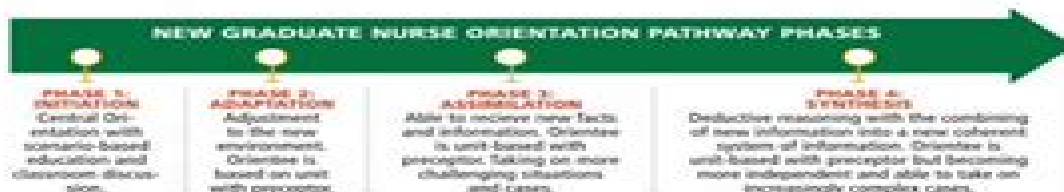




New Nurse Orientation Pathway

New Graduate Nurse Orientation Pathway Phases of Orientation and Role Responsibilities

In each phase of orientation, eight categories of learning opportunities are followed to progress the new graduate nurse from initiation to adaptation to assimilation then finally to independence in the synthesis phase. Learning opportunities support the three domains of learning: cognitive (knowledge), technical (skill) or affective (behavior).



THE 8 CATEGORIES OF LEARNING OPPORTUNITIES AND ACTIVITIES


- 1. ASSESSMENT/EVALUATION**
 - a. Help orientee develop proficient clinical and communication skills by experiences on unit
 - b. Situational awareness
- 2. EMERGENCY**
 - a. Provide learning opportunities that prepare the orientee to act in the face of an emergency, situational awareness, emergency equipment in room preparation, crash cart, disaster preparedness information
- 3. EQUIPMENT/DEVICES**
 - a. All equipment or devices that are used on a daily basis must be incorporated
 - b. Equipment/skills checklist verification with verbalization of rationale and/or assessment of patient
 - c. State the resources to be used if they are required to use a piece of unfamiliar equipment
 - d. Never proceed in the face of uncertainty. Find another staff member more familiar
 - e. Ask clarifying questions
- 4. SKILLS AND INTERVENTIONS**
 - a. ROPH procedures in Policy Manager link to Mosby Online Nursing Skills
 - b. Skills and interventions may be pre-assigned learning opportunities based on the unit or "just-in-time" learning opportunities as the new nurse is experiencing a skill or intervention for the first time
- 5. MEDICATIONS**
 - a. Provide learning opportunities that support safety behaviors of medication administration
 - b. Use Mosby Clinical Nursing Skills and Techniques as learning opportunities to validate medication administration such as subcutaneous injections, IM injection skills
 - c. Calculations and use of the seven "rights" of medication administration
 - d. Focus on potential/adverse effect on body system
 - e. What are the most frequently administered medications on the unit?
- 6. DOCUMENTATION AND EDUCATION**
 - a. Learning opportunities may consist of information from notes accessible in the EMR, teaching a family and documenting
 - b. All care must be documented: admission assessment, body system assessment, skills and interventions, etc., and verification by preceptor considered for each phase
 - c. Focus on PPOC and patient education and behaviors for sustainability of documentation
- 7. PSYCHOSOCIAL**
 - a. Incorporate age-specific and cultural considerations in every patient experience and learning opportunity
 - b. For example, for age specific: when using equipment — deciding what size oxygen mask to choose for your patient
 - c. What behaviors would you expect from a teenager vs. an adult or geriatric patient for this procedure?
 - d. What nursing intervention would you make based on age?
 - e. What are cultural diversity considerations you have made in caring for your patient and family today?
- 8. OTHER RESOURCES/POLICIES**
 - a. What are policies that support some of the expected behaviors, such as accountability for nursing care, assessment standards, high risk medications, etc.?
 - b. What are the resources — Drug Formulary, intranet sites and accessing both internal and external experts?
- 9. ADDED/INDIVIDUALIZED LEARNING NEEDS**

New Graduate Nurse Orientation Pathway

Performance Indicator	ORIENTEE/EMPLOYEE	PRECEPTOR	EDUCATION QUALITY COORDINATOR	MANAGER
RELATIONSHIP AND CARE	Addresses clinical skills and competencies at the time of assignment to another unit and points concern if not competent to perform an assigned skill or task	Communicates on a regular basis with management to evaluate progress of orientee	Assures standardization and minimizes duplication with variations; learning opportunities will be assigned to allow all unit/departments access	Creates an environment that promotes timely competency assessment and ongoing growth and development
STANDARD SKILL-BASED	Participates in individual competency development	Uses Phases of Selection Tool for orienting staff	Participates in the assessment of competency in collaboration with the assigned preceptor or other designers, when appropriate	Establishes a process for ongoing validation of unit specific competencies for all unit staff prior to the assignment of a patient
TEAM OR UNIT	Maintains record of competency completion	Uses and documents validation methodology/source of evaluation for verifying competencies	Provides expertise in identifying learning opportunities and the appropriate verification source of evaluation of the competencies	Assures the competence of the staff on the unit
CLINICAL TEACHING	Participates in evaluation of the competency process	Seeks to critically evaluate orientee progression through the phases of orientation to assess progress from initiation to synthesis	In conjunction with the clinical manager and director, the educator for each clinical department will develop the orientation program based on the four phase's documents, utilizing the first care competency statements as the basis for assessment of the new staff nurse's progress through the orientation process	Monitors and evaluates employee progress and performance on an ongoing basis
LEARNING	Completes indicated learning opportunities by the established deadlines for that job class. If successful completion has not been achieved, a Performance Improvement Plan is initiated.	Proactively identifies patient assignments to avoid excessive in meeting core competencies	Works with the Shared Governance structure to provide nonperiodic learning opportunities that are standardized across ROPH	Implements a Performance Improvement Plan for staff not meeting the established goals
			Maintains a record keeping and report system that documents educational activities in compliance with department, organizational and external agency requirements	

Nursing Orientation Manual

**Repatriation General Hospital
(Hollywood, W.A.),Australia.
Repatriation Department**



Nursing Orientation Manual:

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ORIENTATION MANUAL FOR DIVISION OF NURSING. Prince Edward Island. Dept. of Health and Wellness,
Onboarding for Nursing Education Wendy L. Leiter, 2012 Colleges and universities are continually looking for quality nurse educators to instruct nursing students Retention of nurses including nursing instructors is in jeopardy all over the world A high quality onboarding process prior during and after the orientation process has been an asset within many aspects of the hiring population The purpose of this project was to help new nursing educators obtain a specific orientation period with onboarding tools to enhance a positive experience that will lead into long retention period for an employer leaf 3
A Nursing Manager's Orientation Manual Ellen M. Troughton, 1993 A Real-World Guide to Surviving Nursing Orientation Bha Bsn Rn Edmondson, Rachel Edmondson, 2018-02-15 You've passed your NCELX survived your first interview and just landed your first nursing job Now what This new grad RN survival guide was written to help you navigate your first nursing orientation From what to expect on your first day to surviving your first code blue WWFD aims to help you navigate the reality shock as you transition from nursing student to bedside RN Among other things you will find advice on how to give an effective hand off report cluster your care efficiently complete up to five patient assessments in less than three hours and learn how to page a physician like a BOSS Using humor and practical real world nursing experience this short and sweet book aims to take you from new nurse to Florence Nightingale status in less than three months **Documentation Manual** Pekin Hospital (Pekin, Ill.), 1991 *Orientation Manual for Nursing Home Facilities* Robert W. Haacker, 1992-12-01 2010
GAMC Nursing Orientation Manual, 2010 *Fachenglisch für Pflegekräfte* Edith Kellnhauser, 2003 Vorbereitung auf einen

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Competency in Home Care Terasa Astarita, Gayle Materna, Cynthia Blevins, 1998 Competency in Home Care doesn't just describe the standards of practice it gives you the resources to meet them it provides practical authoritative guidance for creating effective staff development plans designing orientation programs that get caregivers up to speed immediately establishing performance criteria for every position in the home care continuum and ensuring ongoing competency Plus you get powerful insights into the growth of modern home care The role of competency programs in staff recruitment and retention and how to get it done in any organization regardless of background makeup or affiliation

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