

YOUR HOSPITAL DEPARTMENT OF NURSING EMPLOYEE ACTIVITY RECORD

NAME/TITLE:		EVALUATION YEAR FROM:			
		TO:			
A. GENERA	AL IN-SERVICES / CONTIN	UING EDUCATION (Hospital	Based)		
DATE	PROGRAM TITLE	SPEAKER / COORDINATOR	CHs / CEUs		

B. OUT	SIDE CONFERE	NCES			
DATE	PROGRA	AM TITLE	SPEAKE	R / COORDINATO	OR CHs / CEUs
C ANN	UAL REQUIREM	MENTS			
DATE		STIVITY		REMAR	(S
	Education Day				
	CPR				
	Blood Glucose Mo	onitoring	☐ 1st (Qtr 2nd Qtr	3rd Qtr 4th Qtr
	Annual Physical E				<u> </u>
D. ACA	DEMIC PROGRA		I IN	NSTITUTION	HOURS
DAIL	TE COURSE / PROGRAM		+ "	13111011011	Hooks
E. STAI	F MEETING (I	ndicate if you C	haired Me	eting)	
MONTH	DATE ATTENDED	DATE MINUTES	MONTH	DATE ATTENDED	DATE MINUTES
	ATTENDED	REVIEWED		ATTENDED	REVIEWED
JANUARY			JULY		
FEBRUARY			AUGUST		
MARCH			SEPTEMBER		
APRIL			OCTOBER		
MAY			NOVEMBER		
JUNE			DECEMBER		

F. COMMITTEE PARTICIPATION							
(1) Committee:			[Check Or	ne] 🔲 Co-Chair	Secretary	Member	
MONTH	DATE MEETING ATTENDED	DATE MINUTES READ	PROJECT DATE	MONTH	DATE MEETING ATTENDED	DATE MINUTES READ	PROJECT DATE
JANUARY				JULY			
FEBRUARY				AUGUST			
MARCH				SEPTEMBER			
APRIL				OCTOBER			
MAY				NOVEMBER			
JUNE				DECEMBER			
(2) Comm	ittee:			[Check Or	ne] Co-Chair	Secretary	Member
MONTH	DATE MEETING ATTENDED	DATE MINUTES READ	PROJECT DATE	MONTH	DATE MEETING ATTENDED	DATE MINUTES READ	PROJECT DATE
JANUARY				JULY			
FEBRUARY				AUGUST			
MARCH				SEPTEMBER			
APRIL				OCTOBER			
MAY				NOVEMBER			
JUNE				DECEMBER			
G. OUT	SIDE COMMI	TTEES / I	PROFESS	SIONAL A	CTIVITIES		
DATE			E / ORGAN			CIPATION	LEVEL

H. IN-S	ERVICE PRE	SENTATION(S)				
DATE	DATE OUTLINE SUBMITTED	TITLE		UNIT	DURATION	ATTENDEES
I. IOP A	ACTIVITIES (Activities To Improve	Organiz	zational Pe	rformance)	
DATE			ACTIV	ITY		
J. STAI	NDARDS DE\	/ELOPMENT				
DATE	STANDARD ACTIO			ON: REVI	EWED / REVIS	ED / WROTE
K. UNI	BASED COI	MPETENCIES / CEI	RTIFIC	ATIONS		
DATE		OMPETENCY / CERTI	FICATIO	N	CONTA	ACT HOURS
	Age-Specific Co					
	Domestic Violen					
	Patient Safety: F					

ACTIVITY	VALIDATING SIGNATURE	DATE
General Inservices		
Education Day		
CPR		
Glucose Monitoring		
Outside Conference(s)		
Inservice Presentation		
Unit-Based Competencies		
Annual Physical Exam		
Staff Meetings		
Committee Participation		
IOP Activities		
Standards Development		
M. COMMENTS		