Professional Development Plan

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Abstract

In this paper, I first described and analyzed my current strengths and limitations of professional behaviors according to the American Nurses Association (ANA) Standards of Professional Nursing Performance. I then illustrated professional goals for five and ten years, established action plans to meet those goals, and established evaluation plans to measure progress towards those goals.

Professional Development Plan

I still remember two years ago when I as a student nurse approached graduation, thoughts of beginning a career in nursing came to mind. These include long-term as well as short-term goals. Now I still have the same long-term and short-term goals as I had two years ago. And I am making every effort to achieve them. I realize long-term and short-term goals must acknowledge my strengths and limitations. Therefore, it is very important for me to use the Standards of Professional Performance developed by the ANA as guidelines to capitalize on my strengths and overcome my limitations.

**Quality of Practice**

The registered nurse must identify practice deficits, highlight areas of clinical innovation, and make recommendations where appropriate to improve patient’s outcome. The registered nurse must constantly evaluate clinical care in order to effect change in nursing practice to optimize patient’s health. The registered nurse is accountable for complete, accurate, and up to date documentation (ANA, 2004, p. 33).

**Strengths**

As a nurse, I follow five-step nursing process in everyday practice. I gather information about the patient, identify his or her specific needs, develop a plan of care with patient to meet these needs, implement the plan of care, and evaluate the effects of the implementation. I always clearly document. I realize that documentation is a valuable method for demonstrating that, I as a nurse have applied nursing knowledge, skills, and judgment according to professional standards.

**Weaknesses**

Change practice is a significant challenge for any nursing service. However, quality of care can be improved by making effective change in nursing practice. I should evaluate clinical care on a regular basis, so that I can identify practice deficits and initiate change in my practice.

**Education**

Nurses require knowledge and establish competency necessary to nursing profession. Nurses also update knowledge and enrich experiences by participating actively in educational activities (ANA, 2004, p. 35).

**Strengths**

I think there are many nurse education opportunities, such as ongoing education in many clinical specialties, continuing certification in Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS), clinical leader development, and RN to BSN program, etc. The hospital I work for has RN skill fair every year. The skill fair offers on a variety of topics designed to provide the nurses with an opportunity to raise their knowledge to a new level. I do attend the skill fair every year, not because it is mandatory. It helps me to incorporate new knowledge to improve nursing practice. I do have certifications in BLS and ACLS and renew them per requirements. Now I am returning to school for BSN degree.

**Weaknesses**

We as nurses are encouraged to participate in professional conference. I only attended few times since I had chosen nursing as my career. I always excuse myself for not participating in this learning activity. Actually, I realize that professional conference provide the best opportunity for nurses to update knowledge and share their experiences with peers.

**Professional Practice Evaluation**

Nurses must evaluate their own nursing practice and obtain feedback from patients, peers, professional colleagues, and others to help them recognize their level of practice and highlight their strengths and abilities (ANA, 2004, p. 36).

**Strengths**

I as a nurse evaluate my practice in relation to professional practice standards every six months. I think self-evaluation of practice is an effective method to adjust my nursing practice activities to ensure quality and safety for the patients. I use my sincerity to obtain valuable suggestions from peers to make progress in my professional practice.

**Weaknesses**

By reviewing the ANA Standards of Professional Nursing Performance, I realize patient feedback has to reach frontline nurses to improve care. It is my weak part. From now on, I would listen to my patients’ feedback to improve my performance.

**Collegiality**

Nurses must foster collegiality in the workplace. Nurses should share knowledge and skills with peers and colleagues, provide peers with feedback regarding their practice, and support a healthy work environment (ANA, 2004, p. 37).

**Strengths**

On the whole, at my workplace anyway, I have found a pretty good sense of collegiality. I provide peers with feedback regarding their practice as well as obtain feedback from peers. I share my knowledge and skills with peers. I used to be a float nurse. Now I work on a surgical floor. Some patients need not only post-operative care, but complicated medical management. For example, some patients need to be on insulin drip, which is not seen too much on surgical floor. I do share my skills with peers to help them improve their professional skills.

**Weaknesses**

I hope we can have regular reviews of our collegiality. For example, we can hold occasional meetings that are purely focused on reviewing what is working or what is not. And as I mentioned early, professional conference is the best opportunity to share knowledge with peers. I will actively participate in professional conference and bring back updated knowledge to share with my peers.

**Collaboration**

Nurses must communicate effectively with patient, family, and others regarding patient care and join other healthcare providers to improve patient care (ANA, 2004, p. 38).

**Strengths**

Collaborative healthcare practice has amazing results. I respect and trust other members of the team who are just important in providing quality care. We work together to facilitate better patient outcome. Working together requires communication. I give the accurate and comprehensive information about my patient to the doctor. If the patient has been seen by a physical therapist, an occupational therapist, a dietician, or a specialist, I will report their findings to the attending doctor timely. So, further treatment can be made to the patient.

**Weaknesses**

I rarely communicate with the family regarding patient care. First, I need to follow the Health Insurance Portability and Accountability Act (HIPPA) policy. Having patient’s permission, I can involve the family in patient care. Family support is as large as staff support. I would collaborate with family to enhance patient well-being.

**Ethics**

According to the ANA, the “registered nurse integrates ethical provisions in all areas of practice”. Nurses must use the ANA Code of Ethics for Nurses as guidelines for practice (ANA, 2004, p. 39).

**Strengths**

I educate my patients that they have right to make health-care decisions for themselves, even if I do not agree with those decisions. I treat my patients equally regardless of race, sex, marital status, medical diagnosis, economic level, or religious belief. I always ask my patients about advance directives and provide information about them if so desired. For those who have advance directives, I encourage them to review it and update it if needed.

**Weaknesses**

Every nurse unavoidably faces ethical dilemmas in today’s nursing practice. Many ethical decisions can be complex and challenging. My ADN program provides little training on professional ethics. I have learned from this course that ethical decision-making is a skill that can be learned and developed through practice. Common ethical dilemmas I encounter in nursing are cardio pulmonary resuscitation, access to care, and advance directives. I need to completely analyze each of these dilemmas and make an informed decision. The ANA Code of Ethics for Nurses serves as the ethical guidelines for me.

**Research**

Nurses must utilize research findings to practice and actively participate in research activities at different level appropriate to their level of education and position (ANA, 2004, p. 40).

**Strengths**

The organization I work for very supports evidence-based practice. In today’s health care, it is very important for nurses to incorporating research findings into their practice, so appropriate practice change can be made to improve patient’s outcome. Some areas, such as wound care, treatment and management of pressure sores, mouth care, care of urethral catheters have been well researched. I am very comfortable to incorporating these research findings into my practice.

**Weaknesses**

I still feel lack of knowledge of the research process and skills to access, understand, critically evaluate, and implement research findings. I think there is a need for more research education. Attending research courses would be a good idea, so that nurses could develop their research appraisal skills. I will take nursing research course next semester.

**Resource Utilization**

According to the ANA, the “registered nurse considers factors related to safety, effectiveness, cost, and impact on practice in the planning and delivery of nursing services” (ANA, 2004, p. 42).

**Strengths**

I provide education regarding resource utilization. I assess my patients and make recommendation, so that my patients receive the appropriate level of care. Acting as the patient’s advocate, I am more conscious about health care costs. Due to the rising cost of the healthcare and a serious economic recession in America, it is especially important for nurses to provide cost-effective care.

**Weaknesses**

I think the health education and resource utilization is correlative. I wish I can spend more time with my patients to educate them regarding appropriate resource utilization. I believe the health education can avoid unnecessary utilization of health care resources.

**Leadership**

According to the ANA, the “registered nurse provides leadership in the professional setting and the profession” (ANA, 2004, p. 44).

**Strengths**

I as a team player take responsibility for my clinical environment. I maintain my workplace a healthy work environments. I think leadership does not relate merely to administrators and high-level managers, but also can be developed and implemented at the bedside. I as a new nurse have basic leadership skills. I decide appropriate time to call a physician, choose applicable care plans and pertinent outcomes. I accept mistakes by self and other.

**Weaknesses**

Nursing leaders must be flexible, willing to change. I have a weakness in this area. I will need to be open to new ideas, face the challenges, and strive to implement change.

**Professional Development Plan**

I drew up five year plans and a ten year plan for my career and professional development. I will take specific actions to help me attain these goals. I have evaluation plans to measure attainment of these goals.

**Five year goals**

My first professional goal is that I will complete RN to BSN program at Ferris State University by December, 2011. After that, another goal is that I will seek employment in one of the nursing specialties-operating room (OR) by 2014. Last goal is that I will attend professional conference every year and start in 2010.

**Action Plan.** In order to complete RN to BSN program by December, 2011, I will strictly follow the RN to BSN plan check sheet. Basically, I take two courses a semester. Each November, I register classes for spring semester. Each March, I register classes for summer semester. And each June, I register classes for fall semester. After I have my Bachelor Science of Nursing degree, I will meet the qualification to apply for one of the nursing specialties-operating room nursing. I know a lot of hospitals offer an operating room orientation program which provides a rewarding opportunity for new nurse graduates or RN to explore a variety of specialties, but a majority request Bachelor Science of Nursing degree. This is one of the reasons for me to pursue a Bachelor Science of Nursing degree in order to be qualified to seek employment in operating room nursing. With education qualification, I will have more confidence and start working as an OR nurse by 2014. I will attend professional conference every year and start in 2010. Usually, by attending professional conference, you will earn continuing education contact hours. They can be used for renewal of nursing license. The most important benefit for me attending professional conference is to update my knowledge and share my knowledge and experience with others in order to improve my ability in education and collegiality, which are my weakness identified in the behavior analysis above.

**Evaluation Plan.** To evaluate progress toward my five years goals, my plans are as follows. I will review and update the RN to BSN plan check sheet at the end of each semester. I will determine if I complete the courses on schedule, so that I will graduate by December, 2011. With education qualification, confidence, and interest, I will be an OR nurse by 2014. I retain records documenting the completion of continuing education in one folder every four years. At the end of every year, I check my records in the folder to see if I attend professional conference or not? If not, am I able to make up another time? At the end of each year, I will write a professional development journal. It includes what I have learned so far, does the knowledge I acquire help me increase and maintain the quality of my performance in my present job, what are barriers to prevent me from achieving my short-term goals, and how I can overcome them to reach to achieve these goals.

**Ten year goal**

My professional goal for ten years is that I will complete Nurse Anesthesia program and become a certified registered nurse anesthetist (CRNA) by 2019.

**Action Plan.** I would like to get into Nurse Anesthesia program at Rush University College of Nursing in Chicago. According to graduate admission guidelines for MSN-NP Anesthesia Program of Study (2009), all applicants require a cumulative GPA of a 3.0 on a 4.0 scale for all undergraduate and nursing courses. This requirement has to be kept in mind when I am going throughout the BSN program. I will need to submit a resume, including work experience, educational, leadership, and professional organization activities. I will also need to provide three letters of recommendation, a copy of my current nursing license, and official transcripts. I will have an interview with college of nursing faculty. I will need Basic Life Support (BLS), Advanced Cardiac Life Support (ACLS), and Pediatric Advanced Life Support (PALS) certificate prior to the application. I have BLS and ACLS certificate and will keep renewed, so I will need to take PALS course. I will need at least one year experience in adult critical care. After I achieve my five year goals, I will be working in the operating room. I will stay on that position for two years. I can get familiar with the operating room’s special setting. Then I will need to work at adult critical care unit for at least a year in order to meet one of the requirements to apply for Nurse Anesthesia program. I will apply for this program in 2017. This is 27 month program. After entering and completing extensive education and training, I will become a CRNA.

**Evaluation Plan.** To evaluate if I achieve my ten year goal, I see each course or semester as an accomplishment and progress toward my ultimate goal. I will do self-assessment by asking myself if being a nurse anesthetist reaches a new level in my career, highlights my strengths, and makes up my weakness. And I will use feedback from my manager, colleagues to evaluate my professional development plan. It also can improve my ability in collegiality. I consider change is to be expected. I may revise my goals as a positive response to the new development.

References

American Nurses Association. (2004). *Nursing: Scope & standards of practice.* Silver Spring,

MD: American Nurses Association.

Rush University College of Nursing (2009). *MSN-NP anesthesia program of study admission*

*guidelines.* Retrieved from <http://www.rushu.rush.edu>

Appendix A

**CHECKLIST FOR SUBMITTING PAPERS**

|  |  |
| --- | --- |
| **CHECK**  **DATE, TIME, & INITIAL** | **PROOFREAD FOR: APA ISSUES** |
|  | 1. **Page Numbers:**  Did you number your pages using the automatic functions of your Word program? [p. 230 and example on p. 40)] |
|  | 2. **Running head:** Does the Running head: have a small “h”? Is it on every page? Is it less than 50 spaces total? Is the title of the Running head in all caps? Is it 1” from the top of your title page? (Should be a few words from the title of your paper). [p. 229 and example on p. 40] |
|  | 3. **Abstract:** Make sure your abstract begins on a new page. Is there a label of Abstract and it is centered at the top of the page? Is it a single paragraph? Is the paragraph flush with the margin without an indentation? Is your abstract a summary of your entire paper? Remember it is not an introduction to your paper. Someone should be able to read the abstract and know what to find in your paper. [p. 25 and example on p. 41] |
|  | 4. **Introduction:** Did you repeat the title of your paper on your first page of content? Do not use ‘Introduction’ as a heading following the title. The first paragraph clearly implies the introduction and no heading is needed. [p. 27 and example on p. 42] |
|  | 5. **Margins:** Did you leave 1” on all sides? [p. 229] |
|  | 6. **Double-spacing:** Did you double-space throughout? No triple or extra spaces between sections or paragraphs except in special circumstances. This includes the reference page. [p. 229 and example on p. 40-59] |
|  | 7. **Line Length and Alignment:** Did youuse the flush-left style, and leave the right margin uneven, or ragged? [p. 229] |
|  | 8. **Paragraphs and Indentation:** Did you indent the first line of every paragraph? See P. 229 for exceptions. |
|  | 9. **Spacing After Punctuation Marks:** Did you space once at the end of separate parts of a reference and initials in a person’s name? Do not space after periods in abbreviations. Space twice after punctuation marks at the end of a sentence. [p. 87-88] |
|  | 10. **Typeface:** Did you use Times Roman 12-point font? [p. 228] |
|  | 9. **Abbreviation:** Did you explain each abbreviation the first time you used it? [p. 106-111] |
|  | 11. **Plagiarism:** Cite all sources! If you say something that is not your original idea, it must be cited. You may be citing many times…this is what you are supposed to be doing! [p. 170] |
|  | 12. **Direct Quote:** A direct quote is exact words taken from another. An example with citation would look like this:  “The variables that impact the etiology and the human response to various disease states will be explored” (Bell-Scriber, 2007, p. 1).  Please note where the quotation marks are placed, where the final period is placed, no first name of author, and inclusion of page number, etc. Do all direct quotes look like this? [p. 170-172] |
|  | 13. **Quotes Over 40 Words:** Did you make block quotes out of any direct quotes that are 40 words or longer? [p. 170-172] |
|  | 14. **Paraphrase:** A paraphrase citation would look like this:  Patients respond to illnesses in various ways depending on a number of factors that will be explored (Bell-Scriber, 2007). Do all paraphrased citations look like this? [p. 171 and multiple examples in text on p. 40-59] |
|  | 15. **Headings:** Did you check your headings for proper levels? [p. 62-63]. |
|  | 16. **General Guidelines for** **References:**  **A.** Did you start the References on a new page? [p. 37]  **B.** Did you cut and paste references on your reference page? If so, check to make sure they are in correct APA format. Often they are not and must be adapted. Make sure all fonts are the same.  **C.** Is your reference list double spaced with hanging indents? [p. 37] |
|  | **PROOFREAD FOR GRAMMAR, SPELLING, PUNCTUATION, & STRUCTURE** |
|  | 13. Did you follow the assignment rubric? Did you make headings that address each major section? (Required to point out where you addressed each section.) |
|  | 14. Watch for run-on or long, cumbersome sentences. Read it out loud without pausing unless punctuation is present. If you become breathless or it doesn’t make sense, you need to rephrase or break the sentence into 2 or more smaller sentences. Did you do this? |
|  | 15. Wordiness: check for the words “that”, and “the”. If not necessary, did you omit? |
|  | 16. Conversational tone: Don’t write as if you are talking to someone in a casual way. For example, “Well so I couldn’t believe nurses did such things!” or “I was in total shock over that.” Did you stay in a formal/professional tone? |
|  | 17. Avoid contractions. i.e. don’t, can’t, won’t, etc. Did you spell these out? |
|  | 18. Did you check to make sure there are no hyphens and broken words in the right margin? |
|  | 19. Do not use “etc.” or "i.e." in formal writing unless in parenthesis. Did you check for improper use of etc. & i.e.? |
|  | 20. Stay in subject agreement. When referring to 1 nurse, don’t refer to the nurse as “they” or “them”. Also, in referring to a human, don’t refer to the person as “that”, but rather “who”. For example: The nurse that gave the injection….” Should be “The nurse who gave the injection…” Did you check for subject agreement? Likewise, don’t refer to “us”, “we”, “our”, within the paper…this is not about you and me. Be clear in identifying. For example don’t say “Our profession uses empirical data to support ….” . Instead say “The nursing profession uses empirical data….. |
|  | 21. Did you check your sentences to make sure you did not end them with a preposition? For example, “I witnessed activities that I was not happy with.” Instead, “I witnessed activities with which I was not happy.” |
|  | 22. Did you run a Spellcheck? Did you proofread in addition to running the Spellcheck? |
|  | 23. Did you have other people read your paper? Did they find any areas confusing? |
|  | 24. Did you include a summary or conclusion heading and section to wrap up your paper? |
|  | 25. Do not use “we” “us” “our” “you” “I” etc. in a formal paper! Did you remove these words? |
|  | 26. Does your paper have sentence fragments? Do you have complete sentences? |
|  | 27. Did you check apostrophes for correct possessive use. Don’t use apostrophes unless it is showing possession and then be sure it is in the correct location. The exception is with the word it. It’s = it is. Its is possessive. |

Signing below indicates you have proofread your paper for the errors in the checklist:

Jie Li DATE: November 10, 2009

A peer needs to proofread your paper checking for errors in the listed areas and sign below:

Mary Dewitt DATE: November 10, 2009

Appendix B

**PROFESSIONAL DEVELOPMENT PLAN**

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| --- | --- | --- |
| **DESCRIPTION AND ANALYSIS OF *CURRENT BEHAVIORS* (Using the ANA Standards of Professional Performance)** | **POINTS POSSIBLE** | **POINTS AWARDED** |
| **Quality of Practice:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Education:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Professional Practice Evaluation:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Collegiality:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Collaboration:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Ethics:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Research:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Resource Utilization:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **Leadership:** Description and Analysis of Current Strengths & Weaknesses | **5** |  |
| **PROFESSIONAL DEVELOPMENT PLAN** |  |  |
| **5 & 10 YEAR GOALS**: Articulates clear **professional** goals for 5 and 10 years within the profession which **reflect the weakness identified in the behavior analysis above** and/or plan to maintain compliance with Standards. These must be specific and measurable! Refer to information on nursing care plans re writing clear & measurable goals to receive full credit for this section! | **5** |  |
| **ACTION PLAN** for 5 & 10 year goals; to include actions and timelines that are consistent with the goal statements | **10** |  |
| **EVALUATION PLAN** to measure attainment of, progress toward or continuing suitability of both 5 & 10 year goals. Again this must be **specific and measurable**! A tool is useful for demonstrating how you will measure progress toward goals. **DO NOT STATE** for example “At the end of 5 years I will see if I have accomplished my goal to see if I was successful”. | **10** |  |
| **STANDARDS & APA CRITERIA** |  |  |
| **Critical Thinking/Writing:**Analysis & Plan is presented with accuracy, precision, clarity, relevance, depth, breadth, logic and personal significance. Sentence structure, paragraphing, headings, spelling, typing, grammar, neatness | **15** |  |
| **APA:** title page, running head, headers, abstract, margins, font size, references: citations in text & reference page | **15** |  |
| **TOTAL POINTS** | **100** |  |