Competency Based Orientation 2015

Maternal-Child Program

Special Care Nursery Unit

Brant Community Healthcare System



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:

 Group Leader:

 Employee:

Nurse Clinician/TL: _____ Preceptor: _____

Improvement Opportunities:

Focus of Remaining Orientation:

Comments:

Sign Off

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/Team Leader:
Group Leader:

Maternal-Child Orientation Process

- 1) Employee is hired to mat-chid 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

- 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

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

^{*}Breastfeeding Certificate must be in progress or completed prior to end of orientation*

- 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	YES	NO	Date to be
Certifications	(date completed)		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			

	Special Care Nursery Orientation	Checklis	t
#	Task	Employee Sign Off	Preceptor Sign Off
1)	Tour of Department with Preceptor		
	Staff washrooms		
	□ Purse storage		
	Nurses lounge and refrigeratorsPatient rooms		
	□ Patient rooms □ Linen cart		
	 Clean & dirty utility and equipment storage room 		
	_ close control and coupling to a govern		
2)	Complete scavenger hunt		
3)	Log onto Meditech		
4)	Log onto Outlook e-mail		
5)	Log onto Halogen, Medworxx		
6)	Access BORN		
7)	Review a "mock" admission with preceptor		
	(including review of admission and discharge paperwork)		
8)	Review use of Colleague Baxter IV		
9)	Review code pink cart and procedure cart		
10)	Review continuous feeding pump		
11)	Review equipment located in resuscitation room		

SCN Scavenger Hunt

Glucometer
IV tubing
Linen
Physician phone number rolodex /Common phone numbers
Communication and sign-in binders
Sharps containers
Send a fax
How to let parents/visitor into the unit
PKU paper storage/location
Infant hearing testing device
Formula storage
Breastmilk storage (fridge/freezer)
Breast pumps
Newborn bathing supplies
Patient education material
Chart locations
Extra paperwork
Lanolin Ointment
IV poles
Ice Machine
Fire extinguishers and fire pull stations
Medication fridge
IV manual book
Policy and Procedures
Code pink carts
Procedure Cart
o LP
UVC/UVA
 Chest Tube
 IV insertion equipment
Intubation equipment
Zinc
Phototherapy Lights/eye shields
Soothers
Coban
Sucrose
Weigh Scales
Diapers
BORN book
XRAY viewing monitor
Parent education handouts
Medication
Code Pink/Blue buttons
Emergency Buttons
Feeding equipment (syringes, bottles,pumps,tubes)
CPAP machine
Blood letting equipment

Competency Based Orientation

1) Admission of newborn patient including:

- Admit to patient registration
- Meditech admission of newborn (SOC's)
- Vitals (including weight)
- Review of admission paperwork (i.e. retro transfer)
- Notify paediatrician of admission
- Lab order sets (including admission swabs if retro transfer)
- Medication's
- Stat Book (black)
- **➢** BORN

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

2) Gavage Feeding

- Proper feeding tube placement & measurement
- ➤ Knowing difference between types of gavage (i.e. indwelling vs intermittent)
- Knowing rationale for gavage feeding
- Checking placement of indwelling feeding tube at insertion and prior to feeds; if indwelling
- Anticipate complications: ex. Vagal response, bradycardia, apneic, change of colour, regurgitation
- Checking residuals

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe gavage feeding process				
Complete gavage feeding with assistance				

Do gavage		
feeding		
autonomously		
Do gavage		
feeding		
autonomously		

2) Continuous Feeding

- ➤ Knowing rationale for continuous feeding
- > Measurement of feeding tube
- > Review policy and procedure
- > Setting up tubing and pump
- > Appropriate residuals

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe				
Observe				
continuous feeding				
process				
Complete				
continuous feeding				
with assistance				
Do continuous				
feeding				
autonomously				
Do continuous				
feeding				
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
- > Family-centered care- health teaching

	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
- ➤ Knowing appropriate time to complete hearing test

	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
- ➤ Nipple care
- ➤ Hand expression & use of breast pumps
- > Troubleshooting (i.e. use and mis-use of nipple shield, pumping, decrease production)
- > Knowing difference in feeding expectations between term and premature babies

	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, head-to-toe physical assessment, assessing for SGA, AGA & LGA
- > Review documentation
- > Recognize difference in gestational ages

	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) Newborn Oral Feeding:

- > Know difference in types of artificial nipples
- > EBM storage and handling protocol
- > Types and difference's in formula
- > Learning how to recognize feeding cue's
- > TFI's: knowing how to calculate appropriate intake amount
- > Human milk fortifier

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe oral feeding process				
Complete oral feeding process with assistance				
Complete oral feeding autonomously				
Complete oral feeding 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
- Education to parents

	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) Peripheral IV's

- Anatomy & physiology of veins and arteries
- > Equipment requirement
- > Infusion pump
- Calculating TFI
- Solutions
- Successful insertion of 5 witnessed IV starts
- Monitoring and maintenance of IV (i.e. infiltration, infection, q1h monitoring)
- Medication administration (i.e. correct ports, med compatibility)
- Documentation (in and out's/ fluid balance)

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Observe neonatal IV				
start				
Complete neonatal				
IV start with				
assistance				
Complete 5				
successful witnessed				
IV starts				
autonomously				

11) UVC/UAC:

- ➤ Rationale of UVC/UAC insertion
- > Equipment required
- > Set-up of sterile tray, gown, gloves and IV line
- > X-ray placement
- ➤ How to measure line
- ➤ How to assist paediatrician with insertion
- > Calculation of Heparin administration for UAC

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch UVC/UA				
process				
Complete UVC/UA				
process with				
assistance				
Complete UVC/UA				
process				
autonomously				
Complete UVC/UA				
process				
autonomously				

12) Emergent Decompression & Chest Tube Insertion:

- Rationale
- > Equipment
- ➤ How to assist paediatrician
- Complications
- > Maintenance & Monitoring
- > Positioning of newborn (i.e. on their side)
- > Setting up drainage system
- Ordering and assisting with x-ray

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch emergent				
decompression				
Complete				
emergent				
decompression				
with assistance				
Complete				
emergent				
decompression				
autonomously				
Complete				
emergent				
decompression				
autonomously				

13) CPAP:

- Rationale & indications
- Complications
- > Equipment
- ➤ Knowing resources (i.e. RT sets up and monitors system)
- Documentation
- > Knowing appropriate pressures and oxygenation
- Monitoring of newborn
- Positioning of equipment and baby
- Mouth care

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch CPAP process/initiation	•			
Complete CPAP process				
with assistance Complete CPAP process				
autonomously				
Complete CPAP process autonomously				

15) NAS newborn scoring and care:

- > Review of Finnegan scoring tool
- ➤ How to properly assess NAS newborns
- > If newborn scores 8 or greater three times in a row than newborn is 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				

16) Lumbar Puncture:

- > Rationale and indication
- > Equipment required
- Assisting paed
- > Collection of specimens
- ➤ Meditech order set
- Positioning (fetal position)

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch lumbar				
puncture				
Complete lumbar				
puncture with				
assistance				
Complete lumbar				
puncture				
autonomously				
Complete lumbar				
puncture				
autonomously				

17) Medication Administration:

- Common medications (look up: Morphine, Phenobarb, Caffeine, Amp, Gent, Surfactant, Dopamine, Epi, Sodium Bi-carb, Narcan)
- Interactions
- Compatibility
- Dosing
- > Rationale
- Complications
- > Administration (i.e. Morphine push)

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

18) Discharge:

- Discharge summary
- Documentation (note)
- ➢ BORN
- > HBHC referral as needed
- ➤ Car seat trending as needed & car seat safety
- Discharge swabs if retro transfer
- Discharge measurements
- Educational hand-out's
- Brant FACS as needed
- Review of prescriptions (parent teaching)

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

19) Attendance for assisted delivery (vaccum & forceps)

- > Preparation of equipment including but not limited to neopuff, bag & mask, stethoscope, suction etc)
- > Neonatal assessment including HC, vitals and neuro assessment
- > Routine monitoring and care
- ➤ When to admit
- > APGAR scoring
- Documentation

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch process for				
attendance at				
delivery				
Complete attendance				
at delivery with				
assistance				
Complete attendance				
at delivery				
autonomously				
Complete attendance				
at delivery				
autonomously				

20) Meconium Delivery

- > Preparation of equipment such as meconium aspirator, neopuff, suction, intubation equipment
- > Use of meconium aspirator
- > Knowing NRP guidelines on meconium deliveries (i.e. no stimulation)
- > Knowing signs of pneumo and PPHN
- ➤ APGAR scoring
- Documentation

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch process for				
meconium delivery				
Complete a				
meconium delivery				
with assistance				
Complete a				
meconium delivery				
autonomously				
Complete a				
meconium delivery				
autonomously				

21) Caesarean Section Delivery:

- > Equipment prep such as neopuff, bag & mask, FF02, vitamin K, erythromycin
- Role clarity
- ➤ APGAR scoring
- > Rationale for c/s
- Documentation

	Date Completed	Preceptor's Initial	Employee's Initial	Comments
Watch process for				
c/s delivery				
Complete				
attendance for c/s				
with assistance				
Complete				
attendance for c/s				
autonomously				
Complete				
attendance for c/s				
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?