^{*}Recommendation is that all PE evaluations start from right column (does not meet expectations) to left (consistently exceeds).

	4	2	2	1
MJR	Consistently Exceeds	Occasionally Exceeds	Meets Expectations	Does Not Meet Expectations
Nursing Service /Patient Care	 Meet Unit-specific Enterprise Quality and Safety Goal Max (cascade from leadership goal) - these should be clearly identified for staff and documented during midyear;	midyear).	Meet Seven (7) of the following: Follows all bundle compliance (NO HARM, outreach, etc.); 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 with cameras on if done virtually; Possesses knowledge of Quality metrics; Core Measures, NSI; enterprise goal plan and/or other key metrics for their work unit; Rounds/assesses 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; Actively attempts to complete SDoH assessments AND Work unit must meet ONE (1) of the following: Hand Hygiene 85% or greater for unit (clinical staff - RN, NCT, MA, LPN, etc.); BCMA compliance for individual at 85% or greater; At threshold or greater for quality metric for unit/clinic specific goal (determined by dyad or leadership team — cascades from leadership) — these should be clearly identified for staff and documented during midyear. Population Health Only (must also meet the following) — Average Monthly Outreach Average Patient Roster	 If employee meets any of the criteria in this column, then their score will be a 1; 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, SDoH compliance, etc; 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 for individual <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, Press Ganey survey, or leader rounds; Does not complete monthly peer to peer wildcards; Does not report changes in patient condition, in timely manner, to supporting RN. Does not follow standard policy for documenting in EHR and for telephone/outreach encounters. Does not complete delegated task in a timely manner. Does not follow established workflows.





	4	3	2	1
MJR	Consistently Exceeds	Occasionally Exceeds	Meets Expectations	Does Not Meet Expectations
MJR	Work unit meets Max goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions. OR Work unit meets Target for identified patient experience goal or predetermined patient experience question or key driver and TWO (2) of the following: OR Meets FIVE (5) of the following: 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	Work unit meets <u>Target</u> goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions. OR Meets <u>THREE (3)</u> of the following: 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;	Meets Expectations Work unit meets Threshold goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions. OR Meets all of the following: 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.	Does Not Meet Expectations If employee meets any of the criteria in this column, then their score will be a 1. Does not meet Threshold goal for specific enterprise patient centeredness goal (cascaded from leadership goal), or predetermined patient experience/key driver questions. OR 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
	 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; 	 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; Nursing Specialty award recipient within past year. 		-

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0	 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; Nursing Specialty award recipient within past year. 		

LPN Performance Evaluation Rating Guide Updates 12/2024

MIR	4	3	2	1
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MJR	Consistently Exceeds National Specialty Certification (outside of job requirement). OR TAP Advancement Level Two. OR Meets SIX (6) of the following: Current Super User/Validator Precept new graduates or new LPNs to work unit; Precept synthesis or other healthcare students; Active member of professional nursing	Occasionally Exceeds TAP Advancement Level One. OR Meets FOUR (4) of the following: 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;	2 Meets Expectations 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 bi-annual sessions (2 per year); Assumes accountability for professional development.	Does Not Meet Expectations If employee meets any of the criteria in this column, then their score will be a 1. 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 bi-annual sessions (2 per year); Does not maintain unit specific competencies.
Professional Development & Competency	 organization; Participant in unit/clinic/nursing enterprise committee or council; Chair or co-chair unit/clinic/nursing/enterprise council; Journal article publication; 	 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. Population Health Only: Lead an education session related to population health one (1) time per year. 		

MJR	4 Consistently Exceeds	3 Occasionally Exceeds	2 Meets Expectations	1 Does Not Meet Expectations
Efficiency	Meeting Unit-specific Enterprise Efficiency Max Goal (Cascade from Leadership Goal). OR Meets FIVE (5) of the following: 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 coworkers 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.	Occasionally Exceeds Meeting Unit-specific Enterprise Efficiency Target Goal (Cascade from Leadership Goal). OR Meets Three (3) of the following: 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).	Meeting Unit-specific Enterprise Efficiency Threshold Goal (Cascade from Leadership Goal). All LPNs - 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.	 If employee meets any of the criteria in this column, then their score will be a 1. 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.