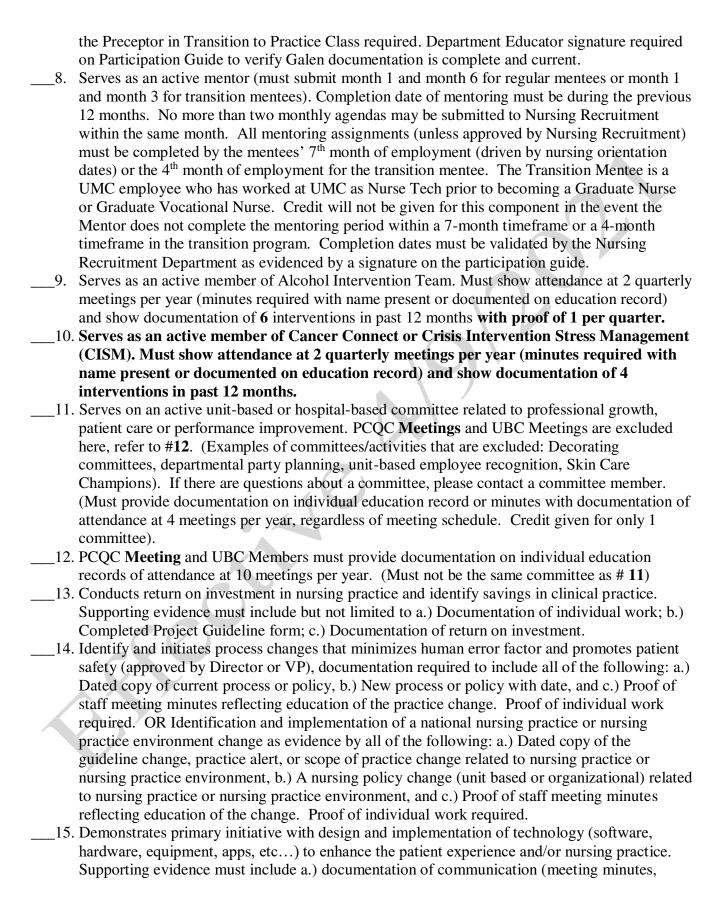
## **LVN Portfolio Checklist**

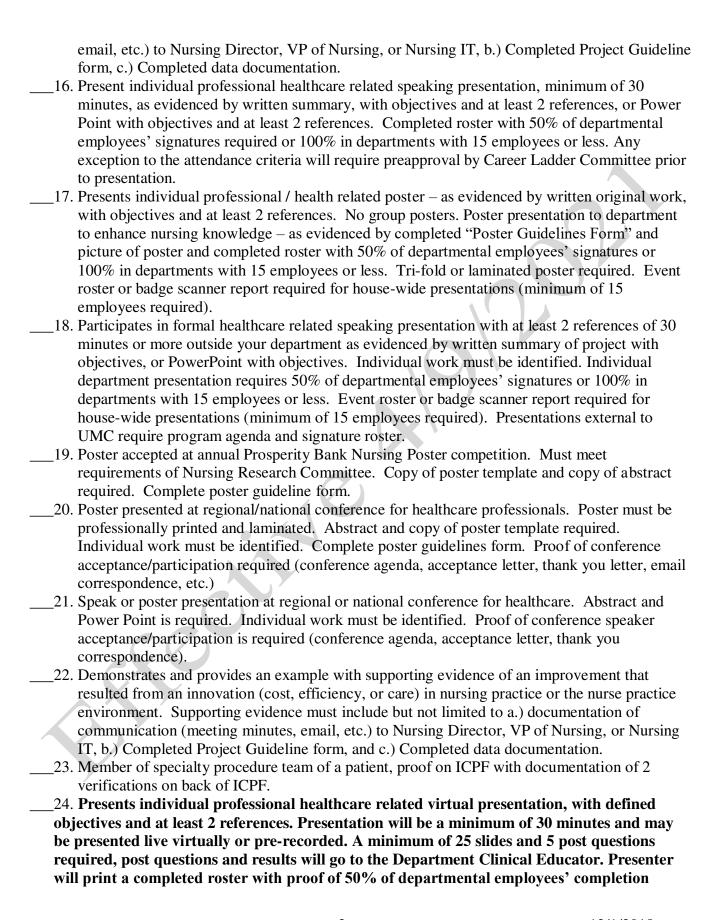
Name:	Level Requested:
~ •	*Each Item Can Only Be Used Once*
Criter	
1.	1. Active participation in external (volunteer/unpaid) community health affiliated project – a total of 20 hours must be documented - BE SPECIFIC – individual hours must be listed per date on Participation Guide - (Medical Relief, Children's Health, Cancer, Heart Health, Safety, Diabetes, Nutrition, etc. (2 hours maximum for walking)). Food Sale/Fundraising (maximum 2 hours/day (cooking, sales only)). City COVID Vaccine Fair (Document hours on participation guide and have signature).
2.	
۷.	SPECIFIC – individual hours must be listed per date on Participation Guide - (Children's Miracle Network, Spirit Team, Thirty Minute Club, Administer Employee TB tests ((maximum of 2 hours within the department and/or additional hours documented by Employee Health for house-wide event and Director signature required)), TB Fit Mask Team ((maximum of 2 hours and Director signature required)), employee flu shot administration ((maximum of 2 hours within the department and/or additional hours documented by Employee Health for house-wide event and Director signature required)), UMC approved translator ((must attach approved translator form – document hours on Participation Guide with Charge Nurse signature and maximum of 2 hours per day)), NODA ((NODA Committee member signature per event)), UMC COVID Vaccine Fairs (Document hours on participation guide and signature from Nursing Education), Peer Interviews ((maximum of 30 minutes per interview and director signature required)), Super Users ((signature required from Nursing Education per event), etc.), free wellness patient screenings (must be signed off by Directors and maximum of 2 hours), Unit-based reward and recognition activities ((document specific hours and Director signature required)), Grievance hearings outside your department (signature required by HR Director). Speaker or moderator for Nurse Partnership Classes (hours must be signed off by Service Development on Participation Guide). Future employee observation (must be signed off by Nurse Recruitment and a maximum of 4 hours per day), Food Sale/Fundraising (maximum 2
	hours/day (cooking, sales only)). *Monetary donations excluded. *No committee meetings.
	Professional national certification (NFLPN) (must provide copy of current card).
4.	Membership in a recognized professional nursing organization for minimum of 6 months (must provide current card) with previous 6 months membership proof.
5.	**Assist in educational activity that enhances nursing practice that is recognized and signed-off
	on participation guide by the Nursing Education Department or Clinical Instructor. Minimum of 4 hours. BE SPECIFIC (teach internship classes, teach charge nurse class, teach mentor class, teach portion of annual competency or at competency fair, Super User who teaches classes, etc.)
6.	Instructor of a specialty training program (BLS, etc.). (Required to teach 2 classes <b>or hold 2</b>
	<b>mock codes</b> per 12- month period, documentation required and copy of Instructor Card required).
7.	Serves as unit preceptor (for employees only) – 96 hours documented in past 12 months. Proof from Lawson or KRONOS Timecard with date report is printed and documentation of Role of

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12/1/2018



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required or 100% in departments with 15 employees or less. Department Clinical Educator or Nursing Education will sign the Participation Guide.

	Application Completed Nurse Director C Evidence of criteria accomp Participation Guide Portfolio Checklist		mponent number)
Signature:		Date:	

4 12/1/2018