

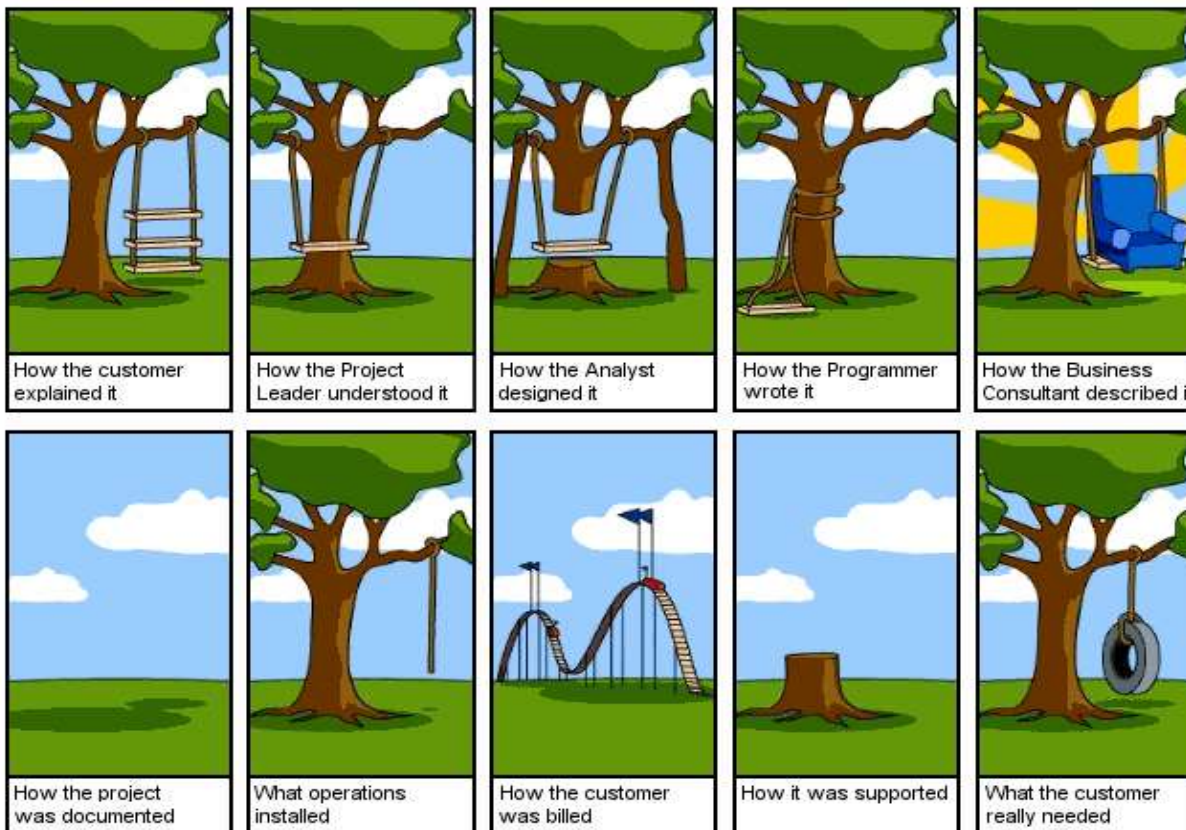
Southern Health – Santé Sud

Operation NOT Clinical Nursing Orientation



Define

It is believed that there is not a consistent approach to the delivery of Clinical Orientation to newly hired nurses to acute care. Each facility provides their own orientation which leads to inconsistencies and varied approaches to the provision of information.



Define

Problem Statement :

Currently in Southern Health – Santé Sud we have an inconsistent process for orientating nurses newly hired to acute care, in the following areas; content, attendance tracking, and utilization/accessibility of resources. This results in confusion, increased risk, errors, decreased confidence, frustration, lack of retention, lack of compliance with Regional standards/values and less than ideal patient care.

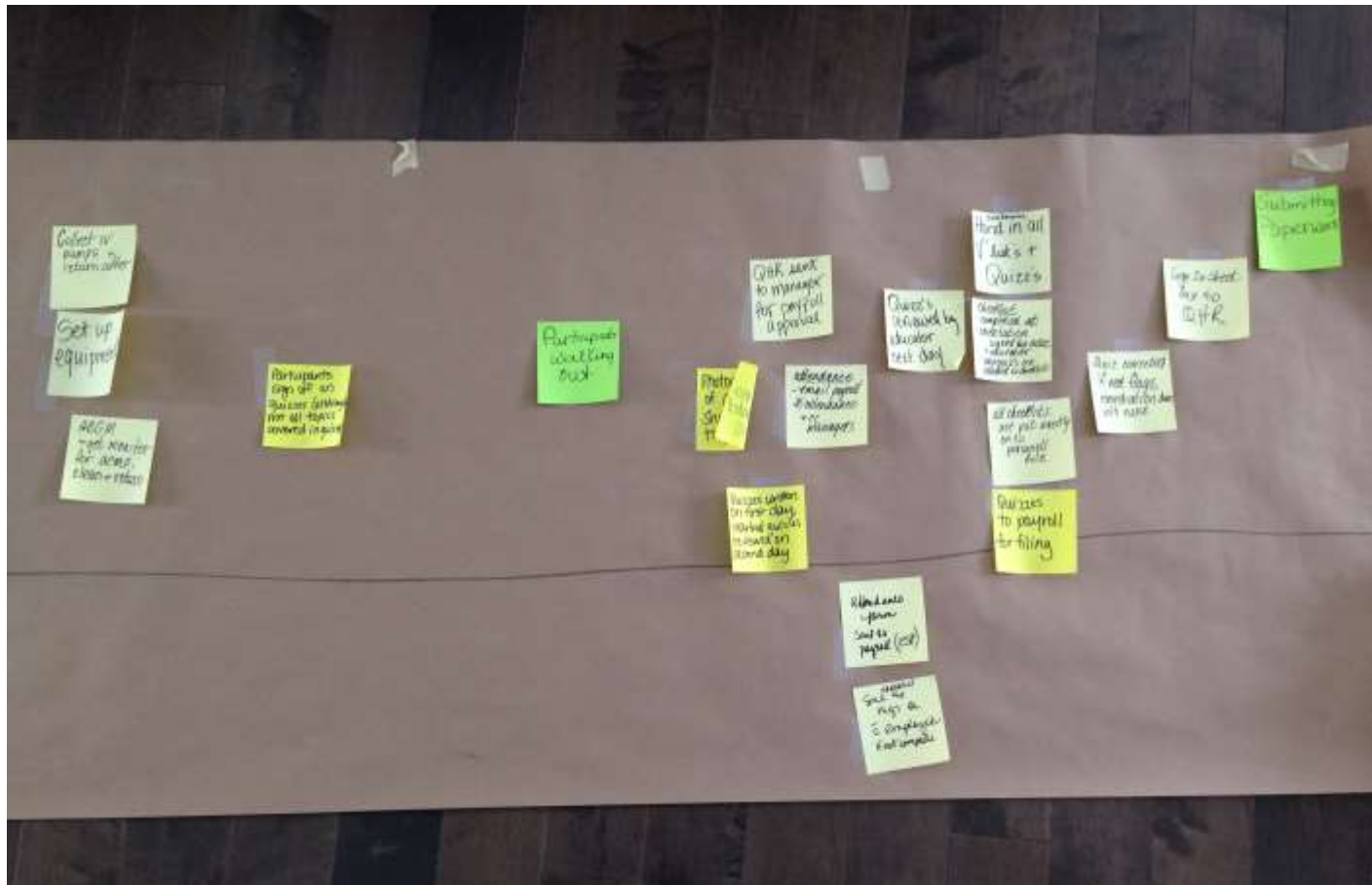
Define

Current State Process Map



Define

- Current State Process Map (Part 2)



7/24/2017

Measurement Plan

What is being measured?	How will you track the measurement?
Number of acute/transitional sites	Count the number of current including affiliate site
Number of acute/transitional sites that deliver a formal clinical orientation.	Survey
Content in current clinical orientation	Request Orientation list from each facility that has one.

Measurement Plan (cont)

Number of newly hired nurses to acute care (including transitional care) facilities (RN and LPN) and number of those new hires that remain in the region after one year of employment. From Oct 31, 2014 to Nov 1, 2015.

Contact finance department for information

Measurement Plan (cont)

Are the required organizational practices (ROP'S) and legislated requirements specific to nursing included in orientation	Obtain current list of ROP's and legislated requirements and compare with provided checklists
Timeframe from hire to time receive Clinical orientation	Finance/QHR
Staff Satisfaction related to Orientation	To determine if data exists already from Work life Survey completed. Need to contact HR for same.

7/24/2017

Analyze

Number of newly hired nurses to acute care (including transitional care) facilities and number of those new hires that remain in the region after one year of employment from October 31, 2014 to November 1, 2015 :

242 new hires to acute, 213 still with
Southern Health – Santé Sud

Analyze

Telephone/In-person Questionnaire/Survey

- The Nursing Orientation Team (NOT) is reviewing the current delivery and content of clinical orientation to newly hired nurses in Acute/Transitional Care facilities within Southern Health – Santé Sud. Clinical Orientation would include topics that all nurses in acute/transitional care would require to become familiar with to deliver safe care. Examples of content would include but not limited to Wound care, CVAD care, transfusion medicine. The following survey is to determine if clinical orientation is delivered at your site and/or methods used to deliver the content.
- Is formal clinical orientation delivered at your site? Yes No
- If No what process is used to deliver the content to newly hired nurses. Please provide any type of checklists that may be utilized indicating completion of clinical orientation content.

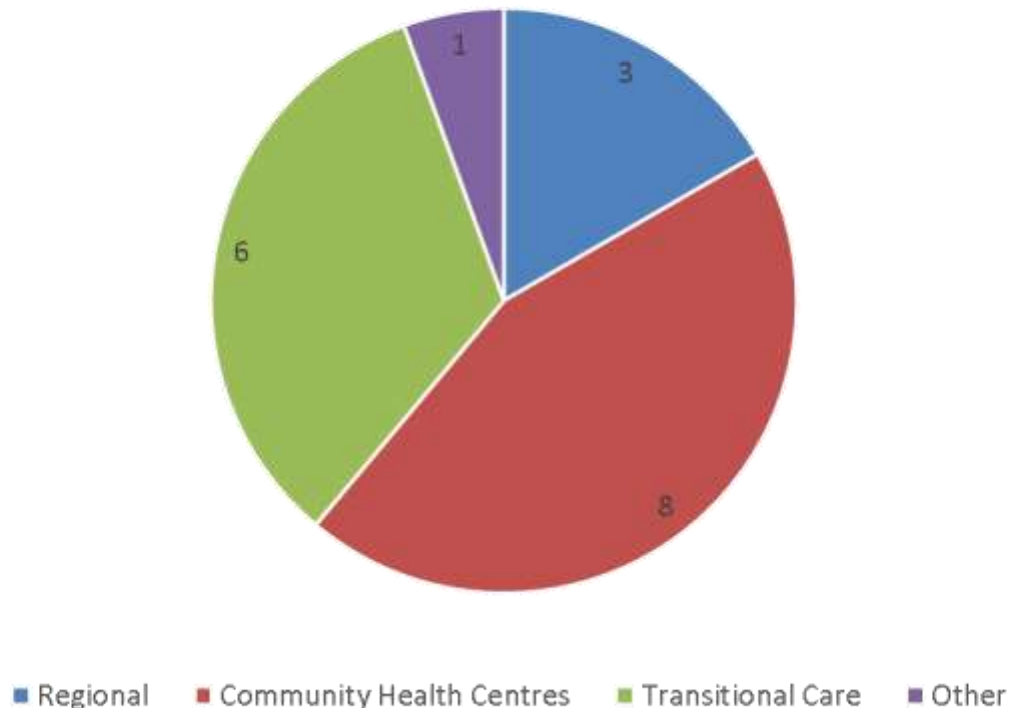
- If yes complete the following questions.
- Who delivers the Clinical Orientation content? _____
- How long is Clinical Orientation?
- Do you use clinical experts to deliver some of the content? i.e. Infection Control Practitioner? Yes No
- If yes which experts are utilized? _____
- What is the current remuneration for staff attending Clinical orientation in regards to hours of time and mileage?

- Is a checklist utilized for clinical orientation? Yes No
- If yes please provide a current copy of the checklist.
- Is a learning needs assessment completed prior to the clinical orientation? Yes No
- If yes please provide a sample of the tool used.
- Is a learning needs assessment completed post clinical orientation? Yes No
If yes, please provide a sample of the tool used.
- Is an evaluation form completed following the clinical orientation? Yes No
If Yes provide a sample of the evaluation.



Analyze

Acute Care Facilities in SH-SS

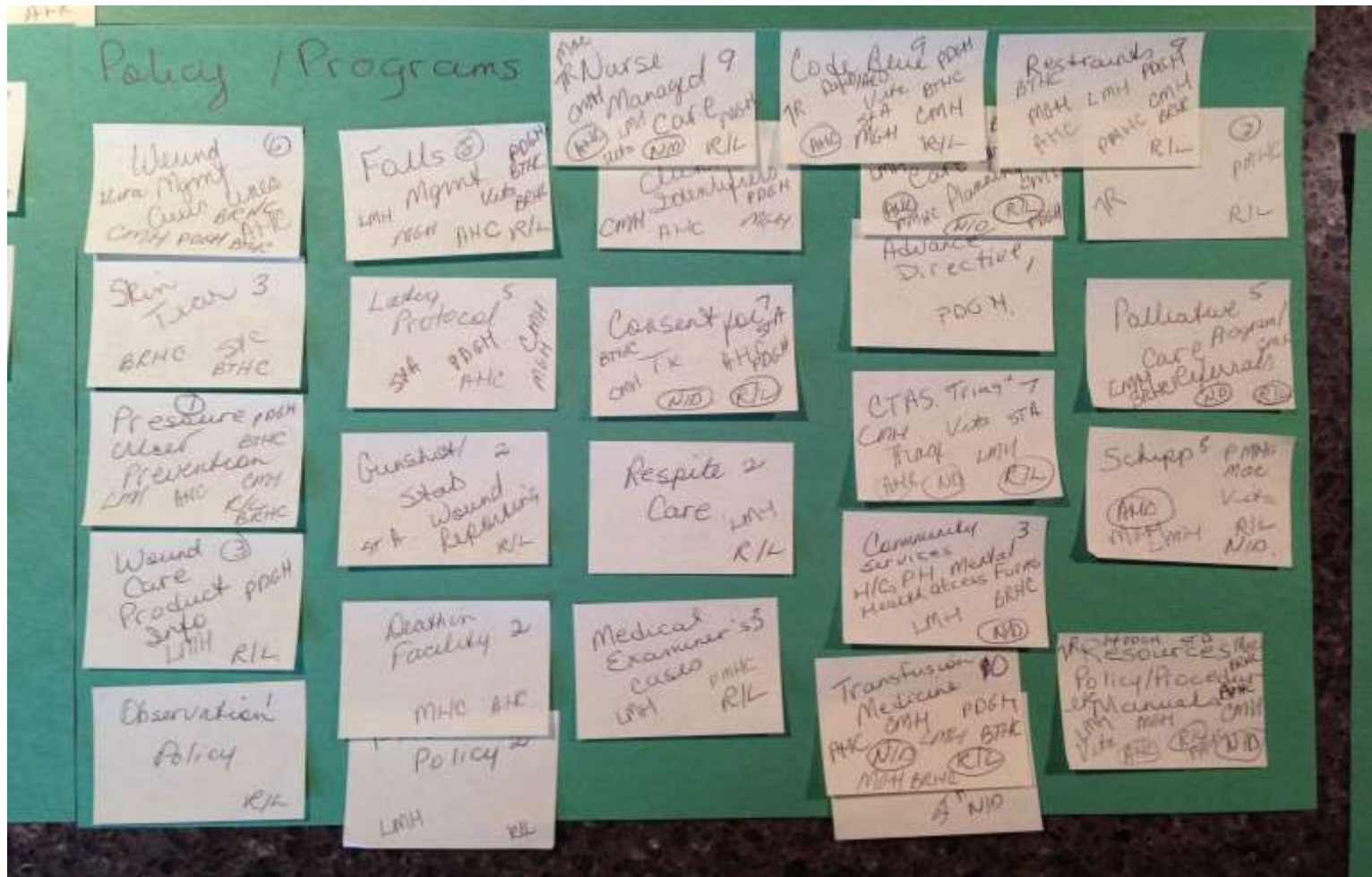


Total of 18 sites deemed Acute Care in Southern Health –Santé Sud
1 site specific to Mental Health removed as very specific focus
16 of 17 sites had Nursing Orientation Lists (94%)
1 site indicated list too outdated to include.

Analyze

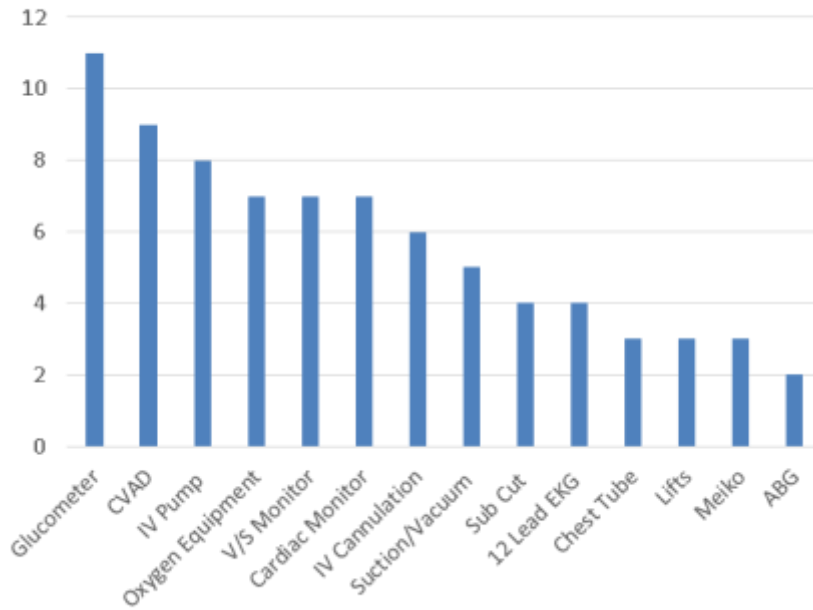
Length of Clinical Orientation Delivered at Regional Sites	
Site	Length (Hours)
Bethesda Regional Health Centre	16.5
Boundary Trails Health Centre	8.5
Portage District Health Centre	16.5

Analyze

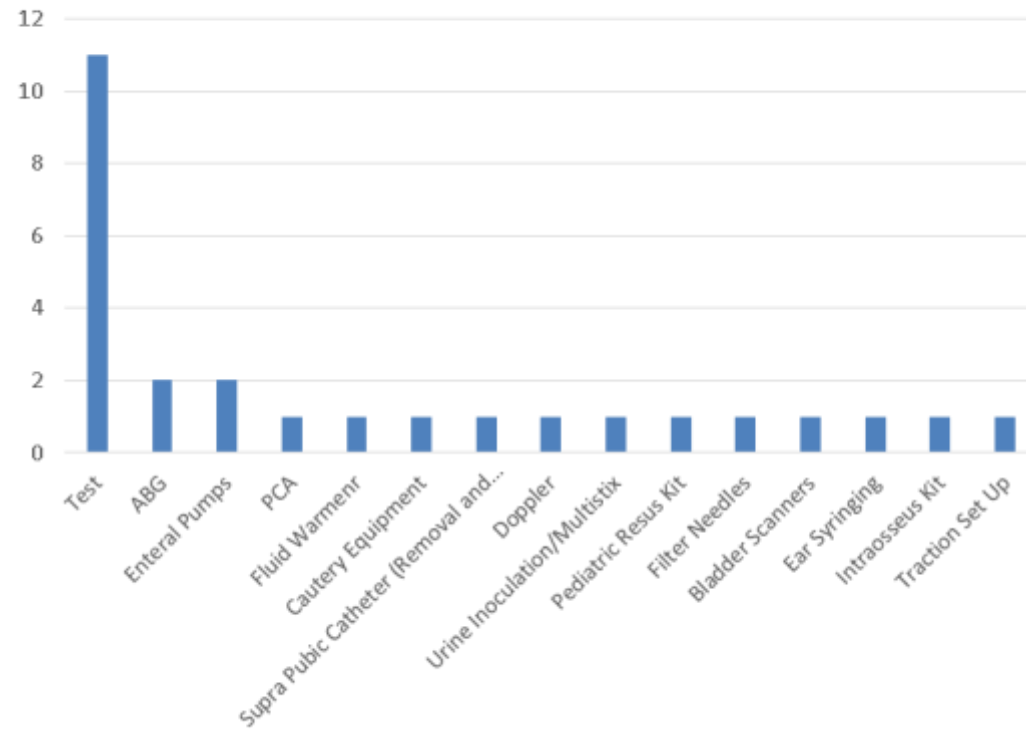


Analyze

Equipment/Procedure Orientation (1 of 2)

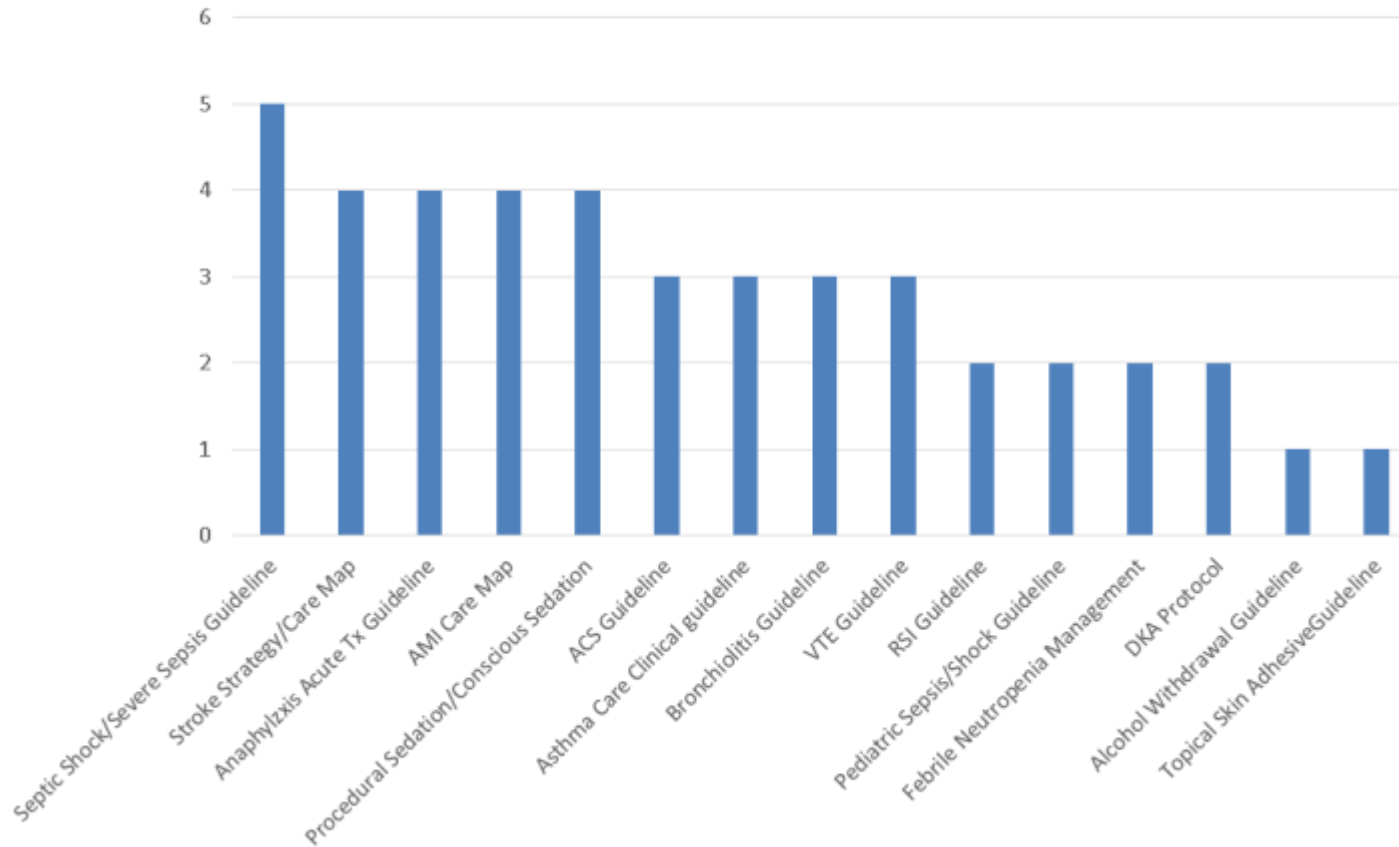


Equipment/Procedure Orientation (2 of 2)



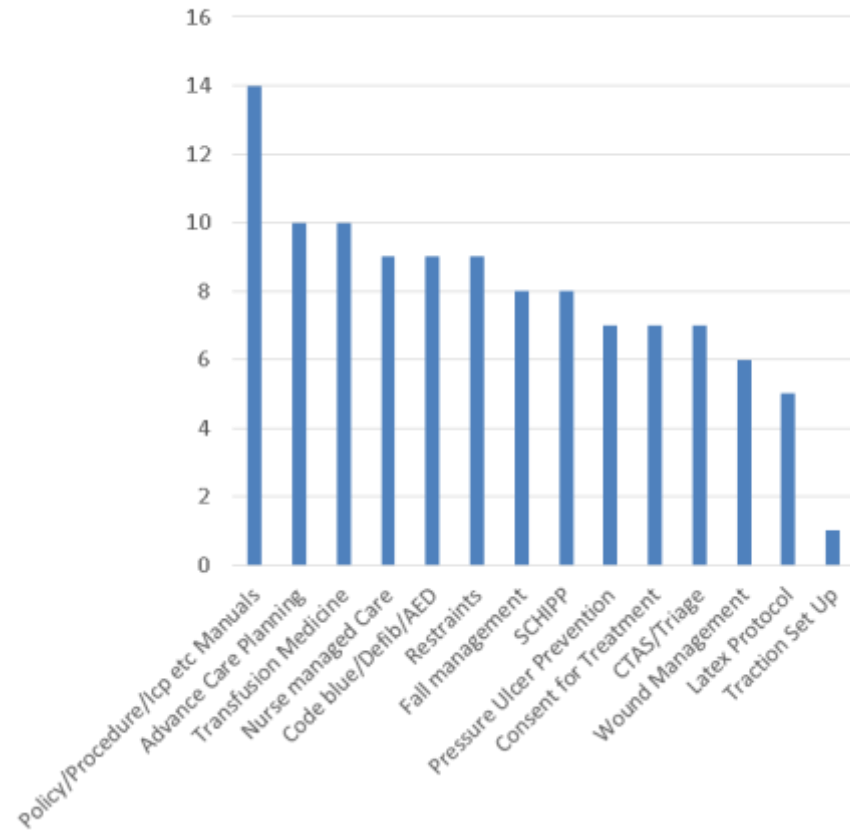
Analyze

Guidelines/Care Maps

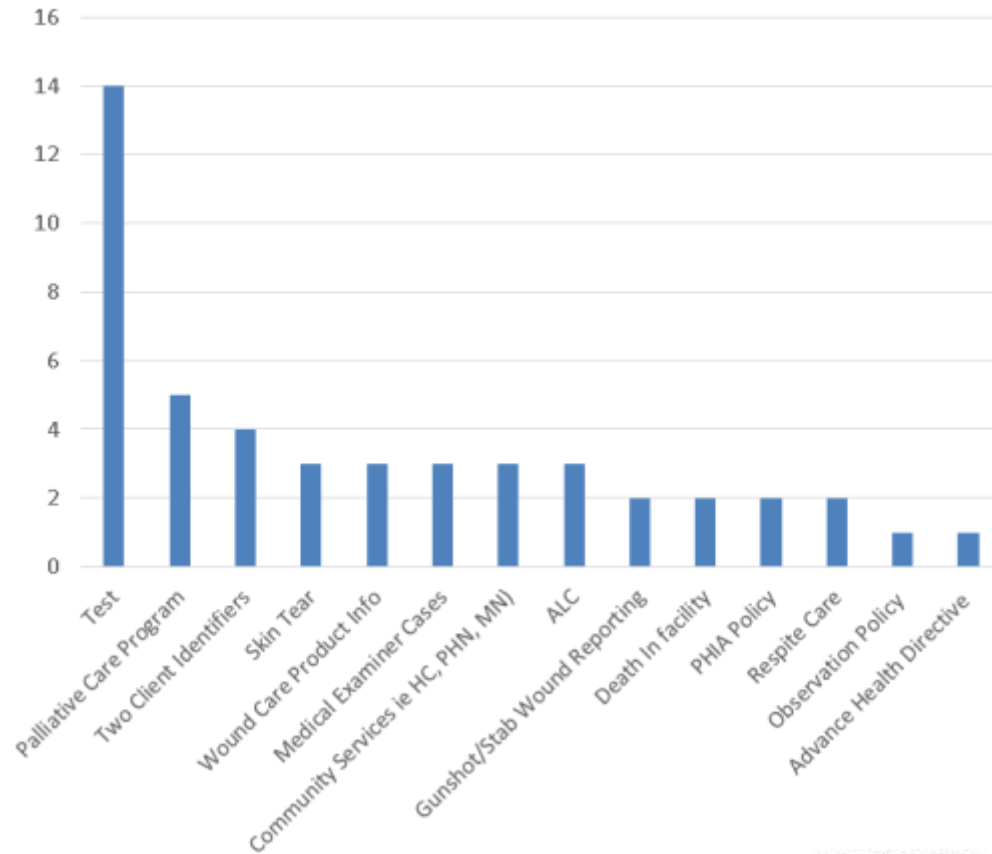


Analyze

Policy/Programs (1 of 2)

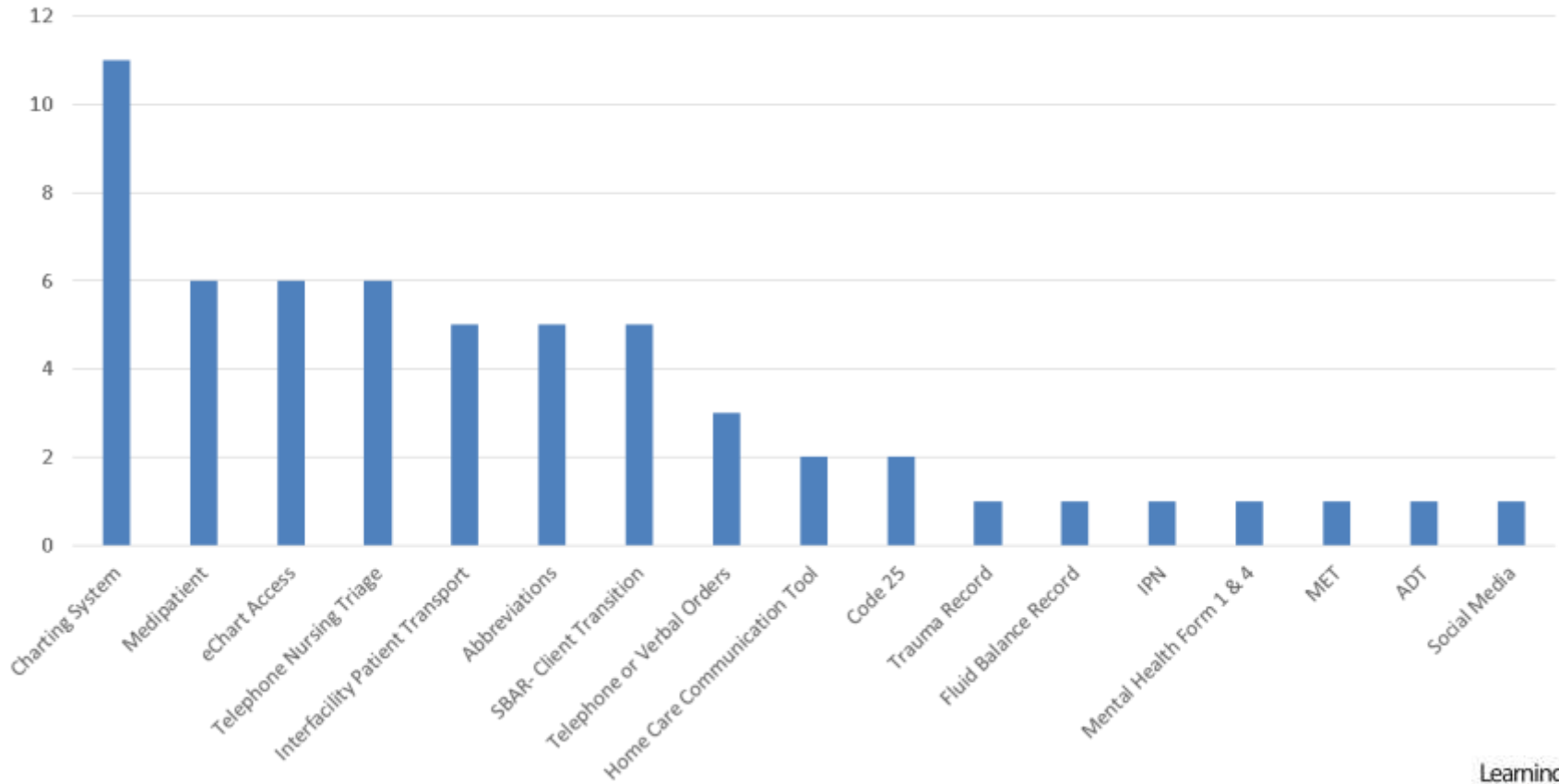


Policy/Programs (2 of 2)



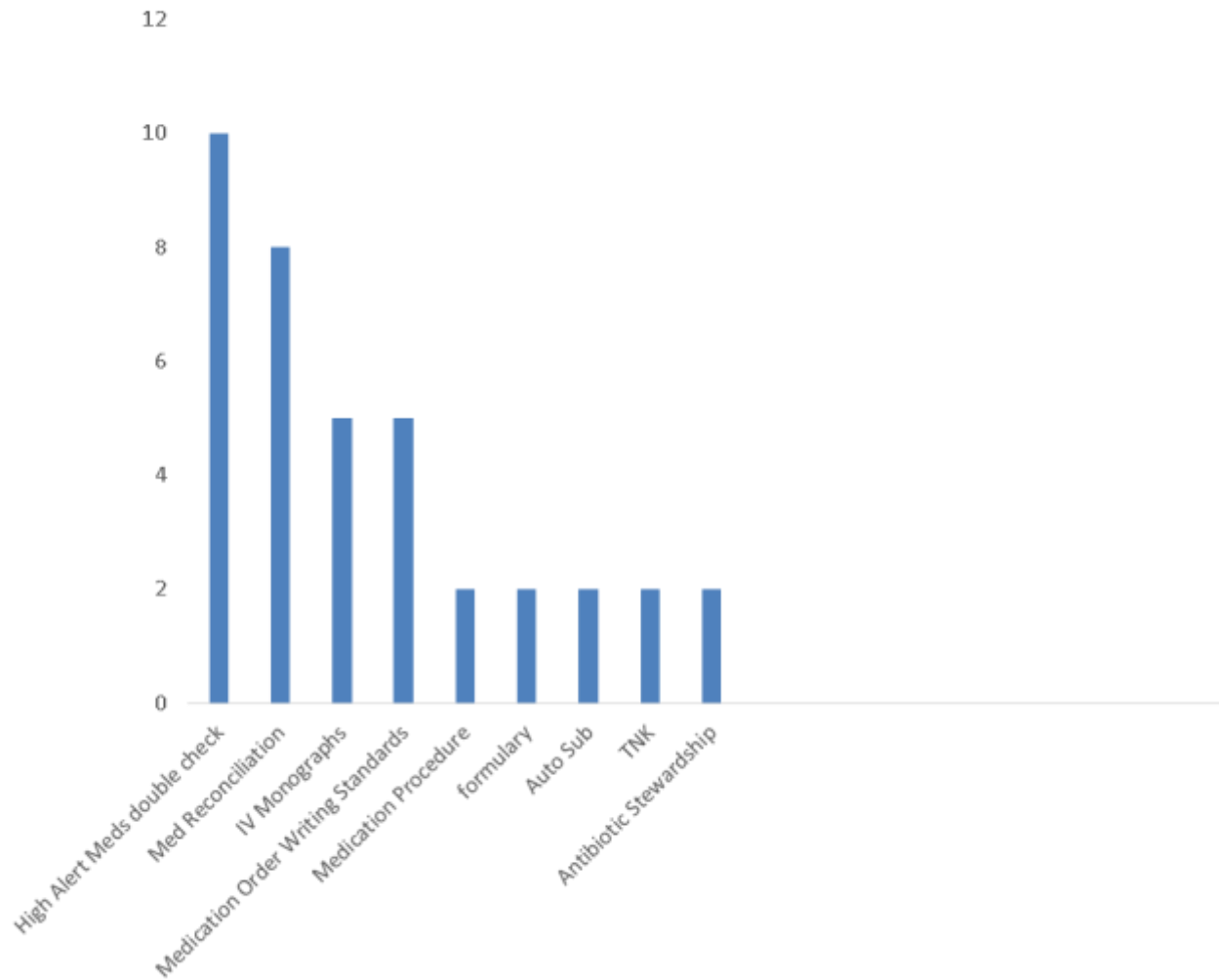
Analyze

Charting/Communication



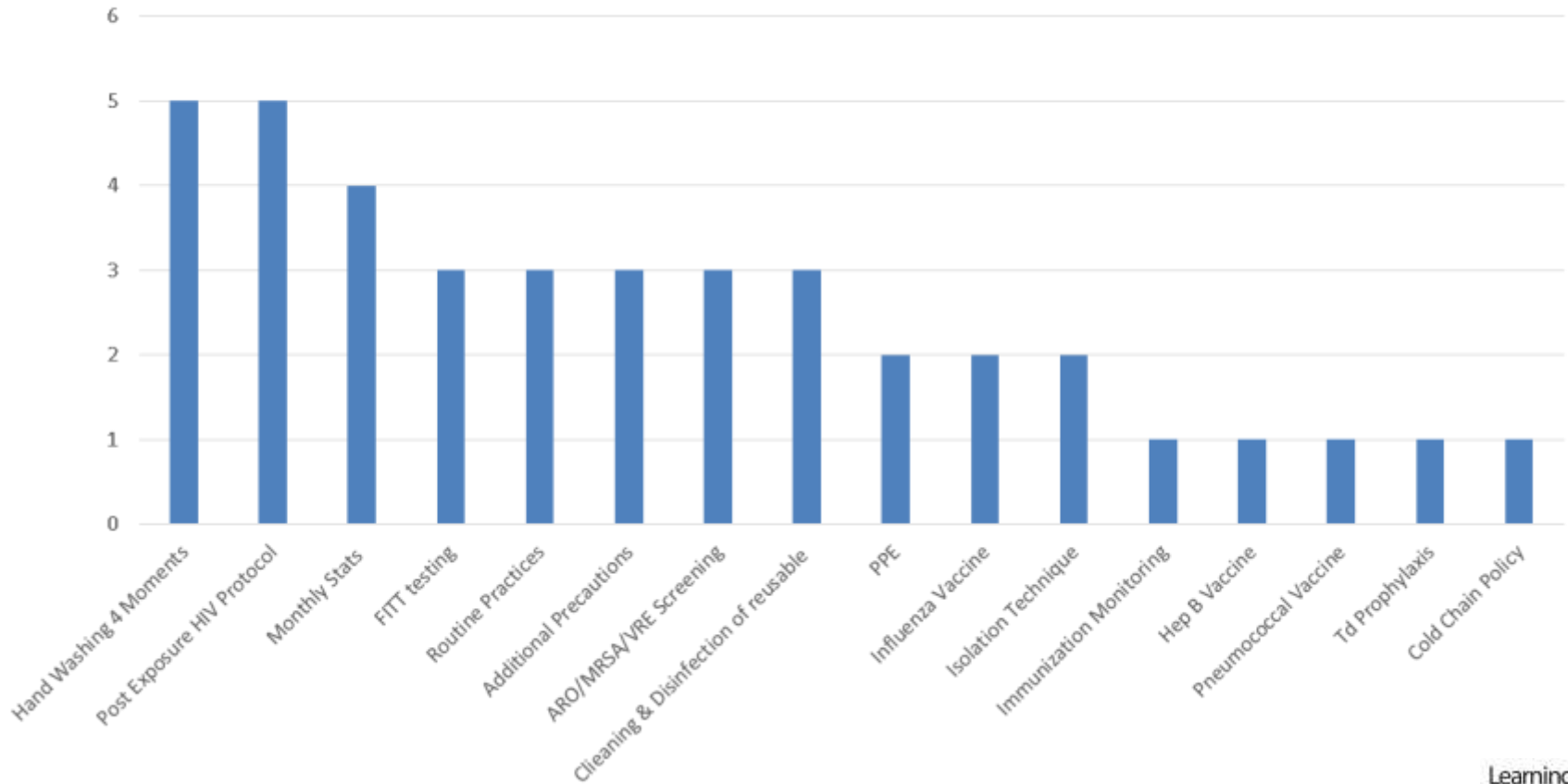
Analyze

Medication Related



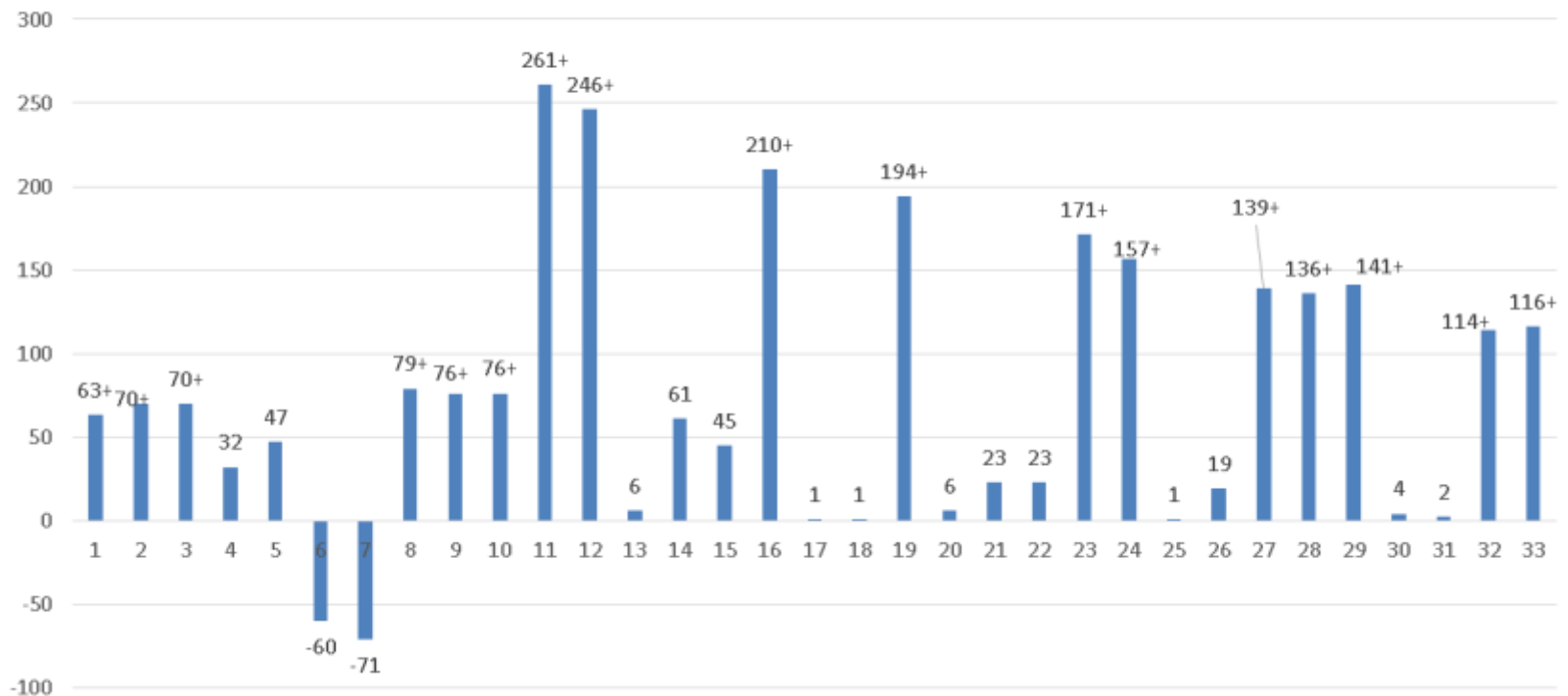
Analyze

Infection Control and Prevention



Analyze

Net Work Days to Orientation



7/24/2017

Analyze Summary

- **The total number of facilities surveyed was 18, eliminate 1 mental health facility, for a total of 17 facilities. Of those 17 facilities 16 had Nursing Orientation Checklists.**
- **120 items were identified from those lists and broken down into 8 broad categories; Policy/Programs, Medication Related, Charting/Communication, Guidelines/Care Maps, Equipment/Procedures, ICP, Surgery Related, and Misc.**
- **The number of facilities that identified the topic on their Nursing Orientation list was counted. It was found that there were inconsistencies with content between all 16 facilities.**

Analyze Summary

- **The Regional Centres offer a Clinical Nursing Orientation on a monthly basis. The content and delivery methods and allocated time is different for each of the sites, Bethesda Regional Health Centre 16.5 hours, Boundary Trails Health Centre 8.5 hours, Portage District General Hospital 16.5 hours.**
- **Number of newly hired nurses to acute care (including transitional care) facilities and number of those new hires that remain in the region after one year of employment from October 31, 2014 to November 1, 2015:**
 - **242 new hires to acute, 213 still with SH-SS**
- **It was identified that there is inconsistencies in the documentation/attendance at Clinical Orientation**

Improve

Aim statement

As of September 1, 2016 all newly hired nurses to acute/transitional care will attend 2 days of Regional Clinical Orientation (RCO) offered at a Regional site. Each Regional site will deliver RCO monthly.

All newly hired nurses to acute care including transitional sites to have received RCO within 1 month of hire.

Improve

PDSA 1

A Standard 2 day Regional Clinical Orientation (RCO) will be provided for all nurses hired to acute care including transitional care. Regional Clinical Orientation will be offered monthly at each of the 3 regional sites following the Regional orientation schedule. Facilities/departments will need to deliver orientation to the newly hired nurse that is specific to their area of work. This will be completed within 1 month of hire.

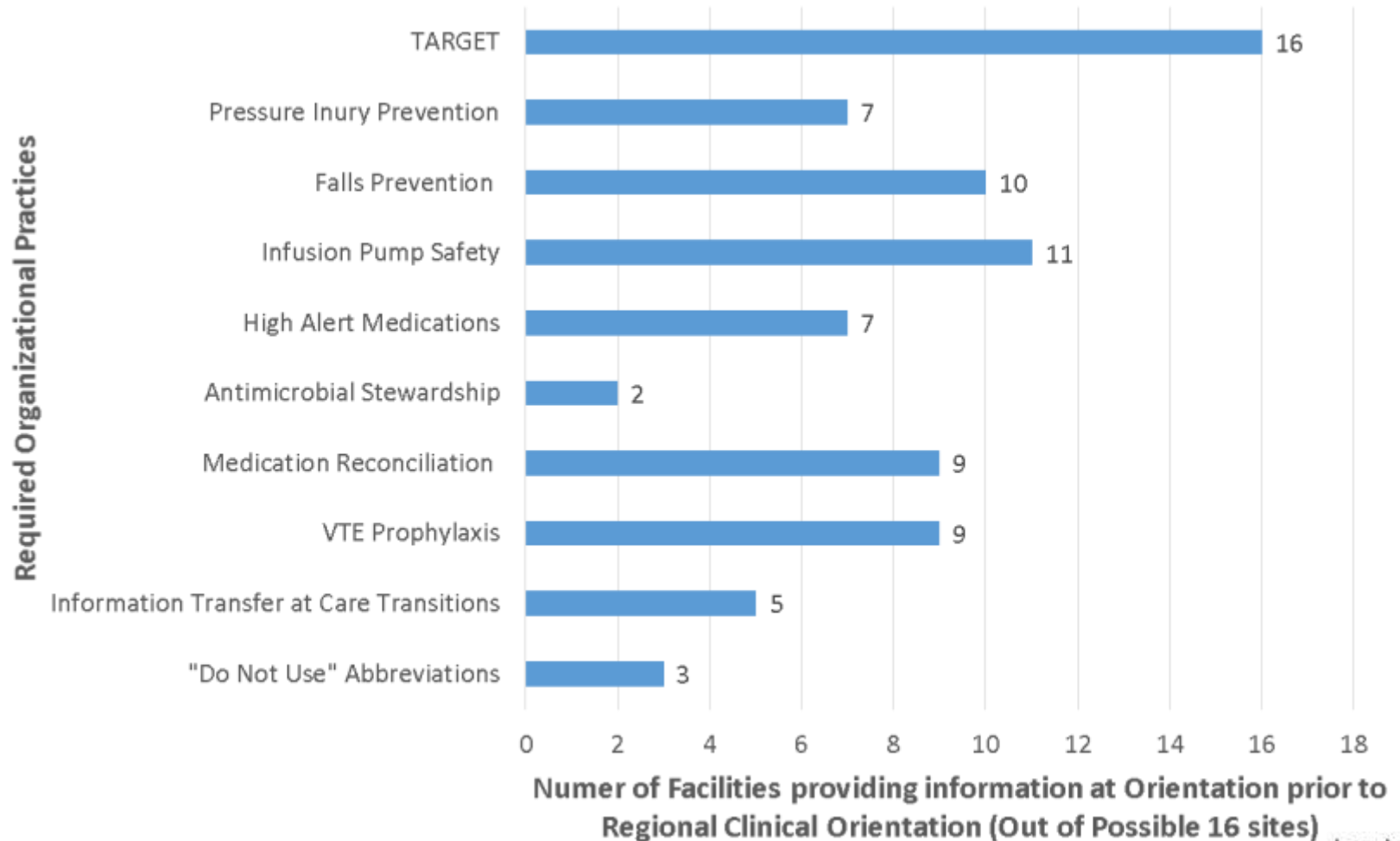
First Pilot delivered April 25 and 26, 2016, Second date to run May 30 & 31

Upcoming dates June 8 & 9, June 13 & 14, June 16 & 17, July 6 & 7, July 11 & 12, July 14 & 15, Aug 22 & 23

Improve

Actions	Due Date	Completed Date
Review all current clinical orientation checklists content from acute care and transitional care sites.	Dec 16/15	Dec 16/15
Develop standardized clinical orientation checklist utilizing ROP's and content of current sites list.	Dec 17/15	Dec 17/15
Review list to ensure that content can be covered in 2 days	Jan 7/16	Jan 7/16
Develop standard content material for each section on the orientation list.	Feb 23/16	Feb 23/16
Discuss with Executive Sponsor plan to communicate to Leadership need for staff to be registered for RCO through memo	Mar 10/16	Mar 10/16
Communicate to nearby facilities about upcoming RCO	April 6/16	April 6/16
Organize all content into binder for presenter, and participants, handouts	April 8/16	April 18/16
Evaluation form to be developed for 2 Day RCO	April 8/16	April 15/16
Dates for BRHC and PDGH to be determined	April 18/16	May 16/16
Initial Pilot RCO to be completed at BTHC	April 25 & 26/16	April 25 & 26/16
Review evaluations of Pilot Projects	May 19/16	May 16/16
Make changes as based on evaluations and outcome of content delivery	May 26/16	May 26/16

Improve



Improve

PDSA 2

*Registration for Regional Clinical Orientation will follow the model of Regional Orientation thereby will be managed centrally. The list of attendees and contact information will be shared with the Clinical Educators prior to days of RCO
August, 2016*

Improve

PDSA 3

There will be consistent documentation of attendance to RCO in QHR to clearly indicate where time from hire to time of receiving RCO is reflected accurately. Goal is for all newly hired nurses to acute care including transitional sites to have received RCO within 1 month of hire.

September, 2016

Improve

PDSA 4

There will be a process established that will ensure that the content of the Regional Clinical Orientation is reviewed on an annual basis to ensure that information is current and that any additional ROP's specific to acute care nursing are included in the content.

September, 2016

Improve

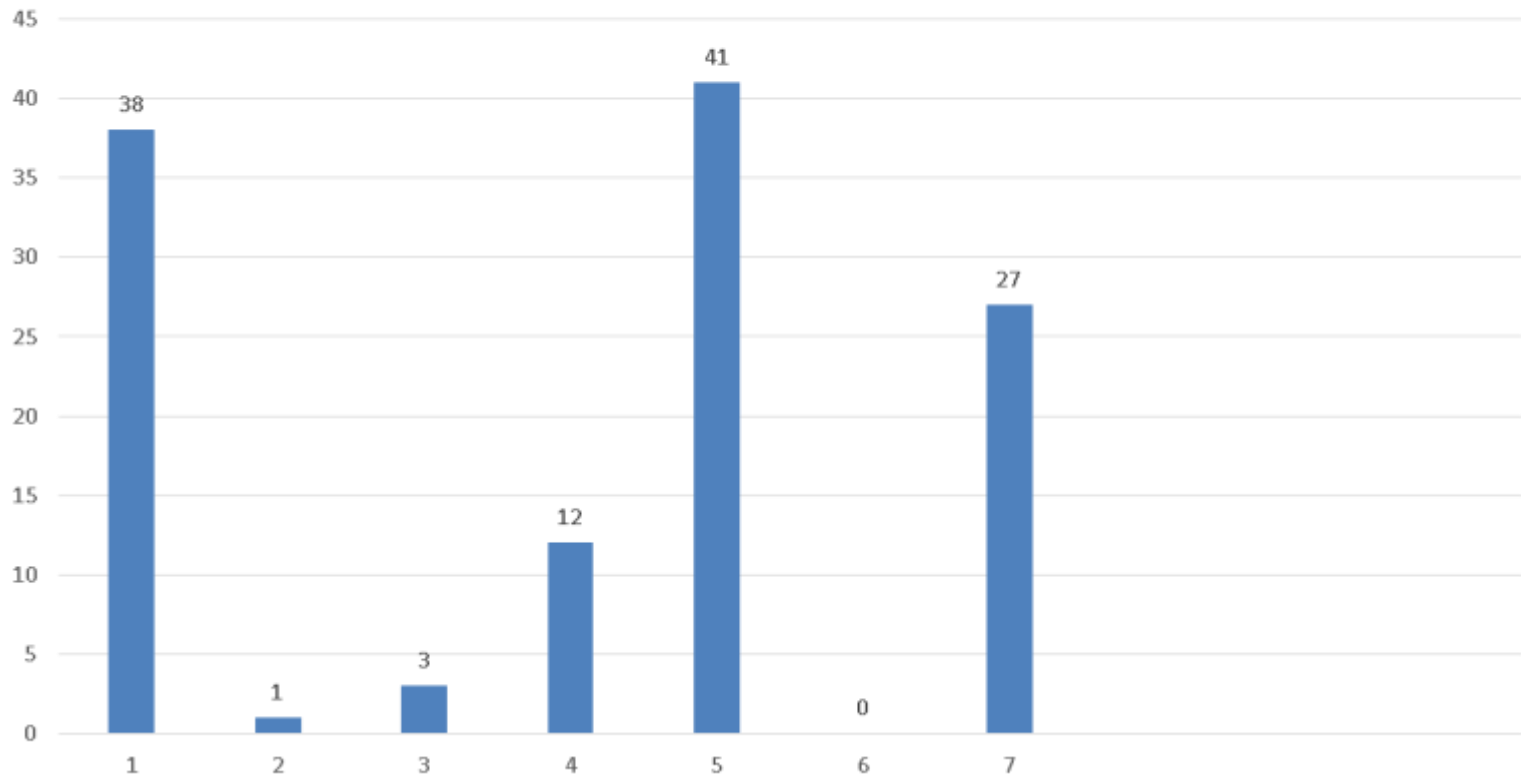
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All newly hired nurses to acute care including transitional sites to have received RCO within 1 month of hire.

Improve

Network days to Clinical Orientation
(Pilot Project)



Improve

Plan for follow up survey with managers

Improve Day 1 Feedback

- **What did you find most useful?**
 - Palliative Care Information (x 2).
 - Wound and Skin Information (x 2).
 - Pharmaceutical Information.
 - Braden Scale Protocol, Practice Case Scenario and necessary forms after Braden (x2).
 - Good review of SBAR.
 - Going through patient charting (BPMH).
 - Examples with worksheet practice for wound care.
 - Knowing presence of specific policies.
 - Good material, pertinent, presenters, professional
 - Handouts good
- **What did you find was not useful?**
 - Consent – Reviewed ++ in school, good review but a little long.
 - Repeat of skin structure not necessary

Improve Day 1 Feedback

- **Suggestions for improvement:**

- Infection control – More visuals – PowerPoint – show abscess picture and test which additional precaution needed as forms are talked about show picture on PPT.
- Give all PowerPoint out – we can follow and add notes and take home.
- Less on anatomy and physiology of skin and its layers, just most basic functions will do. Plus it's been talked twice, skin tear and pressure.
- Have wound care products available at participants table if even for just viewing/looking
- If it can be done through telehealth.

Improve Day 2 Feedback

- **What did you find most useful?**
 - Hands on activity.
 - CVAD (x2)
 - Chest tubes
 - IV therapy
 - Code Blue/MET
 - Pump hands on demo
 - I found each section to be very helpful today, especially learning from the respiratory therapist and the CVAD & PICC information.

Improve Day 2 Feedback

- **Suggestions for improvement:**
 - Nothing to follow with, have PowerPoint printed out.
 - Have tube feed pump to play with.
 - Add occurrence reports
 - Try including SCHIPP training during orientation
 - Topics on infusion pumps, enteral pumps and glucometers

Control

What controls have we put in place to ensure that performance does not lapse?

X Fundamental Change	Removed the old system. Content developed and standardized. New to all. For smaller sites, change to attend a clinical orientation instructed by Clinical Educator
X Error Proofing	Flag in QHR to indicate when past 1 month of hire
X Visual Control	Script/PowerPoint with the images and content to be delivered to follow. Cart with supplies needed to deliver content.
X Standard Work	Standard list of material and content delivered at all 3 sites. All staff receive same information.
X Training	Training for educators to deliver content and Training provided to all newly hired nurses to acute care
X Continue to Measure	Will track time frame from point of hire to attendance at Regional Clinical Orientation on quarterly basis to determine if meeting target.
<input type="checkbox"/> Audit	
X Checklist	Checklist with RCO content covered utilized, completed and to be maintained on new hires personnel record. Checklist utilized for what specific information to be covered when returning to site/unit.
X Policy & Procedure	Policy to be developed to indicate attendance at RCO a requirement within 1 month of hire
<input type="checkbox"/> Written Sign	

Lessons Learned

What were some of the key things we learned about quality improvement while doing this project?

- The delivery of consistent message is quality
- The differences between every site and number of policies out there. Need for consistent
- Each of the facilities have differences that need to be acknowledged
- Importance of data collection
- Wide variety of spin offs and impacts on different people and areas
- Many staff work in different sites and importance of same message delivered
- Content is ever changing – review
- Our work is never done

Next Steps

What next QI project or where is the project spreading?

1. Develop agenda for Regional Clinical Orientation that Day 1 would be applicable to all nurses hired to Southern Health – Santé Sud with acute, Long Term Care or community
2. To merge previous Central and South Eastman policies and procedures to Southern Health – Santé Sud with consideration of being consistent between acute care and long term care.
3. To follow up with financial analyst request in determining number of required orientation days to determine budget for new nurses hired to region.

The Team!

