Example Portfolio for Cytotechnologist Level IV
NOTE: This example presumes the candidate completed the Level III requirements two years ago and is now submitting the four required performance elements for Level IV.

Jane E. Jones, CT (ASCP), BS
PAL Portfolio
Level IV

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Introduction

I obtained my undergraduate degree from University of Pittsburgh College of Arts and Sciences in April of 2007 and completed the certificate program from the Anisa I. Kanbour MD School of Cytotechnology at University of Pittsburgh Medical Center in June, 2008. My clinical rotations were conducted at two affiliates in Pittsburgh: in the Department of Pathology and Laboratory Medicine at Magee-Womens Hospital and at Presbyterian-Shadyside Hospital.

In addition to being a full-time student, I worked on a part-time basis during my last two years in school. I was regularly scheduled to work 10 hours a week as a specimen processor in the Cytology Lab. For me, this work experience as a specimen processor was particularly valuable. It provided me with an opportunity to fully appreciate the importance of the pre-analytical specimen collection and preparation processes which can impact the quality of the specimen and the result. The perspectives that I gained were later very helpful with the quality improvement project for Pap smears. It was also very helpful for the training program to address positive patient identification and correctly labeling specimens.

Upon graduation, I successfully completed my national Board of Certification examination. Since August, 2008 and I have been working as a full-time Cytotechnologist in the Cytology Lab at Vanderbilt University Medical Center. In July of 2012, I successfully advanced to the Cytotechnologist III.

In 2012, I worked on an interdisciplinary team to evaluate and implement safe and effective process to recycle used chemicals for alcohol, xylene and formalin. Team members included representatives from Surgical Pathology, Supply Chain Management, and VEHS. Based on this committee’s work, a chemical recycling program was implemented in October
2013 and has reduced supply expense to purchase these chemicals by 95%. It has also decreased the chemical hazardous waste disposal expense for the Diagnostic Laboratories by 80%.

In December 2012, I led a cross functional task team to improve the result turnaround time for Pap tests. The team included staff from Cytology, Molecular Infectious Diseases, Patient Access Services, and Hospital Information Technology Services and we met regularly for 18 months. We were able to consistently meet the service standard of providing results within one week. A survey of clients indicated a 91% satisfaction rating. I created an abstract based on this committee’s work and successfully submitted it for presentation at the annual American Society for Cytotechnology. It was also accepted for publication in the Journal of the American Society of Cytopathology.

I was recommended by my supervisor to participate in an inter-disciplinary education project to improve compliance with positive patient identification and correctly labeling specimens. This team was led by a senior leader from Nursing services and included members from both inpatient and outpatient nursing services as well as staff from several sections of the Diagnostic Laboratories. We developed a self-education tool with a test. I met with the nursing staff of the Center for Women’s Health and presented this education program.

During the past 2 years, I have completed 28 hours of continuing education learning. In 2013, I was able to attend the national conference for the American Society for Cytotechnology and completed 12 CEU. In addition, I have completed another 16 CEU hours through lectures provided at VUMC.

For the future, I plan to continue my growth as a professional in Cytotechnology. I would like to pursue a Specialty certification from the Board of Certification of the ASCP. I have
agreed to serve as a member for the PAL Advancement Review Board. For these reasons, I believe that I am an excellent candidate for advancement in the PAL program.
DLPAL Profile Petition Cover Sheet

The petition packet is due to the Chair of the Review Board no later than the deadline noted on the DLPAL’s current calendar (submit 11 copies).

Candidate Name: Jane E. Jones _____________________________________ Advance ment to Level: IV

Sponsor Name: Nancy Smith ____________________________ Sponsor Level/Status: Supervisor

Packet includes: This cover sheet with the sponsor statement, coversheet of the most recent performance evaluation, candidate’s curriculum vita, and summary of activities and achievements across all categories (limit this summary to 3 pages).

Sponsor Statement:

It is a pleasure to add my endorsement to the petition of Jane E. Jones for promotion to a Level IV Cytotechnologist. Jane demonstrates strong performance in her duties. She has competently led an interdisciplinary team to implement a cost-effective and safe program to recycle chemical waste generated by both the Cytology and Surgical Pathology labs. Jane led a quality improvement project to reduce the turnaround time for Pap test results which has enabled the Cytology laboratory to consistently meet service standards of one calendar week. Jane submitted an abstract of the quality initiatives to improve the turnaround time for Pap test results which was accepted for presentation at the national conference for the American Society of Cytotechnology and was also accepted for publication in the Journal of the American Society of Cytopathology. She is an active member of a collaborative education project between Nursing services and the Diagnostic Laboratories to improve positive patient identification and specimen labeling.

X I verify the information contained in the report is accurate.
X I endorse this Candidate’s advancement to Level IV without reservation

Signature of Sponsor: Nancy Smith
Jane E. Jones, CT (ASCP), BS  
jane.e.jones@vanderbilt.edu

Business Address:
VUMC Diagnostic Laboratories  
Cytology Lab 4533 TVC  
Medical Center Drive  
Nashville, TN  
615-555-1234  

Home Address:
3131 Division St.  
Nashville, TN  
615-555-5678

EDUCATION

Bachelor of Science  
University of Pittsburgh  
Biology  
April, 2007

Certificate  
Anisa I. Kanbour MD School of Cytotechnology  
Cytotechnology  
University of Pittsburgh Medical Center  
June, 2008

PROFESSIONAL EXPERIENCE

VUMC Diagnostic Laboratories  
Nashville, TN  
Cytotechnologist (full-time)  
August, 2008- present

Baptist Memorial Hospital  
Lab Patient Representative II (part-time)  
August, 2006-June, 2008

PUBLICATIONS


PRESENTATIONS

Poster presentation, American Society for Cytotechnology national conference, May 2013;  
“Quality Enhancements for Cervical Cancer Screening: Practical Application of the Five Key Quality System Components”
PROFESSIONAL AFFILIATIONS, SERVICE, CREDENTIALS

Certification:
Medical Laboratory Science successfully completed from the Board of Certification of the American Society of Clinical Pathology July, 2008-present

License:
Tennessee Medical Laboratory Scientist July, 2008-present

TEACHING AND SUPERVISION
Not applicable

HONORS, AWARDS, PUBLIC SERVICE
Poster presentation, American Society for Cytotechnology national conference, May 2013; “Quality Enhancements for Cervical Cancer Screening: Practical Application of the Five Key Quality System Components”; awarded second place
NOTE:

Copy of employee’s front page from annual performance review should be inserted to document that appropriate performance ratings were met for both key function and Credo behaviors. It is not possible to create a ‘mock’ review in VPES for this sample portfolio submission.
DLPAL Activities Summary

Technical Operations

In May of 2012, I was asked to participate on an interdisciplinary team to evaluate the feasibility of recycling chemical waste instead of disposing these hazardous materials through the contracted vendor. Members of this committee included staff from Surgical Pathology, Supply Chain Management and Vanderbilt Environmental Health and Safety. It was determined that we would conduct a survey of selected medical centers and collect information from those sites about their experience with using chemical recycling versus contracting a vendor to dispose of the waste. I participated in the development of the survey questions. The data indicated that 75% of the medical centers were using a recycling system. For those medical centers which were recycling, there were 4 different manufacturers’ recycling systems which were in use. All of the medical centers are using recycling systems for 7 years or longer and all medical centers documented significant cost savings.

We presented these findings to the laboratory leadership and received approval to evaluate manufacturers’ products and obtain a request for proposal (RFP). I attended all 4 demonstrations by each of the manufacturers, participated in the development of the questions for inclusion on the RFP, and evaluated the vendors’ responses. We rated the performance of each manufacturer’s product, contacted actual users for feedback on positive and negative experiences with each product, and evaluated each vendor response to the RFP. I did provide the volumes of chemicals used in Cytology. Based on information that we provided to Finance, we were able to document that it would be cost-effective to pursue recycling used chemicals instead of disposing of them through a contracted vendor. Three committee members, including myself,
prepared a presentation with a recommendation to leadership of the Diagnostic Laboratories and VEHS.

Our committee received approval to acquire and implement a chemical recycling system. I worked with the committee members from Surgical Pathology and VEHS to write a procedure for operating the equipment and managing the “used” chemicals and the “recycle/clean” chemicals. We also coordinated a trial of the recycler which included running specimens in duplicate with original chemicals and recycled chemicals to confirm the acceptability and validity of the recycled chemicals. I led the implementation of the recycling process for the Cytology team and we have successfully reduced the supply expense to purchase chemicals by 95%. We also decrease the chemical hazardous waste disposal expense by 80%.

Process and Quality Improvement

In December 2012, I was asked by the Cytology supervisor and medical director to lead a cross functional task force to improve the result turnaround time for Pap tests. Both the supervisor and the medical director served as sponsors for this team. The team includes staff from Cytology, Molecular Infectious Diseases, Patient Access Services, and Hospital Information Technology Services (HITS). We developed a charter for the team and worked together over 18 months with meetings conducted twice a month. At the outset of this committee, we conducted a survey of our clients to determine their level of satisfaction with Pap testing service and scored overall satisfaction of 82% when combining a reading of “4” and “5”, based on a rating scale of 1 to 5 with 5 as excellent.

I led the team in performing a cause and effect analysis (a.k.a. “fishbone” diagram) so that we could identify current activities which contribute to delay test results. Based on this analysis, we determined that was crucial to address delays with patient registration of specimens.
which added up to 36 hours to the testing process. The Finance Department responsible for staffing of the Patient Access Services was extremely supportive of determining the necessary staff and shifts which would support timely registration. We collected data and were able to demonstrate that with this change, we significantly reduced the result turnaround time.

The feedback from the original client satisfaction survey also indicated that the providers were dissatisfied about calling patients return for another specimen collection because the original specimen was rejected as unsatisfactory. We collected data to determine the frequency of unsatisfactory specimens and documented reasons for rejection. This data indicated that we needed to evaluate an opportunity to pretreat the liquid-based Pap specimens in an effort to reduce obscuring artifacts. A trial evaluation was conducted so that some specimens were aliquoted and pretreated and the Pap test was run in duplicate with a regular and a pretreated specimen. The results of this evaluation indicated that we were able to reduce obscuring artifacts and lower the number of unsatisfactory specimens. This action was beneficial to patient care so that the patient would not have to return for another specimen to be collected. For the clinic practice, it was also beneficial since the office staff did not have to contact the patient and schedule them for another office visit. It was also beneficial for Cytology since it’s not possible to determine if a specimen is unacceptable until it has already been processed and reviewed; therefore we have seen and reduction in expense since we are not consuming all of the supplies for preparing specimens which will have to then be rejected.

**Professionalism and Leadership**

Based on the work of the interdisciplinary team to improve the turnaround time for Pap tests, I drafted an abstract poster presentation for submission to the national conference of the American Society for Cytotechnology. Before submitting the abstract, it was reviewed and
approved by all of the team members. The poster was accepted and I attended the poster presentation session with an opportunity to discuss with many colleagues at the conference. Approximately 150 abstracts were presented and three were selected for awards and publication in the Journal of the American Society of CytoPathology. This poster was selected for a second-place award and was published in the November – December 2013 issue.

**Education and Teaching**

Nursing services had reviewed data regarding errors with specimen collection and labeling. This data indicated that only 84% of specimens were collected and submitted without missing or incorrect information. Nursing leadership established a committee to address this problem. I was recommended by my supervisor to serve as a member of the interdisciplinary team led by Nursing services. There were eight nurse members from both adult and pediatric patient care units, four members from both adult and pediatric clinics, and three members from the Diagnostic Laboratories, of which I was one.

All members agreed that a standard training program would be essential to assure consistent communication of performance standards. To develop the training program, we referred to regulatory standards defined by The Joint Commission and the College of American Pathology. We drafted a PowerPoint presentation and submitted it for review to several nurse educators and the MLS program director. This training program was presented to nursing leadership for both the adult and pediatric hospitals and the Clinics and to the Diagnostic Laboratories leadership.

We received approval to move forward with the training program. This training program for all inpatient and Clinic locations was conducted over a six-week period. I conducted training programs with nurse managers and staff for the various OB/GYN clinics with a special emphasis
on the positive patient identification and labeling of Pap specimens and culture specimens. The attendees were awarded CE credit for the training program and I present this program to 128 staff from 32 clinics.

After the training was completed, Nursing services collected data over a three-month period to review the error rate and found that the training program had increased the number of properly identified specimens to 93%. Nursing services will continue to collect data and monitor the error rate. The Nursing leadership decided to use the PowerPoint training material and test as part of orientation training for all new nurses, patient care assistance, and medical assistants.
**DLPAL Activities List – MLS/Technologists**

In the table below, mark the number of activities (ex. 1, 2, 3) next to each activity you have completed. The minimal activity requirements for each category for each level are described below.

Include written examples or details in the bullets below the activity descriptions listed on the following pages. If something you have done is not included in the list, add it in the “Other” section.

Once you have accounted for all of your activities, delete the description/examples that do not apply to you.

**Activity Requirements:**

Below are the activity requirements for all disciplines. These are minimum expectations for each level and are used for attainment and maintenance of each level. There is no substitution of categories. Activities in bold are level four (4) activities.

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>Level III 6 required activities: 1 in each of the 4 categories, and 2 additional activities</th>
<th>Level IV 4 required activities: at least 1 in each category</th>
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<td>Technical Operations</td>
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<td>1</td>
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<tr>
<td>Process/Quality Improvement</td>
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<td>Professionalism/Leadership</td>
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<td>Education/Teaching</td>
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<td>TOTAL</td>
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Circle: Level I II III IV

Circle Discipline

- Medical Lab Scientist
- Cytotechnologist
- Histotechnologist
- Cytogenetic Technologist
TECHNICAL OPERATIONS: Demonstrated ability to perform testing and tasks with consistent, timely and accurate results, according to department policies and procedures.

____ * Manages supplies to meet budget, cost effective use of resources and fully support clinical operations
  o Examples: Worked with team to implement chemical recycling to lower supply expenses incurred to purchase chemicals and to recycle waste.

__1__ TOTAL Activities

PROCESS/QUALITY IMPROVEMENT: Activities that enhance performance in compliance, proficiency and patient/employee safety while supporting a culture of continuous improvement

____ * Leads a quality audit team
  o Examples: Led multidisciplinary team to improve the turnaround time for Pap test results.

__1__ TOTAL Activities

PROFESSIONALISM & LEADERSHIP: Process of continuing professional development beyond the formal training required for technical proficiency. Professional development improves the capabilities of others to provide safe, high quality and efficient results for patient care. Demonstrated ability to constructively engage others in an efficient and effective process to achieve common goals.

____ * Submits article for publication or has article published
  o Example: Submitted abstract for presentation at national meeting and for publication in peer-reviewed journal.

__1__ TOTAL Activities

EDUCATION AND TEACHING: Improving knowledge base of others by continuing to improve education focused on development to allow access for learning opportunities for all departments

____ * Coordinates a training session and provide training
Example: Presented a training program for positive patient identification and correctly labeling patient specimens to staff at the Center for Women’s Health.

1 TOTAL Activities

Affirmation Statement:
This statement affirms that the contents of this document are true, correct and reflect professional performance. Providing false information may result in disciplinary action.

Jane E. Jones
Employee’s Signature

Jane E. Jones
Employee’s Printed Name

Nancy Smith
Manager’s Signature

Nancy Smith
Manager’s Printed Name

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NOTE:
This section would continue with the documents that support the six activities listed above for the four domains. Some examples are included but other examples are not since it would be difficult to create them for this non-existent employee! Following is a list of documents that would be included in this portfolio:

TECHNICAL OPERATIONS:
1. Copy of summary survey findings
2. Copy of PowerPoint presentation with recommendation to implement chemical recycling
3. Copy of procedures for equipment operation and managing chemicals
4. Copy of Finance report on cost savings

PROCESS and QUALITY IMPROVEMENT:
1. Copy of summary findings of satisfaction survey both pre—and post- implementation of improvements
2. Copy of “fishbone” diagram
3. Copy of summary report for process improvements (included)

PROFESSIONALISM and LEADERSHIP:
1. Copy of poster (included)

EDUCATION and TEACHING:
1. Copy of PowerPoint lecture presentation (included) and blank test
2. Copies of reports on specimen labeling collection for both pre- and post- training