



Competency Based Orientation 2015

Maternal-Child Program
Postpartum Unit

Brant Community Healthcare System



Employee's Name: _____

Meeting Flow Sheet
Employee – Preceptor – Nurse Clinician – Group Leader

Name of Employee: _____

Name of Preceptor: _____

Unit: _____

Date of Hospital Orientation: _____

Date of Unit Orientation Start: _____

Date of Initial Meeting with Nurse Clinician & Preceptor: _____

☐ New Employee
☐ Cross Training

Touch Base Meeting – approx. half way through orientation

Date of Meeting:

What's Working Well:

Improvement Opportunities:

Focus of Remaining Orientation:

Comments:

Sign Off

Group Leader: _____ Employee: _____

Nurse Clinician: _____ Preceptor: _____

Final Meeting (approx. 3 shifts prior to end of orientation)

Date of Meeting:

Have all competencies been met?

- ☐ Yes
- ☐ No

If no, what competencies are outstanding?

Will these be completed by end of orientation?

- ☐ Yes
- ☐ No

Area's of Strength:

Area's for Further Development:

Comments:

Signing this declares that _____ has completed her orientation and met the required competencies.

Date: _____

New Employee: _____

Preceptor: _____

Nurse Clinician: _____

Group Leader: _____

Maternal-Child Orientation Process

- 1) Employee is hired to mat-child program and email is sent to Group Leader, Nurse Clinician & TL's about new staff hire
- 2) Nurse clinician emails new staff member welcoming them to the program and outlining requirements

Postpartum

Required:

- NRP
- Breastfeeding Certification

Recommended:

- Maternal-Newborn Certificate Program

Labour & Delivery

Required:

- NRP
- Fetal Health Surveillance (accredited program by AWHON)
- Breastfeeding Certification

Recommended:

- Perinatal High-Risk Obstetrics Certificate Program

Special Care Nursery

Required:

- NRP
- Breastfeeding Certification

Recommended:

- Neonatal Certificate Program
- STABLE
- ACORN

****NRP & Fetal Health Surveillance must be completed before end of orientation****

Breastfeeding Certificate must be in progress or completed prior to end of orientation

- 3) Nurse Clinician arranges preceptor and works with new employee and ward clerk to schedule orientation shifts
- 4) Nurse Clinician provides new employee with Competency Based Orientation Manual in addition to applicable self-directed learning packages:
 - Epidural Infusions
 - General Anaesthetic (GA)
 - Remifentanyl
 - Obstetrical Instrument Review
 - Continuous Feeding for neonates

- TPN for neonates
- IV insertion

Unit Orientation of Postpartum & Labour and Delivery

- New grads or new staff to maternal-child will receive a minimum of 12 shifts (150hrs) of orientation on postpartum and 16 shifts (190hrs) in L&D
- Staff with maternal-child experience but new to the organization will get a minimum of 6 shifts (75hrs) on postpartum and a minimum of 8 shifts (96hrs) on L&D with the option of additional caesarean section training
- Staff that are cross-training from L&D to postpartum will receive a minimum of 4 shifts
- Staff that are cross-training from postpartum to L&D will receive a minimum of 12 shifts (150hrs)

Unit Specific Orientation of Postpartum & Special Care Nursery (SCN):

- New grads or new staff to maternal-child will receive a minimum of 12 shifts (150hrs) of orientation on postpartum and 16 shifts (190hrs) in SCN
- Staff with maternal-child experience but new to the organization will get a minimum of 6 shifts (75hrs) on postpartum and a minimum of 8 shifts (96hrs) in SCN with the option of additional training completed at McMaster Children's Hospital- Level 3 NICU
- Staff that are cross-training from SCN to postpartum will receive a minimum of 4 shifts
- Staff that are cross-training from postpartum to SCN will receive a minimum of 12 shifts (150hrs) with the option of additional training completed at McMaster Children's Hospital- Level 3 NICU

Employee to Sign Off as Completed:

Required Certifications	YES (date completed)	NO	Date to be completed...
NRP			
Breast Feeding Course			

Recommended Certifications (All areas)	YES (date completed)	NO	Date to be completed...
Maternal-Newborn Nursing Certificate			
Fetal Monitoring Course (AWOHN)			
Peri-Operative Nursing Role for Caesarean Section (Mohawk College)			
Neonatal Certificate			
STABLE			
BCHS Perinatal Orientation Modules 1-14			
BCHS Fetal Monitoring Module			
BCHS Caesarean Section Orientation Modules			

Postpartum Orientation Checklist

#	Task	Employee Sign Off	Preceptor Sign Off
1)	Tour of Department with Preceptor <ul style="list-style-type: none"> <input type="checkbox"/> Staff washrooms <input type="checkbox"/> Purse storage <input type="checkbox"/> Nurses lounge and refrigerators <input type="checkbox"/> Ward, semi and private patient rooms <input type="checkbox"/> Patient shower <input type="checkbox"/> Linen cart <input type="checkbox"/> Clean & dirty utility and equipment storage room <input type="checkbox"/> Care by parent room 		
2)	Complete scavenger hunt		
3)	Log onto Meditech		
4)	Log onto Outlook e-mail		
5)	Log onto Halogen, Medworxx		
6)	Access E-log and BORN		
7)	Review paper chart of OB and Gyne patient		
9)	Revidew a “fake” admission with preceptor of OB and Gyne patient (including review of admission and discharge paperwork)		
11)	Review use of Colleague Baxter IV		
13)	Locate emergency code blue airway kit		
14)	Review PPH emergency kit & policy and procedure		

Employee and preceptor will discuss common **Obstetrical Emergencies** and review standards of care accordingly

Review Hemorrhage kit and Eclampsia kit; as well as location of medications

Skill	Date Reviewed	Preceptor's Initials	Employee's Initial's
Prolapsed Cord			
Hemorrhage (PPH and APH)			
Eclampsia			
Uterine Rupture			
Ectopic Pregnancy			
Complications of post-op Gyne patients			

Review these common **Obstetrical Standards of Care** and refer to MoreOB chapters as needed:

Standard of Care	Date	Employee's Initial's
APH/PPH		
Hypoglycemia of Neonates		
Hyperbilirubinemia		

Postpartum Scavenger Hunt

- ❑ Glucometer
- ❑ IV tubing
- ❑ Foley catheter supplies
- ❑ Basin sets
- ❑ Linen
- ❑ Physician phone number rolodex
- ❑ Communication and sign-in binders
- ❑ Latex allergy cart
- ❑ Sharps containers
- ❑ Send a fax
- ❑ How to let a patient/visitor into the postpartum unit
- ❑ PKU paper storage/location
- ❑ Infant hearing testing device
- ❑ Formula storage
- ❑ Breastmilk storage
- ❑ Breast pumps
- ❑ Wound care supplies
- ❑ Newborn bathing supplies
- ❑ Patient education material (postpartum and surgical gyne)
- ❑ Post-op c/s order set
- ❑ Post-op gyne order set
- ❑ SAM packs
- ❑ Hospital phone extension list
- ❑ Chart locations
- ❑ Extra paperwork
- ❑ Hearing test
- ❑ Lanolin Ointment
- ❑ IV poles
- ❑ Ice machine
- ❑ Patient fridge vs staff fridge
- ❑ Patient microwave
- ❑ Postpartum post-op teaching hand-out's
- ❑ Security band system & operation of
- ❑ Fire extinguishers and fire pull stations

Competency Based Orientation

1) Admission of Vaginal Obstetrical patient including:

- Admit to patient registration
- Meditech admission of mom and newborn
- Vitals including postpartum check (fundal height, lochia, breasts etc).
- Review of admission paperwork
- Lab order sets
- Medication- SAM pack
- HBHC form for completion

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe admission process				
Complete admission with assistance				
Do admission autonomously				
Do admission autonomously				

2) Admission of caesarean section obstetrical patient"

- Admit to patient registration
- Meditech admission of mom and babe
- Vitals including postpartum check and incision check
- Review of admission paperwork
- Lab order sets
- Medication- post-op c/s order set and SAM pack
- HBHC form for completion

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe admission process				

Complete admission with assistance				
Do admission autonomously				
Do admission autonomously				

2) Admission of a Gynecological/Medical patient:

- Admission history in Meditech if patient is Medical only
- Surgical patient: Surgical SOC; Medical patient: Medical SOC
- Review of common Gyne procedures and care (mastectomy, hysterectomy etc).
- Health teaching for medical/surgical patients (ex. Drains); including patient hand-outs

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe admission process				
Complete admission with assistance				
Do admission autonomously				
Do admission autonomously				

3) Newborn Bath:

- Review bathing process including temp control, water temp, drying, dressing etc.
- Review demonstration/adult teaching principles
- Mother-baby dyad care of waiting approx. 6 hrs before first initial bath

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe bathing process				
Complete newborn bath with assistance				
Do a newborn bath autonomously				
Do a newborn bath autonomously				

4) PKU & Hyperbili Testing:

- Review rationale for PKU testing
- Appropriate areas for obtaining specimens
- How to collect the specimen & troubleshooting

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe PKU & bili process				
Complete PKU & bili test with assistance				
Do PKU & bili test autonomously				
Do PKU & bili test autonomously				

5) Infant Hearing Screening:

- Review rationale for hearing test
- Review how to complete test
- Process for submitting results & parental follow up

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe hearing test process				
Complete hearing test with assistance				
Do hearing test autonomously				
Do hearing test autonomously				

6) Assist patient with breastfeeding:

- Demonstrate different positions, describe effective LATCH, feeding frequency
- Lactation aids
- Hand expression
- Troubleshooting (i.e. use and mis-use of nipple shield, pumping)

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe breastfeeding assist process				
Complete breastfeeding assist process with assistance				
Help patient with breastfeeding autonomously				
Help patient with breastfeeding autonomously				

7) Complete a thorough newborn assessment

- Review what's included in a newborn assessment and how to complete
- Vitals, physical assessment, assessing for SGA, AGA & LGA
- Review documentation

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe newborn assessment				
Complete a newborn assessment with assistance				
Do a newborn assessment autonomously				
Do a newborn assessment autonomously				

8) Postpartum Assessment:

- Fundus height
- Lochia assessment (amount and colour)
- Vitals
- Breasts
- Perineum (laceration, episiotomy, hematoma etc.)
- Hemorrhoidal assessment

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe a postpartum assessment				
Perform a postpartum assessment with assistance				
Complete a postpartum assessment autonomously				
Complete a postpartum assessment autonomously				

9) Newborn Phototherapy

- Review phototherapy policy and procedure
- How to turn on, off and position phototherapy lights
- How to turn on, off and set temperature on isolette
- Vital monitoring (q4h)
- Avoidance of application of creams, ointments, gels to newborns skin
- Proper application of eye mask protection

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe newborn phototherapy process				
Complete newborn phototherapy process with assistance				
Set up phototherapy autonomously				
Set up phototherapy autonomously				

10) Health teaching for postpartum patient and newborn care:

- Discussion around bathing, feeding, safe sleep, mobility, newborn care, newborn passport, car seat checks, follow up appt's etc.

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe health teaching				
Complete health teaching with assistance				
Complete health teaching autonomously				
Circulate health teaching autonomously				

12) Patient Discharge:

Postpartum/ Caesarean section

- Complete discharge summary for mom and newborn (*discharge date and time for mom and newborn have to exactly the same)
- Completion of newborn passport and given to parents
- Patient education and provide parents with hand-out's
- Completion of HBHC form is completed (yellow to mom, white to be picked up by public health, pink in newborn chart)
- Removal security band from newborn
- Retrieve from mom the signed patient-newborn teaching sheet, left over SAM medications and signed paper, patient survey
- Car seat check for proper newborn position and securment
- Check to ensure that MMR, Rhogam, Bili and hearing test results are satisfactory
- If newborn is <37 weeks ensure car seat trending is completed and passed prior to d/c
- Ensure patient is aware to book follow up appt for self and newborn
- Review of discharge prescriptions & ensure patient understands
- If newborn requires follow up bili; provide mom with proper instructions and form
- After discharge ensure patient registration is aware of d/c; enter d/c into Meditech for cleaning of patient room
- Completion of BORN

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch discharge process				
Complete discharge process with assistance				
Complete discharge process autonomously				
Complete discharge process autonomously				

13) Discharge of post-operative Gyne & Medical patient:

- Completion of discharge summary
- Ensure patient is aware of booking their own 4-6 week follow up appt with surgeon
- Ensure patient is aware of booking their own staple removal in approx. 5-7 days
- Explain prescriptions and ensure patient understands
- Provide patient with educational hand-out's on post-operative care

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch discharge process				
Complete discharge process with assistance				
Complete discharge process autonomously				
Complete discharge process autonomously				

14) Admission and care of antepartum patient:

- If patient arrives from ER; admit patient through Meditech as Medical unless fetus if viable (20 weeks)
- If patient arrives from L&D; admit patient through Meditech as Antepartum
- Care would consist of vitals, daily fetal heart monitoring (i.e. NST), intake and output etc.
- *Refer to SOC for antepartum patient care

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch antepartum process				
Complete antepartum admission and care process with assistance				
Complete antepartum admission and care process autonomously				
Complete antepartum admission and care process autonomously				

15) NAS newborn scoring and care:

- Review of Finnegan scoring tool
- How to properly assess NAS newborns
- Methadone administration (including patient's own carry-ins process)
- Pharmaceutical process for patients on Methadone
- If newborn scores 8 or greater three times in a row than newborn is automatically admitted into SCN & paediatrician notified

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch NAS process and care				
Complete NAS process and care with assistance				
Complete NAS process and care autonomously				
Complete NAS process and care autonomously				

Orientation Survey

- 1) What unit(s) did you orientate to?
- 2) Do you feel you had enough orientation shifts?
If no, how many do you feel would be sufficient?
- 3) What did you feel was the most challenging part of your orientation?
- 4) What do you feel needs more focus during unit specific orientation?
- 5) What do you feel needs less focus during unit specific orientation?
- 6) Do you feel your preceptor was informative and took the time to show you the specifics of the unit?
- 7) Would you recommend your preceptor to preceptor other employee's?
- 8) Did you feel supported by the Group Leader during orientation?
- 9) Did you feel supported by the Nurse Clinician during orientation?
- 10) What are some improvements we can make to further develop our orientation program?
- 11) Any further comments?