

Professional Development Framework

Implementation Team Chronicles



Day 6 (of nine) for the Professional Development Framework Implementation Team:

Day 6 found the Implementation Team digging deeper than ever to reach more fundamental understandings of contractual intent for progression and procedure in the new Framework. Background tentative agreements concluded by the end of bargaining were brought to the fore jointly by staff-management leads, which--once absorbed--allowed the team to proceed with more clarity. Among the key understandings were basics about progression through levels from A to C, and B to C. The progression within these levels will occur simply in a unit-based process stemming from the candidate RN initiative for the manager's evaluation of that individual's level of practice within the Framework, with an available Central Committee appeals process. With so many staff most probably already practicing at a "C" level, the expectation is that initially, this will mean advancement for many. Acknowledged is the need for a clear, fair, meaningful, and expeditious process, both for staff and manager. A distinction was made in the process for movement from levels C to D, C to E, and D to E: for these more advanced levels, evaluation will be by a Central Committee, (composition to be determined, and, again, with an available appeals process, which will be determined by the Joint Implementation Team).

Taking advantage of the microcosm of UMHS Nursing that is this Implementation Team, the members reconstituted again and again into new work groups, ad hoc, from the big group as a whole, to small breakout groups and back, often within 30" - an hour's time. Today's need was to reach common understandings on the elements of the applications process. Decisions on these, of course, will affect what is taught and what is communicated to the entire nursing community. So members who had previously focused on education, evaluation, and communication today merged overall around that top priority. This allowed the many diverse voices to be reflected in the deliberations to develop this key applications process and its potential elements, such as clinical narratives; a "manager voice," possibly rating on domains of practice as described in the Framework; and a "peer voice" through letters of support, feedback; interview; resume or C.V.

Beginning the day, the team found easy consensus on what they would need to accomplish work that day, which they described as listening; open discussion; ability to disagree; open-mindedness; patience; focus on task; respectfulness; and ways to better share information from small groups. Sure enough, these characteristics describe how the day subsequently went. Tenaciously thinking through every detail, every term, seemingly every possible issue, there was no holding back. While a day of this kind of unsparing scrutiny could not achieve final decisions on a subject so big and as sensitive as the entire applications process for re-classification, still, many, many issues received useful vetting. A sampling of issues and questions raised and examined from all angles: resumes-characteristic of professional, yet of what value for this process; perhaps, for this purpose, for staff at more advanced levels? Talking about one's nursing practice in an interview: optional, or not, in order to move to level C, D, E; based on questions that can be known ahead and probably those that emerge from the interview, too. Letters of support and peer input: how best to solicit descriptions of behaviors relevant to particular levels of practice, and how to do so in a way that does not impede or overburden all parties involved.

Such a nuanced examination generated multiple options, if not a final decision. Now the team seems poised for final decisions to take shape in their next three meetings.

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