	Sub-Domain	Question	Example	Met	Not Met

1. Pt Care / Mgt
1. Patient Care/ Management
	A. Pt Safety
	A. Patient Safety
		1. Improving Patient Safety *
		A. **Select one** of the following areas below when the outcomes were not meeting expectations and **describe** how the unit outcomes improved.
		-Patient Safety
		  1. Hospital acquired conditions (e.g., pressure injury prevention, fall prevention, restraint reduction, blood transfusion error reduction)
		  2. Restraint reduction
		  3. Blood transfusion error reduction
		  4. Alarm fatigue
		  5. Identifying and mitigating risks associated with behavioral health
		-Infection Prevention
		  6. Hospital acquired infections (e.g., C-DIFF, MRSA, CLABSI, CAUTI)
		-Medication Management
		  7. Medication error reduction
		-Pain Management
		  8. Pain management
		
		B. When describing the improvement process, include the following:
		  1. Specific metric
		  2. Plan
		  3. Goal(s)
		  4. Intervention(s)
		  5. Outcome(s)
		  6. Description of how direct care staff participate in the process
				The item selected is from the list is identified as not meeting expectations. All elements of the improvement process are clearly described. A graph and data table are provided as an attachment and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
		C. **Include** a graph with a data table			

2. Holistic Pt Care
 	
2. Holistic Patient Care
	A. Pt Ctr Care
	
	A. Patient Centered Care
		2. Improving Patient Centered Care*
		Describe how the unit responded to an area of improvement related to the patient satisfaction survey results for the unit. **Explain** any gaps in survey reporting, if needed.
		
		Include:
		  1. Measurement method used (i.e., third party vendor such as Press-Ganey, Non-Compliance Rating [NCR])
		  2. Specific nurse-sensitive patient satisfaction indicator(s) addressed (e.g., nursing communication, transition of care, discharge instructions)
		  3. Improvement plan implemented including participation of direct care nurses.
		  4. Outcomes in response to the intervention(s)
		Include a graph with a data table
				The area of improvement is clearly articulated. The patient satisfaction plan is described in detail. A graph and data table are provided as an attachment and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

2. Holistic Patient Care	A. Patient Centered Care	3.Applying Strategies to Encourage Collaboration **Describe** innovative strategies used to encourage collaboration with patients, families, colleagues, and other healthcare providers.	● Interprofessional rounds ● Rounding by appointment ● Virtual rounds ● Roundtable discussions ● Team meetings ● Patient-family consultations/meetings ● Availability of interpreters (in person or virtual) for	Collaboration strategies are evident with patients, families, colleagues, and other healthcare providers.	Evidence of collaboration strategies is missing for the patients, families, colleagues, and other healthcare providers or they may be inadequately described.

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Domain	Sub-Domain	Question	Example	Met	Not Met
			patients and families whose primary language is not English		
2. Holistic Patient Care	A. Patient Centered Care	4. Promoting Patient Empowerment [1] **Provide** an **exemplar** that demonstrates patient empowerment on the unit throughout the hospital stay. **Include:** 1. The patient's knowledge of their role 2. Acquisition of knowledge to engage with their provider(s) 3. Patient's skills 4. Presence of a facilitating environment In the **exemplar**, **include:** 1. Details regarding the patient's diagnosis(es) 2. How the patient's preferences, values, and needs were addressed by the interprofessional health care team 3. How the patient participated in the teaching plan starting early in the hospital stay 4. How learning was validated The WHO defines empowerment as "a process through which people gain greater control over decisions and actions affecting their health" - Health promotion glossary. Geneva: World Health Organization; 1998.		The exemplar completely and clearly addresses the promotion of patient empowerment and all required elements are described in detail.	The exemplar does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
2. Holistic Patient Care	B. Diversity / Inclusion	5. Promoting Diversity and Inclusion for Patients **Provide** an **exemplar** which demonstrates: 1. Identification and mitigation of biases to provide optimal patient centered care 2. Application of diversity, equity, and inclusion to patient care 3. Identification of social determinants of health for a patient (e.g., food, finances, transportation, housing, medications)	• Religious preferences applied to care plans • Recognition of rituals and cultural beliefs • Educational offerings for staff and patients • Availability of interpreters • Patient education with consideration of literacy levels and languages	The exemplar completely and clearly addresses each required element in detail.	The exemplar does not address all required elements or is lacking in detail and clarity.
2. Holistic Patient Care	C. EOL C. Palliative/ End-of-life Care	6. Demonstrating Caring/Compassion for End-of-Life Chronic Disease **Provide** an **exemplar** to illustrate how concepts of caring and compassion were provided by the healthcare team for a patient at the end of life/chronic disease throughout the hospital stay. **Address** all the following elements: 1. Staff involvement from all shifts 2. Promotion of patient dignity 3. Communication/collaboration of the healthcare team 4. Participation and support of family and significant others in the care process 5. Individualized plan of care based on patient/family preference(s) and collaboration with the care team	• EAP • Debriefs • Recognition of religious rituals, cultural beliefs, and traditions at the end of life	The exemplar evokes a feeling of compassionate care involving the interprofessional health care team. It also completely and clearly addresses each required element in detail.	The exemplar does not address all required elements or is lacking in detail and clarity. The exemplar does not evoke a feeling of coordinated and compassionate patient and family-centered care.

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Domain	Sub-Domain	Question	Example	Met	Not Met
		6. Support provided to the healthcare team during and after the time of care 7. Sensitivity to cultural and/or religious beliefs and practices			
3. Inter-professional Care	A. Inter-professional Collaboration	7. Demonstrating Interprofessional Communication **Describe** strategies used to enhance interprofessional communication. **Include:** 1. An example of when interprofessional communication was not as effective as expected and the steps taken to implement a change 2. The outcome following this change 3. The role of each team member 4. Evidence that the communication was effective	• Daily rounding • Interprofessional care plan/communication tools • Grand rounds • Wishes of patients not recognized by providers • Delays in discharge due to miscommunication • Hand-off communication	The example completely and clearly addresses each required element in detail.	The example does not address all required elements or is lacking in detail and clarity.
3. Inter-professional Care	B. Care Coordination / Transition Mgt. Management	8. Reducing Length of Stay OR Readmission **Describe** the interprofessional process(es) that are implemented to reduce the length of stay or readmission.	• Education provided at discharge • Review of medications • Care coordination rounds • Team rounds • Discharge rounds • Family conferences • Patient education • Patient collaboration • Care pathways	The description completely and clearly addresses the process(es) to reduce length of stay or readmission.	The description lacks detail or clarity on the process(es) the unit uses to reduce length of stay or readmission.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
4. Professional Concepts	A. Communi-cation	**9. Identifying Methods of Information Dissemination** **Describe** how unit leaders effectively disseminate information related to the organization to unit staff members.	● Staff meetings ● E-mail ● Newsletters ● Social media ● Message boards in common area ● Huddles	There is a plan in place to effectively disseminate information to unit staff members using multiple communication strategies.	The description lacks detail or clarity on how information is disseminated to unit staff members.
4. Professional Concepts	B. Healthy Practice Environment	**10. Managing Unit Staffing** **Describe** how the unit's staffing plans and day-to-day assignments are developed. **Include:** 1. Factors considered (e.g., skill mix, patient acuity, frontline staff experience, unit turbulence/churn/throughput, etc.) 2. How changes to the staffing plan are communicated to frontline staff 3. The process by which frontline staff are actively engaged with staffing decisions 4. Provide the process/method on how staff reports unsafe staffing	● Assessment of patient acuity ● Revision of staffing to meet patient care demands ● Staff surveys ● Scheduling committees ● Staffing committees ● Offering shadowing experiences to high school and college students and community members interested in the healthcare profession	The description clearly addresses the unit's staffing plan and day-to-day assignments and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.
4. Professional Concepts	B. Healthy Practice Environment	**11. Attracting New Staff** **Describe** the strategies on how unit nursing staff members, including CNA/PCA/PCTs, are involved in attracting new staff members to the unit.	● Forming relationships with students ● Staff recommendations of colleagues ● Organizational referral programs	The description details multiple strategies for staff member involvement in attracting new employees and/or referral programs that support recruitment.	There is limited evidence of processes in place for the attraction of new employees and/or any programs supporting recruitment.

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Domain	Sub-Domain	Question	Example	Met	Not Met
4. Professional Concepts	B. Healthy Practice Environment	12. Promoting Collegiality **Describe** the structures and/or processes in place to promote collegiality on the unit (among staff members as well as improving collegiality with members of the interdisciplinary team). **Include:** 1. Examples of how unit staff are recognized and rewarded How multigenerational and multicultural differences are embraced	● Staff recognition ● Celebrations ● Peer support ● Team-building events such as fund-raising walks ● Unit participation in community service projects ● Internal recognition DAISY Awards	Structures and processes for staff recognition, celebrations, community involvement, team building, collegiality, support of staff members, etc. are clearly described.	The example does not address all required elements or is lacking in detail and clarity.
4. Professional Concepts	B. Healthy Practice Environment	13. Building New Team members **Describe** the unit's orientation and onboarding plan, and what systems and structures are in place to support inclusivity of new staff members. **Include:** 1. Length of orientation 2. Preceptor selection 3. Competency-based orientation 4. Residency/fellowship programs 5. How orientation is individualized to a new grad versus an experienced nurse, and an in-hospital transfer nurse versus a nurse new to the facility	● Preceptor classes ● Competency model(s) ● DEI education ● Residency/fellowship programs/Externship programs	The unit has a consistent plan for orientation and there is structure and support for staff based on individual need, experience, and inclusivity. All required elements are present.	The example does not address all required elements or is lacking in detail and clarity.
4. Professional Concepts	B. Healthy Practice	14. Involving Staff within the Interview Process	● Peer interviewing ● Shadowing experience	A process for staff involvement with interviewing and selection	The example does not address all required

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
	Environment	**Describe** how direct care staff members are involved in the interviewing/selection of new staff. **Include:** 1. The process on direct care staff selected for the interview 2. Rationale for number of direct care staff interviewers 3. The diversity of the team members involved in the interview process The process on how team members are included in the applicant's selection and decision	● Multishift team involvement ● Scripts for interview questions ● Scoring of applicants by interviewers ● Use of off shift to interview applicants ● Include other assistive personnel (e.g., PCT, PCA, unit administrators)	of new staff is clearly described and includes all required elements.	elements or is lacking in detail and clarity.
4. Professional Concepts	B. Healthy Practice Environment	15. Creating a Healthy Unit Environmental **Describe** the unit's formal and informal processes and/or strategies to reduce and/or eliminate adverse outcomes related to practice environment safety. **Provide** examples of education that has been provided to direct care staff for each of the bullets below. **Include:** 1. Physical injury prevention (e.g., needle sticks, back injuries, workplace violence)	● Patient and direct care staff advocacy ● Just Culture ● Harm event management ● Non-punitive workplace ● Debriefings (e.g., Critical Incident Stress Management) ● TeamSTEPPS ● High Reliability Organization Training ● Mindfulness and stress reduction activities ● Peer support ● Implicit bias training	Processes and strategies to reduce and/or eliminate adverse outcomes related to practice environment safety is clearly described and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

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Domain	Sub-Domain	Question	Example	Met	Not Met
		2. Improving frontline staff resilience and self-care (e.g., lateral violence, burnout, absenteeism) 3. Include support resources available to direct care staff (e.g., EAP, team training, behavioral emergency response team)	● Training on micro and macroaggressions in the workplace		

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
4. Professional Concepts	B. Healthy Practice Environment	**16. Promoting and Supporting Educational/Conference Activities** **Describe** examples of unit support toward direct care staff attendance to local, regional, and national education/conference activities. **Include:** 1. Selection process(es) of direct care staff to attend conferences. 2. Evidence of support (e.g., time off policy, budget) **Chart** 1. Date 2. Name of Conference 3. Type of Conference (international, national, regional, local) 4. Number of Direct Care Staff in Attendance Example of Table for Question #16 | Date	Name of Conference	Type of Conference (international, national, regional, local)	Number of Direct Care Staff in Attendance | Note: This question is not asking for internal activities	• Paid time off • Travel expenses • Paid registration fees • Application process to attend conferences • Involvement of the unit shared governance • AMSN Convention Grant	The unit has multiple strategies to obtain resources and opportunities for direct care staff to attend local, regional and/or national conferences and education offerings. All required elements are included.	The example does not address all required elements or is lacking in detail and clarity.
4. Professional Concepts	B. Healthy Practice Environment	**17. Promoting Staff Retention** **Describe** strategies used to reduce turnover and enhance retention. **Provide** a rationale (if applicable) how the strategies to reduce negative turnover were unsuccessful.	• Promoting collegiality • Offering incentives (e.g., tuition reimbursement) • Staff recognition • Professional development opportunities	The unit has multiple strategies to support retention efforts. All required elements are included.	The retention strategies are lacking in detail and clarity and the table does not address all required elements.

*Supporting evidence is required in the form of a graph and data table

Domain	Sub-Domain	Question	Example	Met	Not Met
		*Negative turnover may include a nurse that was terminated due to not meeting performance expectations. **Positive turnover may include a nurse that transferred to the same hospital's intensive care unit to pursue career goals. Example of Table for Question #17 **Staff Turnover Rate Reported as a Percentage** Most Recent Annual Rate / Previous Year's Annual Rate Overall Facility Applying Med-Surg Unit **To calculate turnover rate:** Divide the number of terminates during a one-year period by the number of employees at the beginning of that period. (e.g., If the year starts with 50 med-surg unit staff and 10 staff terminate [voluntary or involuntary], the turnover rate is 10/50 = 0.2 or 20%. Units are not required to use this formula if the organization calculates turnover rates using an alternate formula. Describe the alternate formula in the narrative.	• Clinical ladder/advancement model • Visibility of leadership		
4. Professional Concepts	B. Healthy Practice Environment	18. Promoting Staff Satisfaction* **Describe** how the unit responded to **one** area of improvement related to a recent staff satisfaction survey **(e.g., NDNQI)** for the unit. **Explain** any gaps in survey reporting, if needed. **Include:** 1. Measurement method used (external or internal data collection) 2. Specific staff satisfaction indicator addressed a. Provide rationale for choosing this indicator (e.g., not achieving benchmark, indicator scored lower than score on previous survey) 3. Improvement plan implemented 4. Outcomes in response to the intervention		Staff satisfaction is clearly described and addresses how the unit responded to one area needing improvement and includes all required elements. Any gaps in survey reporting are described, if appropriate. A graph and data table are provided as an attachment and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
		5. Include a graph with a data table for the above numbered bullets *If your hospital changed scoring tools (so that providing data from the same tool is not possible), then provide data and the benchmark used for each tool.*			
4. Professional Concepts	B. Healthy Practice Environment	19. Promoting Diversity, Equity, and Inclusion for Direct Care Staff **Describe:** A. **Describe** how multigenerational and multicultural differences are applied to nursing practice **Identify** how the unit has integrated diversity, equity, and inclusion.	● Religious preferences ● Recognition of rituals and cultural beliefs ● Educational offerings ● Culture ● Peer to peer accountability ● Mutual trust ● Team-building activities/exercises ● Tutorials/self-study modules ● Use and identification of preferred pronouns and name(s)	Promotion of diversity, equity, and inclusion for direct care staff is clearly described and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

4. Professional Concepts	C. Scope of Practice and Ethics	20. Ensuring Staff Competency
		
		Describe how the unit measures and maintains the competence of its staff.
			● Annual competency fair
			● Competency check process
			● Tracking mechanisms
			● Staff educational needs assessment
			● Methods of validation
			   o Role playing
			   o Direct observation
				Staff competency is clearly described and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
			○ Simulation - Residency program - Competency model ○ AMSN Competency Framework ○ Donna Wright model		
4. Professional Concepts	D. Quality Management	21. Improving Clinical Outcomes* A. **Select one** of the clinical improvement initiatives based on the patient population and scope of service. B. **Describe** how the unit achieved/is in the process of achieving improved patient outcomes as a result of your initiative. Below are the patient outcomes to focus on. - Heart failure - Immunizations - Myocardial infarction - Pneumonia - Sepsis - Stroke - Venous thromboembolism - Early Recovery After Surgery - Surgical Site Infection **Include:**		An outcome measure from the list is identified and clearly described. A graph and data table are provided as an attachment and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
		1. Describe the pre intervention outcome data that drove the goal and the initiative for improvement 2. Clearly describe the clinical improvement initiative 3. Include pre and post intervention data 4. Identify implementation date Include a graph with a data table using the above numbered bullets. Use a minimum of three data points.			
4. Professional Concepts	D. Quality Management	22. Improving Patient Satisfaction* **Describe** how the unit responded to **one** area of improvement related to a recent valid patient satisfaction survey for the unit. **Explain** any gaps in the survey reported, if needed. **Include:** 1. Describe the patient satisfaction improvement initiative 2. Include details regarding the measure used, including data source (internal or external) and the specific satisfaction indicator(s) addressed 3. The improvement plan implemented 4. Discuss outcomes in response to the intervention 5. Include intervention date, pre and post data. Include a graph with a datable using the above numbered bullets. Use a minimum of three data points or more.		A patient satisfaction improvement area is identified and clearly described. A graph and data table are provided as an attachment and includes all required elements. Any gaps in survey reporting are described, if appropriate.	The example does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
4. Professional Concepts	D. Quality Management	23. Evaluating and Sustaining Quality Improvement **Describe** the quality improvement structures and processes to identify, manage, evaluate, and sustain initiatives (e.g., shared governance, PDSA,/PDCA, quality committees). **Include:** **One** unit-specific example of an initiative that followed **one or more of** the above quality improvement structures and processes.		Quality improvement structures and processes are in place to identify, manage, evaluate, and sustain initiatives. The description is clearly articulated and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.
4. Professional Concepts	D. Quality Management	24. Involving Staff in Quality Improvement Projects **Provide two** examples of direct care nurse involvement in quality improvement projects. **Include:** 1. Describe the study or project that the nurse(s) were involved with and their participation 2. Provide the number of nurse(s) who participated 3. How the project was selected 4. Dissemination of project results (Staff publications, podium, or poster presentations related to unit-based projects) [2]"Quality improvements focus on impacting the quality of healthcare directly. Performance		Unit staff is currently involved in two (2) or more projects or studies. The examples are clearly described and include all required elements.	The example does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
		improvements focus on the administrative systems performance." https://casemanagementstudyguide.com/ccm-knowledge-domains/case-management-concepts/quality-and-performance-improvement-concepts/#:~:text=Quality%20improvements%20focus%20on%20impacting,improving%20how%20things%20are%20done			
4. Professional Concepts	E. Evidence-Based Practice and Research	25. Applying Evidence-Based-Practice and Research for Individualized Patient Care **Describe an example** of how EBP improves the individual patient experience through one of the following: 1. Identifying and assessing patient preferences 2. Improving the patient experience through individualized care planning	QI/EBP project that is DEI focused	The example provided clearly addresses and describes how EBP improves the individual patient experience and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.
4. Professional Concepts	E. Evidence-Based Practice and Research	26. Translating Evidence-Based-Care practice (EBP) and Research into Policy and Procedure **Describe** the process on how evidence-based practices and research are incorporated into policies and procedures (e.g., organizational policy committees, online point of care resources, other references). **Include:**		There is a clear description on how evidence-based practices and research are incorporated into policies and procedures. All required elements are included.	The example does not address all required elements or is lacking in detail and clarity.

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
		1. **One** example of how evidence-based practice or research was incorporated into a policy or procedure. 2. How direct care nurses are involved in policy development and revision			
4. Professional Concepts	E. Evidence-Based Practice and Research	27. Disseminating Evidence-Based-Practice (EBP) and Research **Describe** how evidence-based practices and research are disseminated by unit leaders and direct care nurses. **Include:** 1. Provide **two** examples of when EBP and/or research were disseminated at unit-based or hospital-wide efforts 2. How were the staff involved	● Research councils ● Staff meetings ● Research symposia ● Research updated communication via practice council or shared governance ● Journal clubs ● In services ● Residency program ● Grand rounds	There is a clear description of how evidence-based practice and research are disseminated by unit leaders and direct care nurses. All required elements are included.	The example does not address all required elements or is lacking in detail and clarity.
4. Professional Concepts	E. Evidence-Based Practice and Research	28. Promoting Staff Participation in Evidence-Based Practice (EBP) and Research **Describe** the unit and facility resources that are available to support direct care nurse participation in EBP projects and research studies. **Include:** **Three** examples of the resources available to support direct care nurse participation	● Utilization of a nursing research scientist or a nurse researcher ● A learning module on how to conduct EBP projects ● Nursing research council ● The organization's librarian ● Nursing instructor	There is a clear description of the unit and facility resources available to support direct care nurse participation in EBP projects and research studies. All required elements are included.	The example does not address all required elements or is lacking in detail and clarity.
5. Nurse Teamwork /	A. Professional	29. Participating in Educational Activities **Provide ten** examples of direct care nurse professional development activities based on	● For nurse evaluation, indicate an issue in your unit that you can	Ten examples of direct care nurse professional development activities	The example does not address all required

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DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
Collab-oration	Development	or aligned with individually assessed professional and/or unit needs. **Note:** Exclude periodic job required education/competencies (e.g., BLS, restraints, unit-specific skills) **Chart** List the education activities with the following columns: 1. Title/Topic of Educational Activity 2. Type of Activity (e.g., competency, conferences) 3. Date of activity 4. Provider (e.g., individual, facility, system, local provider (e.g., AMSN chapter), national organization (e.g., AMSN conference) 5. How was the need identified 6. Was it based on an individual need or a unit need 7. 2 to 3 sentences explaining why the direct care nurse pursued this professional development activity	provide a nurse sensitive individual patient satisfaction data ● AMSN Competency Framework ● AMSN Elevate Series ● Interprofessional team training or sessions	based on or aligned with individually assessed professional and /or unit needs are provided.	elements or is lacking in detail and clarity.

*Supporting evidence is required in the form of a graph and data table

DOMAIN	SUB-DOMAIN	QUESTION	EXAMPLE	MET	NOT MET
5. Nurse Teamwork / Collab-oration	A. Professional Development	**30. Lifelong Learning** **Describe** the structure and processes that the organization and unit utilize to support lifelong learning of direct care staff. **Include** examples of how direct care staff utilized these resources: 1. Specialty certification for nursing staff 2. Higher education 3. Staff involvement in professional activities (e.g., publication, professional nursing organization membership/volunteering, community service) 4. Education provided by unit staff to others	• Study group for certification exam(s) • MSNCB FailSafe Program • Flexible scheduling and/or financial support for higher education, participation in professional activities, or community service • Support from research nurse for publication • Provide access to technology and/or assistance with obtaining technology to participate in learning	Structures and processes that the organization and unit utilize to support lifelong learning of direct care staff is identified and clearly described. All required elements are included.	The example does not address all required elements or is lacking in detail and clarity.
5. Nurse Teamwork / Collab-oration	B. Leadership	**31. Leadership** AMSN recognizes two primary types of leadership: clinical and staff leaderships* defined below. • **Clinical leadership** is essential to implement the nursing process consistently and effectively.	• Clinical ladder • Conflict resolution • Clinical: Shared governance, establishment of unit goals, impacting nursing care plan,	Organizational processes that foster leadership development is clearly described and includes all required elements.	The example does not address all required elements or is lacking in detail and clarity.

*Supporting evidence is required in the form of a graph and data table

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Domain	Sub-Domain	Question	Example	Met	Not Met
		Regardless of formal authority, nurses lead an interdisciplinary care team and are responsible for patient safety and quality outcomes. • **Staff leadership** is important for healthy practice environments and advocacy for the medical-surgical nurse. Shared decision-making and professional autonomy are required to ensure adequate resources and appropriate staff assignments. These activities contribute to the staffs' ability to achieve the unit's standards of nursing practice. *Clinical leadership and staff leadership are not positions; they are roles and/or functions. **Describe** unit and/or organizational processes that foster leadership development. **Include:** 1. Individual clinical leadership exemplar 2. Individual staff leadership exemplar	shared decision-making • Staff: Appropriate resource availability, advocacy, autonomy, adequate staffing		

*Supporting evidence is required in the form of a graph and data table

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