

LPN Performance Evaluation Rating Guide
FINAL 12/27/2022

MJR	4 Consistently Exceeds	3 Occasionally Exceeds	2 Meets Expectations	1 Does Not Meet Expectations
Nursing Service /Patient Care	<p>Meet Unit-specific Enterprise Quality and Safety Goal Max (cascade from leadership goal), AND TWO (2) of the following items;</p> <p>OR</p> <p>Meets FIVE (5) of the following:</p> <ul style="list-style-type: none"> ○ Current Super User; ○ Formal poster related to quality and safety or research presentation; ○ Championing a quality initiative for work unit; ○ Podium presentation research papers day; ○ Hand hygiene 95% or greater for work unit (clinical staff – RN, NCT, MA, LPN, etc); ○ BCMA compliance for work unit 95% or greater; ○ (NO HARM/QUALITY WORK) -actively engaged in participating/ teaching co-workers about new initiatives & products; ○ 6 STARS, email recognition/get well network/thank you cards specifically related to patient care; ○ 1 STAR award related to patient care; ○ 3 acknowledgements/mention from patients on Press Ganey patient experience survey or leader rounds; ○ Daisy Award winner for past year; ○ Multiple Daisy award nominations for past year. <p><u>LPN/UKHC</u> must also meet ONE (1) of the following:</p> <ul style="list-style-type: none"> ○ Wildcards – participates and meets unit specific goal; ○ At Target or greater for quality metric for unit specific goal. 	<p>Meet Unit-specific Enterprise Quality and Safety Goal Target (cascade from leadership goal), AND ONE (1) of the following items;</p> <p>OR</p> <p>Meet THREE (3) of the following:</p> <ul style="list-style-type: none"> ○ Abstract for poster and/or podium presentation related to quality and safety; ○ Hand hygiene 90% or greater for unit (clinical staff – RN, NCT, MA, LPN, etc); ○ BCMA compliance for work unit 90% or greater; ○ (NO HARM/QUALITY WORK)-actively engaged in participating/ teaching co-workers about new initiatives & products; ○ 4 STARS, email recognition/get well network/thank you cards specifically related to patient care; ○ 1 STAR award related to patient care; ○ 2 acknowledgement/mention from patients on Press Ganey patient experience survey or leader rounds; ○ Daisy Award winner for past year; ○ Daisy Award nominee for past year. <p><u>LPN/UKHC</u> must also meet ONE (1) of the following:</p> <ul style="list-style-type: none"> ○ Wildcards – participates and meets unit specific goal; ○ At Target for quality metric for unit specific goal. <p><u>LPN/Ambulatory</u> must also meet ONE (1) of these</p> <ul style="list-style-type: none"> ○ At target or greater for quality metric applicable to their clinic; ○ High Blood Pressure control compliance at 67% ○ Tobacco cessation screening compliance greater than 88%. 	<p>Meet Seven (7) of the following:</p> <ul style="list-style-type: none"> ○ Follows all bundle compliance (NO HARM); ○ Plan of care for patient is individualized; ○ Clinical interventions are appropriate, timely and evidence based; ○ Patient teaching is completed appropriately and documented; ○ Participates in daily safety huddles; ○ Possesses knowledge of Quality metrics; ○ Core Measures, NSI; enterprise goal plan and/or other key metrics for their work unit; ○ Rounds for outcomes on every patient according to organizational standard; ○ Establishes a nurse/patient therapeutic relationship; ○ Reporting changes in patient condition, in timely manner, supporting RN. <p>AND</p> <p>Work unit must meet ONE (1) of the following</p> <ul style="list-style-type: none"> ○ Hand Hygiene 85% or greater for unit (clinical staff - RN, NCT, MA, LPN, etc); ○ BCMA compliance for work unit at 85%; ○ Meeting Unit-specific Enterprise Quality and Safety Goal Threshold (cascade from leadership goal). 	<ul style="list-style-type: none"> ○ Does not individualize plan of care for patient; ○ Clinical interventions are incomplete, not documented, not timely; ○ Clinical intervention inappropriate for patient; ○ Patient teaching is not completed or not documented; ○ Multiple instance of non-compliance with bundle components; ○ Does not understand Quality metrics; Core measures, NSI, enterprise goal plan and/or other key metrics for their work unit; ○ Does not attend/participate in daily huddles; ○ BCMA compliance <85%; ○ Hand hygiene for work unit (clinical staff – RN, NCT, MA, LPN) < 85%; ○ Does not perform and document hourly rounding based on organizational standard; ○ Received TWO (2) substantiated negative comments from patient via rounding, Press Ganey survey, leader rounds; ○ Does not report changes in patient condition, in timely manner, to supporting RN.

	<p><u>LPN/Ambulatory</u> must also meet ONE (1) of the following:</p> <ul style="list-style-type: none">○ At target for quality metric applicable to their clinic;○ High Blood Pressure control compliance at or greater than 68%;○ Tobacco cessation screening compliance greater than 89%.			
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Service	<p>Work unit meets Max goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions.</p> <p>OR</p> <p>Work unit meets Target for identified patient experience goal or predetermined patient experience question or key driver and TWO (2) of the following:</p> <p>OR</p> <p>Meets FIVE (5) of the following:</p> <ul style="list-style-type: none"> ○ Identify one area of improvement and/or change to better meet the needs of an underserved/underrepresented patient population (i.e. non-English speaking patient, use of dedicated fields in EPIC to document pronouns and preferred name of patients, dietary needs of patients during Ramadan, end-of-life care decisions among African American patients, peer support process for individuals subjected to inappropriate language/racial slurs, etc.). Must develop a unit plan to address the need; ○ Develops an atmosphere that is safe for all employees to ask for help; ○ Regularly offers assistance in an area of strength to co-workers struggling in that area; ○ Volunteer to accept work in an area other than home unit; ○ Recognize when peer needs assistance and helps to complete tasks to catch up in work; ○ Once caught up with own tasks, actively looks for ways to help peers; 	<p>Work unit meets Target goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions.</p> <p>OR</p> <p>Meets THREE (3) of the following:</p> <ul style="list-style-type: none"> ○ Identify one area of improvement and/or change to better meet the needs of an underserved/underrepresented patient population (i.e. non-English speaking patient, use of dedicated fields in EPIC to document pronouns and preferred name of patients, dietary needs of patients during Ramadan, end-of-life care decisions among African American patients, peer support process for individuals subjected to inappropriate language/racial slurs, etc.). Must develop a unit/clinic plan to address the need; ○ Develops an atmosphere that is safe for all employees to ask for help; ○ Regularly offers assistance in an area of strength to co-workers struggling in that area; ○ Volunteer to accept work in an area other than home unit; ○ Recognize when peer needs assistance and helps to complete tasks to catch up in work; ○ Once caught up with own tasks, actively looks for ways to help peers; ○ 4 STARS, email recognition/get well network/ thank you cards specifically related to peer support; ○ 1 STAR award related to peer support; ○ 3 acknowledgements/mention from patients on Press Ganey patient experience survey or leader rounds; ○ Daisy Award winner for past year; ○ Multiple Daisy award nominations for past year; ○ Nursing Specialty award recipient within past year. 	<p>Work unit meets Threshold goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions.</p> <p>OR</p> <p>Meets all of the following:</p> <ul style="list-style-type: none"> ○ Models behavioral expectations & demonstrates service excellence to all customers; ○ No patient/family/peer complaints; ○ Attitude is supportive of positive unit morale; ○ Follows dress code appropriately; ○ Fosters and models interdisciplinary team collaboration & cooperative relations. 	<p>Does not meet Threshold goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions.</p> <p>OR</p> <ul style="list-style-type: none"> ○ Does not adhere to the principals of AIDET; ○ Fails to demonstrate professionalism and respect; ○ Pattern behavior of negative tone and facial expression in interactions with peers, patients, colleagues, etc.; ○ Does not communicate appropriately and/or thoroughly; ○ Does not show any personal engagement in satisfaction initiatives; ○ Does not show collaboration in an interdisciplinary team setting; ○ Fails to work with others to achieve a professional work environment; ○ Display disruptive behavior that negatively affects patient care, education, research or other services performed by the individual or team; ○ Does not actively participate in team meetings, fails to provide feedback and share own thoughts and ideas; ○ Self-centered with approach to nursing tasks; rarely asks team members if they need assistance.

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	<ul style="list-style-type: none">○ 6 STARS, email recognition/get well network/thank you cards specifically; related to peer support;○ 1 STAR award related to peer support;○ 3 acknowledgements/mention from patients on Press Ganey patient experience survey or leader rounds;○ Daisy Award winner for past year;○ Multiple Daisy award nominations for past year;○ Nursing Specialty award recipient within past year.			
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MJR	4 Consistently Exceeds	3 Occasionally Exceeds	2 Meets Expectations	1 Does Not Meet Expectations
Professional Development & Competency	<p>National Specialty Certification (outside of job requirement).</p> <p><i>OR</i></p> <p>TAP Advancement Level Two.</p> <p><i>OR</i></p> <p>Meets SIX (6) of the following:</p> <ul style="list-style-type: none"> ○ Current Super User/Validator; ○ Precept new graduates or new LPNs to work unit; ○ Precept synthesis or other healthcare students; ○ Active member of professional nursing organization; ○ Participant in unit/clinic/nursing enterprise committee or council; ○ Chair or co-chair unit/clinic/nursing/enterprise council; ○ Journal article publication; ○ Journal club participant; ○ Journal club Facilitator/organizer; ○ Leading a discussion on a DEI related topic (book or article on health equity, social justice, systemic bias, etc.); ○ Serves as an Equity Ambassador for unit, clinic, division, or department; ○ Formal poster and/or podium presentation; ○ Completes Harvard Implicit Association Test (IAT) modules and has 1-2 action steps to address module findings; ○ Advancing education. 	<p>TAP Advancement Level One.</p> <p><i>OR</i></p> <p>Meets FOUR (4) of the following:</p> <ul style="list-style-type: none"> ○ Current Super User/Validator; ○ Precept new graduates or new LPNs to work unit; ○ Precept synthesis or other healthcare students; ○ Active member of professional nursing organization; ○ Participant in unit/clinic/nursing enterprise committee or council; ○ Chair or co-chair unit/clinic/nursing/enterprise council; ○ Journal article publication; ○ Journal club participant; ○ Journal club Facilitator/organizer; ○ Leading a discussion on a DEI related topic (book or article on health equity, social justice, systemic bias, etc.); ○ Abstract for poster and/or podium presentation; ○ Advancing education. 	<ul style="list-style-type: none"> ○ Completes all competencies by deadline and/or according to policy; ○ Attends all unit/clinic specific meetings, mandatory educational sessions; ○ Maintains mandatory license & certifications required for specific position; ○ Attends/completes nursing quarterly sessions (3 per year); ○ Assumes accountability for professional development. 	<ul style="list-style-type: none"> ○ LPN license not renewed per policy; ○ Failed to complete WBTs on time; ○ Failed to complete Blitz/Blast on time; ○ Does not attend unit specific meetings, educational sessions or committee meetings as required; ○ Does not attend/complete nursing quarterly sessions (3 per year); ○ Does not maintain unit specific competencies.

MJR	4 Consistently Exceeds	3 Occasionally Exceeds	2 Meets Expectations	1 Does Not Meet Expectations
Efficiency	<p>Meeting Unit-specific Enterprise Efficiency Max Goal (Cascade from Leadership Goal).</p> <p>OR</p> <p>Meets FIVE (5) of the following:</p> <ul style="list-style-type: none"> ○ Perfect Attendance (no absences in fiscal year); ○ Is flexible with scheduling to cover needs of work unit/clinic/POD; ○ Complete a minimum of 4 WBTs from myUK learning on diversity, equity, or inclusion plus completion of SAFE Pledge commitment; ○ Serves as a unit/clinic resource assisting co-workers in completing their work timely & answers questions per protocol; ○ Actively engages in opportunities to enhance throughput; ○ Self-directed & takes ownership of issues on work unit (places work orders/tags broken equipment); ○ Works 6 extra shifts throughout the year; ○ Consistently adjusts & is flexible with schedule to accommodate unit/POD; ○ 3 years or greater longevity on unit/clinic; ○ At target or greater for efficiency metric for unit specific goal. 	<p>Meeting Unit-specific Enterprise Efficiency Target Goal (Cascade from Leadership Goal).</p> <p>OR</p> <p>Meets Three (3) of the following:</p> <ul style="list-style-type: none"> ○ Excellent Attendance (no more than 3 absences in fiscal year); ○ Is flexible with scheduling to cover needs of work unit/clinic/POD; ○ Complete a minimum of 2 WBTs from myUK learning on diversity, equity, or inclusion plus completion of SAFE Pledge commitment; ○ Serves as unit/clinic resource assisting co-workers in completing their work timely, & answers questions per protocol; ○ Consistently engages in transfer process (in/out of unit/clinic) to facilitate timely transfers; ○ Works 3 extra shifts throughout the year; ○ Occasionally adjusts & is flexible with schedule to accommodate unit/POD; ○ 2 years or greater longevity on unit/clinic; ○ Self-directed & takes ownership of issues on work unit (places work orders/tags broken equipment). 	<p>Meeting Unit-specific Enterprise Efficiency Threshold Goal (Cascade from Leadership Goal).</p> <p>All LPNs -</p> <ul style="list-style-type: none"> ○ Demonstrate behaviors toward resolving conflict with all customers; ○ Attitude is supportive; ○ Demonstrates willingness to work effectively with colleagues at all levels to solve problems; ○ Communicates concerns, feedback and ideas to the rest of the team; ○ Demonstrates responsibility and dependability in performing work duties and can be relied on by other team members; ○ Improves own work flow based on standard work; ○ Work is completed within scheduled hours; ○ Resources are used appropriately (computer, supplies, equipment, personal calls, internet and staff); ○ Reports to work on time and as scheduled. 	<ul style="list-style-type: none"> ○ Inappropriate cell phone use; ○ Inappropriate internet use; ○ Multiple personal calls; ○ Probation &/or suspension related to attendance; ○ Does not demonstrate behaviors to resolve conflict with others; ○ Shows lack of regard for the time of others; ○ Fails to provide a supportive environment for work unit such as gossiping, belittling, or other behavior associated with horizontal violence; ○ Does not incorporate changes into their workflow; ○ Consistently works past scheduled time to leave; ○ Consistently uses overtime to complete work; ○ Consistently fails to take a lunch requesting no meal; ○ Received more than One (1) written warning, probation &/Or suspension for any reason other than attendance.