

UNIT AND STAFF MANAGEMENT**UNIT STAFFING****Proficiency****Frequency**

Staffing by (NHPPD, acuity, skill mix)

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Flexing, floating, on-call policies

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Charge RN duties

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Scheduling

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4**LEADERSHIP**

Conflict resolution strategies

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Promote staff engagement and retention

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Promote cultural competence and humility

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Change management facilitator

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Team building

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Facilitation/Collaboration with others (e.g. physicians, other departments, outside agencies)

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Patient/Family issues

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Ethical dilemmas

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Mentorship/Coaching

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Staff/Patient advocate

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Educator

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Conduct staff meetings

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Create unit goals aligned with organizational strategic goals

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4**CLINICAL OPERATIONS**

Development of unit policies/procedures

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Development/Evaluation of orientation programs

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Promote use of EBP and research

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Utilization of supplies/resources

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Analyze workflows for efficiency

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Regulatory compliance(e.g. OSHA, HIPAA, CMS)

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Crisis management during emergencies

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4**FISCAL MANAGEMENT****MANAGE AND EVALUATE UNIT PRODUCTIVITY****Proficiency****Frequency**

Nursing hours per patient day

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Nurse to patient ratios

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Staff skill mix

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Patient acuity

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Staffing models

☐ 1 ☐ 2 ☐ 3 ☐ 4☐ 1 ☐ 2 ☐ 3 ☐ 4

Annual average daily census (ADC) ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

MANAGE UNIT FINANCES AND BUDGET

Capital budgeting ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Calculating ROI ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Calculating ROA ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

New program assessment ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Payroll process for staff ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Revenue and expense forecasting ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Reporting on budget variance ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Cost-benefit analysis ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Evaluation of productivity ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Balance sheets ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Direct/Indirect costs ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Variable/Fixed Cost ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

FINANCIAL IMPACT OF REGULATIONS AND PAYMENT

Payer mix (Medicare, Medicaid, managed care, third-party providers) ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Diagnosis-related group (DRG) classifications ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

International Classification of Diseases (ICD)-9 & 10 codes ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

**PERFORMANCE
IMPROVEMENT AND
QUALITY**

IMPLEMENT PROCESSES

Proficiency

PDCA ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Root cause analysis (RCA) ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Failure Mode Effects analysis (FMEA) ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

QI/PI projects ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

EBP models ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Data analysis/trends ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Dashboard reporting ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Benchmarking ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Charts reviews (concurrent, retrospective) ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

**EVALUATE AND MANAGE
METRICS**

Staff satisfaction ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Patient satisfaction ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Nurse-sensitive indicators:
Structure, process, outcome
(e.g. falls, CAUTI, RN
workforce) ☐ 1 ☐ 2 ☐ 3 ☐ 4

☐ 1 ☐ 2 ☐ 3 ☐ 4

Core measures	☐ 1	☐ 2	☐ 3	☐ 4
Error, events, and incidences	☐ 1	☐ 2	☐ 3	☐ 4
Staff injuries	☐ 1	☐ 2	☐ 3	☐ 4
Length of stay (LOS)	☐ 1	☐ 2	☐ 3	☐ 4
Staff turnover/retention	☐ 1	☐ 2	☐ 3	☐ 4

☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4

RISK MANAGEMENT AND SAFETY

Promote "Just Culture" for error reporting	☐ 1	☐ 2	☐ 3	☐ 4
Continuous readiness	☐ 1	☐ 2	☐ 3	☐ 4
TJC National Patient Safety Goals	☐ 1	☐ 2	☐ 3	☐ 4
Error prevention strategies	☐ 1	☐ 2	☐ 3	☐ 4

☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4

TECHNOLOGY

Use of EHR for reporting, data analysis, and workflow	☐ 1	☐ 2	☐ 3	☐ 4
Medication/ADC reports	☐ 1	☐ 2	☐ 3	☐ 4
Modalities for presentations (e.g. Powerpoint ,Excel)	☐ 1	☐ 2	☐ 3	☐ 4

☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4
☐ 1	☐ 2	☐ 3	☐ 4

Work History

Years Experience in Clinical Specialty:

Most recent facility worked at:

☐ I hereby certify that ALL information I have provided to Clover Health Services, on this skills checklist and all other documentation, is true and accurate. I understand and acknowledge that any misrepresentation or omission may result in disqualification from employment and/or immediate termination.