U.H. Maui College  
Allied Health  
Career Ladder Nursing Program

Progress toward level benchmarks is expected in each course of the curriculum. In their clinical practice students are expected to:

1. Provide safe care.
2. Practice within the legal scope of practice, and in accordance with the ANA Code of Ethics.
3. Be an active, engaged learner, seeking out new opportunities, and reflecting on their own performance.
4. Be aware of the evidence available to support nursing practices.
5. Provide care that is culturally and age/developmentally appropriate.
6. Practice family and relationship-centered care.
7. Recognize role as a leader, an advocate for individuals, families and communities, and an agent for access and high quality health care.

First Level Benchmarks

The Career Ladder Nursing Program is designed to prepare nurses to function at a foundational beginning level upon completion of the first level of the program. Successful completion of the first level enables the student to be eligible to take the National Council for Nursing Licensure Examination for Practical Nurses (NCLEX-PN). Those students who meet established criteria will be able to continue into the second year of the Career Ladder Nursing Program.

By the end of the first year of the nursing curriculum, it is expected that the student will meet the following performance benchmarks:

1. **Ethical Practice**
   a. Articulates the provisions in the ANA Code of Ethics and Standards of Practice and the Hawaii Nurse Practice Act and assesses own performance in relation to each provision.
   b. Recognizes biases that may be introduced into clinical reasoning as a result of personal values. Seeks assistance from colleagues or instructor to monitor the influence of own biases and values.
   c. Recognizes when own values are in opposition with values of client and/or family. Recognizes, and remains nonjudgmental, when own values are in opposition with values of client and/or family
   d. Reevaluates own values and biases through reflection, and seeks to identify their impact on future clinical situations. Reflects and acknowledges the impact of values and bias on future clinical situations.
   e. Identifies obvious ethical dilemmas in which there are two or more viable options. Articulation of inherent ethical principles though application in a particular context may be limited.
2. **Reflection on Practice**  
   a. Seeks external feedback and assistance in reflective process and sets realistic goals with consultation.  
   b. Identifies own established patterns of behavior and thought.  
   d. Uses established procedures and forms for self-reflection.

3. **Self-directed Learning leads to Evidence-based Practice**  
   a. Increasingly open to new learning opportunities and valid points of view, recognizing own learning needs.  
   b. Seeks local resources to answer specific questions—e.g., unit procedure manuals, textbooks, and practicing nurses.  
   c. Conducts broad database search using digital retrieval systems, including the Internet.  
   d. Able to independently find literature in one database.  
   e. Recognizes needed information sources from other disciplines.  
   f. Recognizes the difference between data-based publications & opinions.  
   g. Reads and summarizes integrative reviews and clinical practice guidelines.  
   h. Looks for supporting evidence for nursing interventions.  
   i. Identifies potential implications for practice from integrative reviews and clinical practice guidelines.  
   j. Understands that information continually evolves.

4. **Leadership**  
   a. Recognizes leadership issues and responsibilities.  
   b. Identifies personal leadership abilities.  
   c. Uses own leadership abilities primarily relying on a basic set of leadership strategies independent of situation or team characteristic.  
   d. Acknowledges delegation as a needed modality to improve client care.  
   e. Identifies laws and regulations regarding delegation to various levels and categories of personnel.  
   f. Consults with experienced personnel regarding delegation needs for client care.

5. **Collaboration with members of the health care team.**  
   a. Consults and collaborates with own peers, faculty and nursing staff.  
   b. Demonstrates responsibility to fulfill assignments and commitments.  
   c. Recognizes when feedback to team members may be useful.  
   d. Identifies and supports peers and self in efforts toward wellness.  
   e. Verbalizes an understanding of the need and importance of developing professional networks.

6. **Health Care System Issues**  
   a. Identifies basic healthcare access issues for assigned client.  
   b. Identifies one or more policies or regulations affecting resource availability in a specific health care situation.  
   c. Assists clients to recognize barriers to accessing optimal health care.  
   d. Describes client characteristics and situations in which access to health care needs improvement.  
   e. Recognizes the need for initiating referrals and own learning needs to explore available community resources.
7. **Relationship-Centered Care**
   a. Describes personal relationship style.
   b. Initiates meaningful interactions despite personal discomfort
   c. Recognizes the importance of maintaining professional boundaries.
   d. Establishes rapport
   e. Recognizes importance of relationship by eliciting client/family story.
   f. Identifies and describes aspects of common local cultures including own, attempts individual assessment of relevant cultural aspects, including history of the community.

8. **Communication**
   a. Shows basic understanding of therapeutic communication strategies.
   b. Demonstrates active listening.
   c. Uses open-ended questioning to elicit psychosocial data with increasing confidence.
   d. Notices cues from client.
   e. Written assignments show increasing consistency in accuracy and expected format.
   f. Initiates standardized health teaching but may require assistance in the recognition of client variables impacting learning or health care education needs.
   g. Communicates plan of care to client and family.
   h. Demonstrates beginning self-awareness of own cultural and language variations
   i. Identifies key cultural variables that affect communication in uncomplicated client situations.

9. **Clinical Judgment**
   a. In stable/common/familiar situations, monitors a variety of subjective and objective data, identifies obvious patterns and deviations, and develops prioritized intervention plans.
   b. With assistance advances client assessment to differentiate less relevant from pertinent data, and subsequently expand priorities.
   c. In stable/common/familiar situations, completes nursing care assigned, maintaining safety for client and self
   d. Demonstrates increasing consistency in evaluating interventions for effect and efficacy.
   e. Implements new nursing skills with supervision.
   f. Demonstrates awareness of the need for ongoing improvement and makes effort to learn from experience and improve performance.
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Second Level Benchmarks  

Graduates of the Second Level are educated to provide nursing care in agencies that provide appropriate orientation, on-going staff development opportunities, and professional guidance. They are primarily educated to function as members of the multidisciplinary health care team in direct nursing care roles with adult and pediatric clients. They have been introduced to the concepts of nurse leadership and the role of the registered nurse in acute care, community clinics, long-term care, and home health. Graduates are eligible to take the National Council for Nursing Licensure Examination for Registered Nurses (NCLEX-RN).

By the end of the second year of nursing curriculum, it is expected that the student will meet the following performance benchmarks:

1. Ethical Practice  
   a. Consciously incorporates each provision of the ANA Code of Ethics and Standards of Practice and the Hawaii Nurse Practice Act in practice  
   b. Identifies when clinical practices and protocols may be at odds with individual patient rights  
   c. Identifies dilemmas in which individual rights are in conflict with the greater good  
   d. Articulates dilemmas and identify stakeholders with pertinent facts.  
   e. Applies ethical principles to identify choices and possible consequences.  
   f. Engages in reflection about choices, considering ethical frameworks, and the implications for future situations.

2. Reflection on Practice  
   a. Interrelates personal and professional behaviors with relevance identified to both self and the profession.  
   b. Questions personal and professional established patterns of behavior and thought.  
   d. Acknowledges possible implications for self and practice with occasional assistance.  
   e. Participates in a personal plan for self-renewal in the physical, mental, social, and spiritual dimensions. Consistently prioritizes based on personal and professional values and principles.

3. Self-directed Learning leads to Evidence-based practice  
   a. Seeks information out of interest, beyond the limits of assignments; identifies perplexing questions and seeks answers.  
   b. Recognizes that information continually evolves.  
   c. Readily identifies and takes responsibility for own learning needs.  
   d. Uses assistance effectively to frame questions and to construct and implement effective search strategies. Constructs specific search strategy using appropriate terms and commands for the information retrieval system  
   e. Seeks and integrates current knowledge from other disciplines
f. Evaluates the arguments supporting opinions.
g. Evaluates the overall strength of evidence supporting a practice.
h. Reads and summarizes original research (qualitative, quantitative, clinical trials).
i. Explains findings of studies to clients or colleagues.
j. Selects and/or writes plans of care that incorporate evidence from integrative reviews and clinical practice guidelines.
k. Seeks research evidence to refine own nursing practice.

4. Leadership
a. Identifies characteristics of effective leadership.
b. Engages in self-directed professional development to improve personal leadership characteristics and skills.
c. Understands consequence of making leadership decisions with limited information.
d. Provides positive and constructive feedback on specific aspects of performance.
e. Delegates to, and evaluates others, ensuring that the task is within their scope of practice, that they are competent to perform the task, and that they receive clear communication and feedback in regard to their performance.
f. Explains the purpose and desired outcome of the task and the time frame in which the task is to be completed.
g. Provides leadership in the modification of client care and/or organizational issues toward identified outcomes.

5. Collaboration with members of the health care team.
a. Readily consults within the health care team; sees self as a participant in collaborative interactions.
b. Works well with team members who have varying points of view; enters into team relationships and readily accepts and fulfills assignments and commitments.
c. Actively contributes to team work; offers help and assists team with problem solving and decision making; and shares information necessary to make informed decision.
d. Gives feedback in a timely and appropriate manner.
e. Regularly and realistically self-evaluates own performance: compares self-evaluation with feedback received, verbalizes intent to use the constructive feedback in future situations.
f. Recognizes need to manage physical health variables and emotional stressors and sets priorities and time boundaries; asks for assistance and feedback from team members.

6. Health Care System Issues
a. Recognizes current and needed resources within the immediate clinical area.
b. Makes contacts with community agencies that provide services for clients.
c. Seeks broadening knowledge of practice needs and resources at individual, family, and/or community level. Makes referrals to established local community resources.
d. Obtains data to identify areas for improving health care access for client/population.
e. Identifies impact of laws, regulations, structures, rules, and guidelines on resource availability for health care for individuals, families and the community.
f. Assists clients to reduce barriers to accessing optimal health care. Identifies practice issues and policies that impact access to health care.
g. Identifies political and policy making processes and actions to improve health care and solve access problems.
7. **Relationship-Centered Care**
   a. Integrates and adapts personal style with expected professional relationship style
   b. Intentionally moves out of personal comfort zones to accommodate patient needs
   c. Consistently sets and respects appropriate boundaries
   d. Adapts care to individual client/family needs
   e. Uses understanding of cultural, economic, environmental and social differences to assess uniqueness of individual client.
   f. Analyzes the impact of the culture and history of the community on the client’s situation.
   g. Incorporates understanding of client’s/family’s perspective into plan of care.
   h. Collaborates with client in care planning
   i. Acknowledges and accepts client/family attitudes

8. **Communication**
   a. Establishes goals for client-centered therapeutic interactions.
   b. Effectively utilizes verbal and nonverbal approaches for effective therapeutic communication in non-complicated client situations.
   c. Readily elicits client’s and family’s communication.
   d. Caring apparent through tone and nonverbal behavior.
   e. Seeks verbal collaboration with other health care team members.
   f. Assesses client’s learning needs, learning styles, and variables impacting the teaching-learning process. Uses appropriate teaching strategies and materials.
   g. Spontaneously incorporates health care knowledge and education into routine communication.
   h. Creates individualized health teaching plans.
   i. Designs and implements health education programs to address learning needs of population.
   j. Knowledgeable of own communication skills and deficits.
   k. Recognizes own cultural biases and inexperience.
   l. Integrates multiple overt variables into the interaction in uncomplicated client situations

9. **Clinical Judgment**
   a. Regularly anticipates/observes/monitors a variety of subjective and objective data.
   b. Recognizes most patterns and deviations in data, the majority of subtle signs, and uses these to continually assess
   c. Actively seeks subjective information about the client’s situation from the client and family to support planning interventions; usually pursues important leads
   d. Usually focuses on the most important data and seeks further relevant information.
   e. In most situations, interprets the client’s data patterns and compares with known patterns to develop an intervention plan and accompanying rationale; recognizes rare or complicated cases where it is appropriate to seek the guidance of a specialist or more experienced nurse
   f. Develops interactions based on relevant patient data; monitors progress regularly.
   g. Demonstrates effective and efficient performance of nursing skills, providing for clients’ physical, pharmacological, psychological safety while demonstrating caring behaviors.
   h. Evaluates personal clinical performance with minimal prompting in analyzing major clinical events and decisions made, as well as alternatives considered