

Nursing Onboarding Resource Guide

For Preceptors, Educators and Nurse Leaders



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Welcome

Dear Team Member,

This onboarding reference guide for clinicians provides evidenced-based concepts, tools and resources for support, education and feedback during onboarding and orientation.

It's designed as a supplement – not a replacement – for formal preceptor education (we encourage enrollment in WellStar's Preceptor Training Course in SuccessFactors – see page 14).

Onboarding new clinicians is a team effort, and orientation is about more than education. In addition to teaching new employees how to practice safe patient care in their specialties, managers and preceptors identify individual learning needs and provide feedback in a supportive learning environment. Onboarding and orientation are critical in providing mentoring and socialization; we appreciate you and greatly value your efforts – we want to support you however we can.

Wellstar is dedicated to its nursing workforce and supportive of a safe place to practice where every voice is honored. How an orientee experiences their orientation and onboarding can directly impact their decision to stay at Wellstar and impacts our nurse retention. We at the Center for Nursing Excellence serve in support of all nurses and hope you find this resource guide useful whether you are a new orientee, manager, preceptor, educator or whatever your role at Wellstar.

In this guide you'll find resources about philosophy, governance and processes, including conceptual information about onboarding roles and learning styles, and practical information, such as forms, communication tools and pathway explanations.

Thank you for your hard work and dedication to our patients and team members. We're always here if you need us – feel free to reach out at centerfornursingexcellence@wellstar.org.

Sincerely,

Center for Nursing Excellence

Definition of Terms

Preceptor: A preceptor is an experienced and competent employee who has demonstrated proficiency in technical, process, intellectual and interpersonal skills. The preceptor is responsible for orienting the orientee to the unit and introducing him/her to the formal and informal rules, customs, culture and norms of their co-workers and workplace. Preceptorship can bridge the gap between the classroom and the clinical area where nursing is practiced. The preceptor should have both an interest in teaching and a desire to work in a close one-on-one relationship with a new orientee/student. Role modeling professional interactions on the care unit, demonstrating nursing actions, and giving timely and appropriate feedback to the orientee are ways of fulfilling this role.

The preceptor builds on existing experience, promotes confidence, creates an environment conducive to learning and facilitates progression of the orientee throughout the onboarding process. To do so, the preceptor assesses the learning needs of the orientee and collaborates with him/her to determine goals and learning outcomes. The preceptor's knowledge of the clinical area and the patient population will help guide the orientee to select relevant and attainable goals and outcomes.

Orientee: An orientee is an employee/student who is new to the unit or department. The orientee may be newly hired to the institution or may be a transfer into the unit from another department within the institution. He or she may be a novice to the profession and/or be unfamiliar with the institution or the unit. In some instances, the orientee is a student who is being oriented to the department. An orientee may also be referred to as a preceptee.

The orientee demonstrates increasing responsibility and competence in providing patient care during orientation. The orientee demonstrates the ability to prioritize both patient and unit tasks using critical thinking and decision-making skills. The orientee shall work with the preceptor and unit manager to provide identified self-assessed learning needs; he/she will then work with the preceptor to become proficient and demonstrate safe and competent patient care.

Nurse Leader: Oversees a team of nurses (includes charge nurse to nurse manager for direct nurses) to provide top quality and efficient patient care. Communicates expectations and is responsible for ensuring staff are in compliance with regulatory and health system policies and procedures. Provides direction of team in alignment with organization's vision and mission.

Orientation: Orientation provides a period or process of introduction and adjustment for the orientee to the Wellstar clinical environment. Orientation is designed to provide a new employee with the information he or she needs to function comfortably and effectively in the role they were hired into. During the orientation process, the preceptor and unit manager help the employee get familiarized with the organization, their role expectations and responsibilities. This includes the company culture, work area, co-workers, department or unit, and its philosophy, goals, standards and processes.

Onboarding: The action or process of integrating a new employee into the organization (organization socialization).

Nurse Resident: A new graduate nurse from an accredited nursing school, or any RN with less than six months' experience. Nurse residents will participate in a year-long residency program and specialty service fellowship program.

Transition Nurse: An experienced nurse with greater than six months' experience that is new to a specialty service i.e., ED nurse transitioning to ICU. The RN will participate in a specialty service fellowship program.

Experienced Nurse: An experienced nurse, either a new hire from an external hospital system or an internal transfer from one Wellstar hospital to a different Wellstar hospital who is experienced in the specialty service area; for example, an experienced nurse transferring from the Wellstar North Fulton Emergency Department to the Wellstar AMC Emergency Department. The nurse will participate in unit orientation.

Initial Competency Assessment (ICA): Skills-based competencies the newly hired nurse or transition nurse will complete during orientation (see page 18).

RN Onboarding Weekly Evaluation and Needs Assessment: Assesses job knowledge, organization, teamwork, environmental safety and provides guidance for weekly goals (see page 20).

Preceptor Orientation Evaluation Form: Assesses orientee's experience of the precepting process by providing valuable feedback to strengthen Wellstar's Onboarding and Orientation model (see page 22).

Wellstar Nurse Professional Practice Model (PPM): Schematic description of a system that depicts how nurses practice, collaborate, communicate and develop professionally to provide the highest quality of care for those served by the organization. (2019 Magnet® Application Manual (p. 159). American Nurses Credentialing Center. Silver Springs, MD.)

The Wellstar Nursing Professional Practice Model

The Wellstar Nursing Professional Practice Model (PPM) is grounded in five practice sustaining elements that encircle nursing's mission and values, those nurses care for, and how care is delivered.

The star, created by the continuous flow of the practice elements, represents exceptional care provided by exceptional caring, professional nurses.

The heart in the center represents how care is delivered across the continuum supporting Wellstar's belief in enhancing the health and well-being of every person served.



The PPM guides nursing and the preceptor's practice as demonstrated through **teamwork** as you partner with the nurse preceptee, interdisciplinary partners, educators and leaders. Exemplary practice is demonstrated when using evidence-based practice (EBP).

Shared leadership and professional development are demonstrated through shared decision-making when evaluating the preceptee's progress and collectively deciding how to provide a clinical or educational experience that closes a skill or knowledge gap.

Creative innovation is demonstrated through discussion of workflow, technology, or partnering to create, implement and evaluate an EBP project.

Nursing's mission is caring compassionately and practicing professionally. This is demonstrated by your practice throughout the precepting experience and includes the patients, family members, preceptee, unit staff and interprofessional partners.

The care delivery model is demonstrated by the preceptor through your holistic approach to identify and address the preceptee's needs and seeing their development through enculturation into the work environment and competency validation.

Why Orientation and Onboarding?

Purpose: Orientation and Onboarding helps us cultivate an environment of inclusion and interprofessional collaboration.

Objectives: To attract, retain and develop a vibrant workforce that promotes engagement, trust and ownership.

Benefits

- Reduces variation in practice, increases process standardization
- Decreases stress for preceptors and new evidence-based practice users
- Improves preceptor skills
- Builds on Benner's Novice-to-Expert Theory
- Creates a skilled preceptor pool
- Increases staff QI initiative involvement
- Boosts collegiality

Source: Sigma Nursing Repository

WellStar Orientation and Onboarding Program

Any nurse new to the organization or to a specific Wellstar hospital will participate in an onboarding and orientation program consisting of:

System Orientation

- New team member orientation

Facility Orientation

- Meet your unit manager and team
- Clinical Orientation
 - Complete all assigned computer-based trainings in SuccessFactors and Elsevier
 - Preceptor assignment
 - Orientation to system applications (EPIC)

Note: EPIC CBLs must be completed prior to EPIC training.

Unit leaders will assess the orientee's clinical experience level and enroll them in the Nurse Residency and/or Specialty Fellowship program as appropriate. (New graduates hired into the Nurse Residency program are automatically enrolled into Fellowship program; transitioning nurses are enrolled into Fellowship program at the discretion of their Unit Leaders). These programs are designed to provide new graduates and transitioning nurses additional resources, clinical education specific to the specialty and professional development support.

Length of orientation varies depending on the specialty service line and the experience level of the nurse. Additionally, the duration of orientation depends on individual progression for successful completion of all clinical competencies and unit expectations.

Primary Roles and Responsibilities

Orientee

- Provides contact information to preceptor and unit leader
- Becomes familiar with unit, staff, policies, procedures and processes
- Reviews and updates weekly RN onboarding document and ICA with preceptor (see pages 18 and 20)
- Identifies self-learning needs and seeks opportunities to gain additional experience within scope of practice
- Works scheduled shifts
- Provides feedback and communicates concerns to preceptor and/or unit leader
- Completes all assigned computer-based learning (includes those assigned in SuccessFactors or Elsevier)
- Keeps copy of all orientation paperwork
- Completes Preceptor/Orientation Evaluation Form and submits to hiring manager at end of orientation (see page 22)
- Transitioning nurses and new graduate nurses must attend all specialty fellowship sessions inclusive of completing all computer learning modules
- New graduate nurses must attend monthly Nurse Residency (Rising Star) sessions including completion of process improvement project

Preceptor

- Provides contact information, phone number and shift schedule to orientee
- Familiarizes orientee to unit, staff, policies, procedures and processes
- Provides copy and reviews weekly RN onboarding document and ICA with orientee (see pages 18 and 20)
- Partners with new graduate, transitioning or experienced nurse to assess current knowledge and skill levels
- Meets with orientee during each shift to provide goals for the day, sets learning objectives, encourages critical thinking, provides useful feedback and support to orientee
- Coordinates weekly meetings with orientee to review progression of RN weekly onboarding document and ICA

- Increases work assignments based on orientee's learning needs to facilitate ability to take a full patient care assignment by end of orientation
- Provides opportunities for skill-based learning tasks and ensures orientee is progressing throughout orientation with signing off and reviewing ICA on a weekly basis
- Schedules meeting with unit leader to review orientee's progression on bi-weekly basis
- Coordinates with unit leader to identify alternate preceptor if primary preceptor has scheduled vacation time
- Ensures new graduate nurses are attending monthly residency program
- Ensures new graduates and transitioning nurses attend/participate in specialty fellowship sessions
- Coordinates additional learning experiences as appropriate with unit educator, quality improvement team, peers and other staff
- Provides orientee with tools, resources, education/information, opportunities, to become proficient and independent in providing safe, quality, patient care

Nurse Leader

- Review roles of preceptor selection to determine appropriateness to support new hires
- Assigns preceptor to new hire and communicates name and contact information to HR and staff
- Meets with preceptor prior to new unit hire arrival to create orientation plan/creates schedule
- Meets with preceptor and orientee bi-weekly to discuss progress
- Facilitates midpoint and endpoint of orientation meetings
- Monitors ICA completion
- Facilitates one-on-one leader rounding (see pages 24-26)
- Sends copy of all completed orientation paperwork to HR
- Ensures the orientee attends residency and specialty fellowship sessions as assigned
- Collects and reviews the Preceptor/Orientation Evaluation Form at the end of orientation

Clinical Onboarding and Orientation

Onboarding and orientation is a continuous process that begins prior to the orientee arriving on the new unit. Wellstar's orientation program provides coordination and collaboration before and throughout the orientation process to support the overall experience and success of the orientee.

Before and Starting Clinical Onboarding/Orientation

SEEKING AUTONOMY

- Beginning of orientation and introduction to the unit
- Reviewing critical forms
- Establishing schedule
- Ensuring support system in place for success

Required Forms (see page 18)

- ICA (new hire completes self assessment)

Midpoint during Clinical Onboarding/Orientation

BUILDING AUTONOMY

- Midpoint timeframe as defined by specialty
- Evaluation of progress with leader present using tools
- Review of ICA documents

Required Forms (see pages 18-22)

- ICA (ongoing documentation of skills)
- Biweekly/Weekly Evaluation form (during midpoint meeting)

Completion (end) of Clinical Onboarding/Orientation

BECOMING AUTONOMOUS

- Facilitation of 1:1 with new hire and review End of Orientation and Preceptor Evaluation
- End of Orientation as defined by specialty

Required Forms (see pages 18-22)

- ICA (ongoing documentation of skills)
- Biweekly/Weekly Evaluation form (during midpoint meeting)
- Preceptor evaluation (for manager only)

Prior to Onboarding and Orientation

ORIENTEE

- Provide unit leader/Talent Acquisition updates contact information
- Come prepared to learn
- Confirm schedules with nurse leader and preceptor

PRECEPTOR

- Create a plan of action for onboarding
- Gather all forms in forms section
- Establish scheduled meetings with orientee, educator and nurse leaders
- Attend preceptor training or refresher and review resources such as preceptor tool kit

UNIT LEADER

- Evaluate available preceptors & assign appropriately
- Develop orientation schedule
- Obtain access and assign computer-based learning
- Provide job description to preceptor for orientee
- Review expectations for preceptor

During Orientation

ORIENTEE

- Identify and communicate learning needs during week 1
- Ensure computer-based learning is being completed in timely manner
- Take initiatives and seek opportunities for learning and increasing skills proficiency

PRECEPTOR

- Review orientee daily progress on ICA and RN Weekly Onboarding forms
- Adjust individualized learning plan based on orientee's needs
- Provide feedback, support while increasing patient load based on orientee's progress

UNIT LEADER

- Meet with preceptor and orientee biweekly
- Evaluate and facilitate ICA progression
- Provide necessary resources for orientee

End of Orientation

ORIENTEE

- Complete onboarding forms and submit to unit leader
- Meet with nurse leader
- Prepare to become independent with case load utilizing mentor

PRECEPTOR

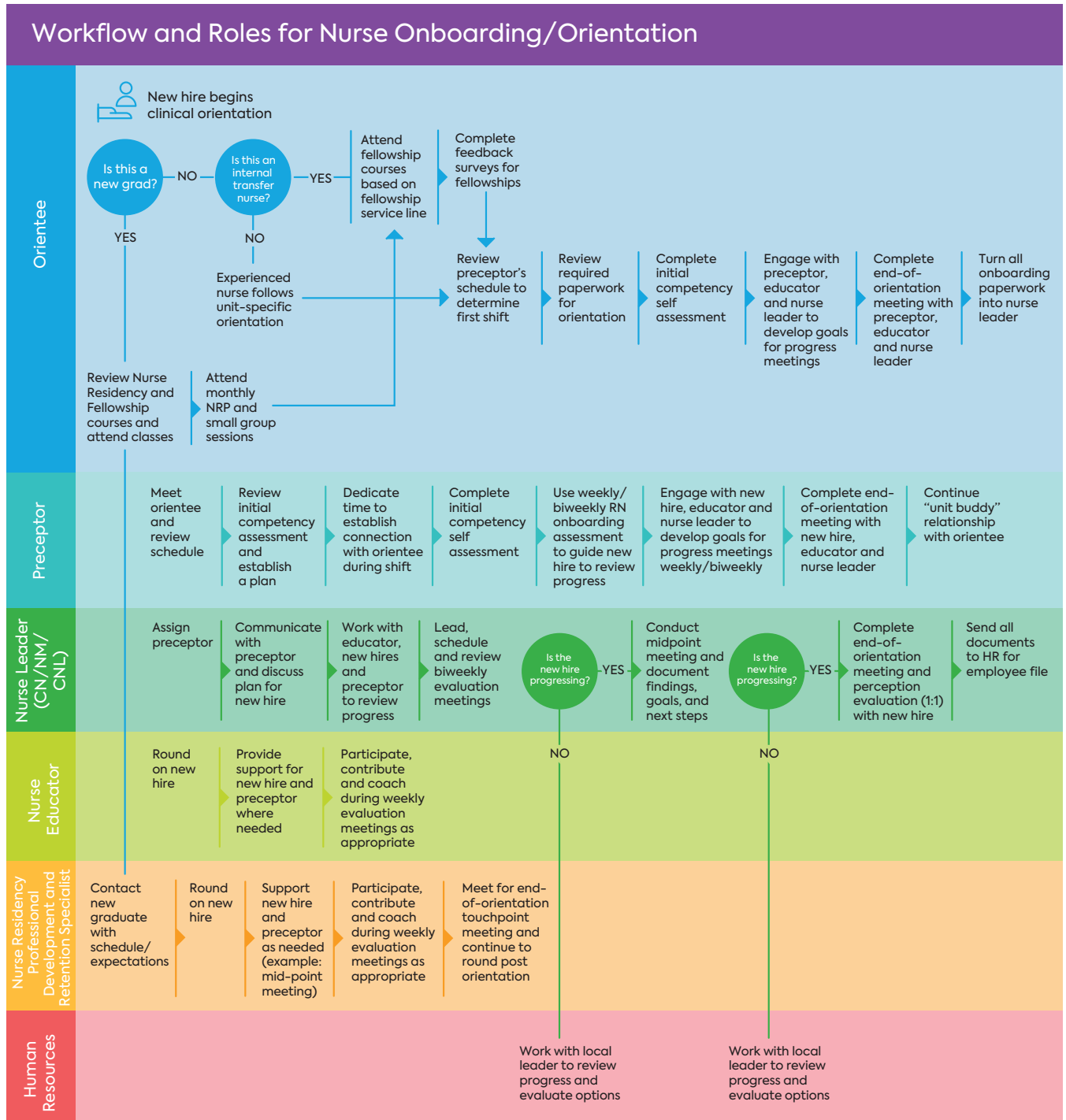
- Ensure ICA and RN weekly assessment forms are completed
- Ensure full case load for orientee
- Identify continued areas for learning after orientation
- Provide feedback to unit leader

UNIT LEADER

- Arrange meeting with orientee and assign unit mentor
- Collate all orientation forms and submit to HR
- Meet with orientee to discuss orientation and next steps

Orientation and Onboarding Workflow

This workflow describes roles and how they align/work together to ensure new hire success.



New Graduate/Nurse Residency Onboarding

About the Program

- Program is one full year
- Resident must complete all program requirements
- Class and small group attendance are required
- Evidence-based project completion is mandatory
- 12 sessions (one year); courses include:
 - Conflict resolution
 - Empathy & patient experience
 - Stress management & resiliency
 - Ethics & end-of-life
 - Diversity & inclusion
 - Professional identity development
- Clinical reflections
- Small group
- Graduation/celebrations

All new graduates also participate in new team member and clinical orientations at the system level and a competency assessment with preceptor(s) at the facility level.

Orientation Timetable			
Specialty	Mid-Point Meeting	End-of-Orientation Meeting	Average Length of Orientation
Acute Care	Week 5-7	Week 11-13	12 Weeks
Critical Care	Week 9-11	Week 19-21	20 Weeks
Intermediate/ Progressive Care	Week 7-9	Week 15-17	16 Weeks
Emergency Care	Week 9-11	Week 19-21	20 Weeks
Labor & Delivery	Week 11-13	Week 23-25	24 Weeks
Mother Baby	Week 5-7	Week 11-13	12 Weeks
NICU	Week 9-11	Week 19-21	20 Weeks
Perioperative	Week 17-19	Week 35-37	9 Months

Transitional and Experienced Nurse Onboarding

About the Programs

- Designed to support new-to-practice nurses and new-to-specialty nurses with less than six months' experience
- Specialty champions lead a blend of virtual classes
- Structured using evidence-based practice modules from specialty content

If new to Wellstar, nurses participate in new team member and clinical orientations at the system level; all transitional and experienced nurses participate in a competency assessment with preceptor(s) at the facility level.

Orientation Timetable – Transitional Nurses

Specialty	Mid-Point Meeting	End-of-Orientation Meeting	Average Length of Orientation
Acute Care	Week 4-6	Week 9-11	10 Weeks
Cardiovascular Cath Lab	Week 6-8	Week 15-16	12-16 Weeks
Critical Care	Week 7-9	Week 15-17	16 Weeks
Intermediate/Progressive Care	Week 6-8	Week 13-15	14 Weeks
Emergency Care	Week 7-9	Week 15-17	16 Weeks
Labor & Delivery	Week 7-9	Week 15-17	16 Weeks
Mother Baby	Week 4-6	Week 9-11	10 Weeks
NICU	Week 7-9	Week 15-17	16 Weeks
Perioperative	Week 11-12	Week 23-24	24 Weeks

Orientation Timetable – Experienced Nurses

Specialty	Mid-Point Meeting	End-of-Orientation Meeting	Average Length of Orientation
Acute Care	Week 2-3	Week 4-5	5 Weeks
Cardiovascular Cath Lab	Week 2	Week 4	4 Weeks
Critical Care	Week 3-4	Week 6-7	7 Weeks
Intermediate/Progressive Care	Week 2-3	Week 5-6	6 Weeks
Emergency Care	Week 3-4	Week 6-7	7 Weeks
Labor & Delivery	Week 4-5	Week 7-8	8 Weeks
Mother Baby	Week 2-3	Week 4-5	5 Weeks
NICU	Week 3-4	Week 6-7	7 Weeks
Perioperative	Week 4-6	Week 11-12	12 Weeks

Resources For Preceptors



Role of Preceptorship

WellStar has adopted the preceptor model for orientation and integration of new and newly qualified team members, new graduates and students. All new staff and students will be paired with a primary preceptor for an orientation period for culture integration and consistent education. Orientees are expected to work the preceptor's schedule. As a preceptor, you will be one of the most influential people in your preceptee's nursing career. You can have a direct impact on the orientee's ability to have a positive, confidence-building and educational start to their career. Think prior to the onboarding of what made you select nursing as a career and share that story with your orientee. Preceptors are expected to:

- Meet at the beginning of the shift with the orientee to discuss the learning needs and plan for the day.
- Meet at the end of the shift with the orientee to review and discuss accomplishments and opportunities for improvement.
- Always provide direct supervision of the orientee when performing patient care.
- Complete all preceptorship documentation by the end of the orientation period, including:
 - Weekly evaluation submitted to Unit Manager, Professional Development Unit (PDU) Manager and Educator (see page 20)
 - ICA as competency is reached daily; each box must be fully completed – no strikethroughs or lines. (see page 18)
 - The preceptor will meet with the unit manager and orientee for mid cycle and end of orientation meetings.

About Conflict and Conflict Resolution

As a preceptor, you may experience conflict with your preceptee. Conflict can create stress among individuals and can be either constructive or destructive. Constructive conflict stimulates desired change or results in positive growth. Destructive conflict causes stress, interferes with quality of patient care, work satisfaction and effective communication.

Guidelines for expressing conflict include:

- Use “I” statements to clarify your own opinions and experiences from hearsay. “I believe that...”
- State the conflict or disagreement clearly, making your position obvious.
- Collect information about the situation so that the specific problem can be identified.
- Listen to how others perceive the situation. Are assumptions based on fact or opinion?
- Recognize the point of view expressed by others and acknowledge there could be other solutions.
- Give your reasons if you think they will help identify or solve the problem, and describe your thoughts and perceptions accurately.

If you do experience conflict with your preceptee, please remember to notify the unit leader. We want to assure you have a rewarding experience as a preceptor. We will adjust the clinical schedule as necessary to facilitate a meaningful learning experience for everyone.

2021 Preceptor Courses

The course is divided into two parts; you must complete both parts to receive credit.

Part 1 (Course #2136462)

- Self-assign Preceptor Part 1 through SuccessFactors. Your manager/educator should approve your participation in Part 1 and Part 2.
- Upon enrollment, Part 1 MUST be approved by an official course administrator. You'll receive email confirmation of enrollment within 24-48 business hours (excluding weekends).
- Part 1 modules are completed in HealthStream. Access via the Continuing Education Center on eSource or through this link <http://www.healthstream.com/hlc/wellstarcp>.

Part 2 (Course #2138495)

- After you complete Part 1:
 - Print the completion certificate
 - Print the CARES assessment tool and have it handy
 - Self-register for Part 2 through SuccessFactors
- The course administrator will verify Part 1 completion before approving Part 2. Don't assume you've been approved for Part 2 until you receive confirmation, which will be sent to your WellStar email.

Part 2 Classes - Delivered Virtually via Teams

Morning Classes – 8:30 AM-12:30 PM

May 13th
July 8th
September 9th
November 11th

Afternoon Classes – 1 PM-5 PM

April 8th
June 10th
August 12th
October 14th
December 9th

Questions? Contact Brent Amelingmeier, at brent.amelingmeier@wellstar.org

Seven Roles of the Preceptor

LEADER/INFLUENCER:

The preceptor demonstrates how the job is done and gives direction while still valuing and promoting the preceptee's autonomy. The preceptor values altruism and guides the preceptee while preserving his/her dignity and integrity.

SOCIALIZATION AGENT:

The preceptor helps the preceptee transition to his/her new role. This means assisting them as they are integrated into their new environment – introducing them to other team members, familiarizing them with the department and sharing unwritten rules.

TEACHER/COACH:

The preceptor is a subject matter expert who assists the preceptee in expanding knowledge and connecting theory to practice by sharing his/her expertise and giving examples.

ROLE MODEL:

The preceptor conducts themselves in a way that guides the preceptee in developing appropriate behavior or actions. He/she models professionalism, setting an example for others to follow. The preceptor must be self-aware of both the verbal and non-verbal behaviors he/she exhibits.

PROTECTOR:

The preceptor helps the preceptee manage difficult situations. This not only means removing them from workplace incivility, but also assisting them in developing the coping skills they will need to succeed far beyond the orientation period.

EVALUATOR:

The preceptor gives continuous feedback to the preceptee to strengthen skills and improve performance. This feedback must be timely, balanced (i.e., goal focused and constructive), private and consistent.

FACILITATOR:

The preceptor provides a positive and safe environment that promotes the preceptee's learning. This means acting in a non-threatening manner, encouraging questions and sharing relevant experiences.

6 Principles of Malcolm Knowles's Adult Learning Theory (Andragogy)

1. NEED TO KNOW

Adults want to know why they need to learn something before undertaking learning. Preceptors should explain why learning something is useful, meaningful or important.

Adults need to be seen and treated as capable and self-directed. Preceptors should create environments where orientees develop their latent self-directed learning skills.

2. SELF CONCEPT

3. EXPERIENCE

Adults come into educational activity with different experience than do youth. Individual backgrounds, motivations, needs, interests and goals create a greater need for individualized teaching strategies.

Adults become ready to learn things they need to know in order to effectively handle real-life situations and apply in the present.

4. READINESS TO LEARN

5. ORIENTATION TO LEARNING

Adults are life-centered in their orientation to learning. They are not focused on the content itself, but rather on its practical everyday uses.

Adults are responsive to some external motivators (e.g., higher salaries), but the most potent motivators are internal (e.g., job satisfaction, self-esteem). Orientees should be allowed to participate in identifying their own learning needs whenever possible.

6. MOTIVATION

Forms

Note that all completed:

- Evaluation Forms
- Needs Assessment Forms
- ICAs

Must be sent to HR when orientation has ended.

RN Initial Competency Assessment (ICA)

Complete an ICA daily, as competency is reached. Each box must be fully completed; no strikethroughs.

To find the ICA for your specialty:

- Go to eSource
- Locate Centers for Nursing Excellence (CFNE) at the bottom of the page
- Click “Nursing Competency at Wellstar”
- Click Nursing ICAs
- Identify your ICA and click “enter”




RN Initial Competency Assessment (ICA)

Initial Competency Assessment/Job Specific Orientation		Acute Care RN						
Employee Name:	Employee Number:	Job Title:						
Department Name:	Department Number:	Primary Preceptor:						
Method of Instruction Key: P = Protocol/Procedure Review E = Education Session S = Self Directed Learning C = Clinical Practice D = Demonstrated/Simulation	Method of Evaluation Key: O = Observation RD= Return Demonstration/Simulation T = Written Test D = Discussion/Verbal Review CS= Case Study	Clinical Onboarding (CO)	EMPLOYEE Self-Assessment			PRECEPTOR Validation of Competency		
			Never Done	Needs Review/Practice	Competent	Method of Instruction (See Key)	Date	Initials
A. POLICY & PROCEDURE/ WELLSTAR RESOURCES:								
<i>Locates and reviews the following resources</i>								
<i>Policy Tech Policies/ Procedures</i>								
<i>SPP (System Policy and Procedures)</i>								
<i>DPP (Departmental Policy and Procedures)</i>								
<i>Manuals (equipment, lab, infection prevention, etc.)</i>								
<i>Center for Nursing Excellence Website</i>								
<i>Professional Practice Model</i>								
<i>Organizational Learning Tab</i>								
<i>Elsevier Clinical Skills</i>								
<i>Elsevier Clinical Key</i>								
<i>EPIC Tip Sheets</i>								
<i>SuccessFactors</i>								
<i>Communication Access (i.e. review of email, eSource, Lawson, SmartSquare, Online incident reporting (SaFER), etc)</i>								
<i>CE Center</i>								
<i>HIPPA</i>								
<i>EMTALA</i>								
<i>Demonstrates proper hand hygiene/hand washing</i>								
<i>Follows standard precautions with all patients, bodily fluids and contaminated equipment/ supplies</i>								
<i>Proper donning and doffing of PPE</i>								
<i>Identifies, initiates and enforces appropriate isolation measures</i>								
<i>Incorporates applicable infection prevention best practices & bundles into care:</i>								
<i>Catheter Associated Urinary Tract Infection (CAUTI) Prevention</i>			X		Jan 1, 1999	A.B.	Visual observation – demonstrated appropriate sterile technique with Toley placement	
<i>Medical Necessity for Insertion</i>								
<i>Alternative / External Devices</i>								
<i>Foley Insertion</i>								
<i>Nurse Driven Protocol for Removal</i>								
<i>Foley Care and Maintenance (BID and PRN)</i>								
<i>Documentation / Patient Education</i>								
<i>Central Line Associated Blood Stream Infection (CLABS) Prevention</i>								
<i>Medical Necessity Daily</i>								

RN Onboarding Weekly Evaluation & Needs Assessment

Orientees (Nurse Resident, Transition RN, Experienced RN) and Preceptors will complete this form weekly. Clinical assignments and tasks are modified based on self-identified and preceptor feedback. In tandem with the ICA, this form helps validate performance, monitor progress and identify goals for the following week. The form is reviewed by professional development staff bi-weekly. To locate form:

- Go to eSource
- Locate Centers for Nursing Excellence (CFNE) at the bottom of the page
- Click on “Preceptor Training”
- Under Quick Links, select RN Onboarding Weekly Evaluation Needs Assessment



RN Onboarding Weekly Evaluation & Needs Assessment

Nurse Resident (New Grad)
 Transitional RN (new to specialty)
 Experienced RN (experienced in specialty)

Name: _____ Unit: _____ Pt Load: _____ Primary Preceptor: _____

Date: _____ Orientation Week: _____ Secondary Preceptor: _____

Completion Status: Initial Competency Assessment (ICA) : _____ %

Onboarding CBL Modules: _____ %

Specialty/Fellowship Modules _____ %

Assessment Criteria Rating Scale:

1 = Complete preceptor dependence for all tasks / thought processes

2 = Demonstrating increasing independence / progressing

3 = Independent in routine patient care / competent

Directions: Assigned preceptor(s) and orientee are to complete this form at the end of each week. Utilize the assessment criteria scores on page 1 in combination with needs assessment on page 2 to determine goals for the following week and to monitor progress. Form serves as clinical performance validation in conjunction with ICA. Form will be reviewed for onboarding progression by professional development support staff (i.e. educator, site residency coordinator, PPL, CNS, CNL, etc) bi-weekly. Completed form, along with ICA, to be sent to HR upon completion of orientation.

***Submit forms electronically each week: Exp RNs: Unit Manager and Educator (or designee) New Grad RNs: Professional Practice Leader (PPL) / Site Residency Coordinator and Unit Manager.*

ASSESSMENT CRITERIA	Orientee Assessment			Preceptor Assessment		
	1	2	3	1	2	3
CLINICAL						
Urgency: accurately prioritizes differentiation for patient complications/needs						
Problem recognition: accurately interprets clinical data, anticipates & identifies problems/complications						
Problem management: initiates appropriate nursing interventions, SBAR MD communication with complete data/anticipates relevant orders, f/u monitor & assess						
Rationale: provides relevant rationale for interventions/management (nursing & medical)						
WELLSTAR CORE & ROLE SPECIFIC COMPETENCIES						
Cost Control: plans & uses resources efficiently; prioritizes to promote patient flow						
Communication/Interpersonal Skills: communicates well; reports accurate & punctual; share information & ideas with others; demonstrates good listening skills; solicits/accepts performance feedback; builds relationships. flexible						
Customer Focus/Service: builds customer confidence; committed to improving customer satisfaction, handles customer questions, complaints, service problems politely/efficiently; available for customer, maintains pleasant and professional image.						
Dependability: meets commitments, attendance/ punctuality requirements; attends staff meetings/educational programming; timely response/completion to email/CBLS/assignments						
Integrity/Ethics: deals with others in straightforward, honest manner, accountable for actions, maintains confidentiality, supports company values						
Job Knowledge: understands duties/responsibilities to perform safely						
Quality: performs care with attention to detail & accuracy, looks for improvement opportunities, participates in unit/department quality initiatives						
Teamwork: displays positive attitude, meets team deadlines/goals						
Work Environment/Safety: promotes mutual respect & clean/safe workplace						
Decision Making/Judgment: recognizes/responds to problems, seeks information & input from others, makes timely decisions & communicates decisions to others						
Initiative: tackles problems, take appropriate actions, seeks new opportunities/experiences						
Personal Organization: keeps information organized/accessible, maintains functional workspace						
Productivity: manages assigned workload, prioritizes activities, develops good work processes; works efficiently, manages time well						
Results Focus: sets targets, achieve results, shows progressive improvement						

Note: if assigning 1's beyond the first two weeks of orientation, please provide specific examples of how the new team member is not meeting the standard expectations

AN 9.28.2020

RN Onboarding Weekly Evaluation & Needs Assessment



RN Onboarding Weekly Evaluation & Needs Assessment

Nurse Resident (New Grad) Transitional RN (new to specialty) Experienced RN (experienced in specialty)

Name: _____	Unit: _____	Pt Load: _____	Primary Preceptor: _____
Date: _____	Orientation Week: _____		Secondary Preceptor: _____

Completion Status: Initial Competency Assessment (ICA) : _____ %
 Onboarding CBL Modules: _____ %
 Specialty/Fellowship Modules _____ %

Assessment Criteria Rating Scale:
 1 = Complete preceptor dependence for all tasks / thought processes
 2 = Demonstrating increasing independence / progressing
 3 = Independent in routine patient care / competent

Directions: Assigned preceptor(s) and orientee are to complete this form at the end of each week. Utilize the assessment criteria scores on page 1 in combination with needs assessment on page 2 to determine goals for the following week and to monitor progress. Form serves as clinical performance validation in conjunction with ICA. Form will be reviewed for onboarding progression by professional development support staff (i.e. educator, site residency coordinator, PPL, CNS, CNL, etc) bi-weekly. Completed form, along with ICA, to be sent to HR upon completion of orientation.

Submit forms electronically each week: **Exp RNs: Unit Manager and Educator (or designee) **New Grad RNs:** Professional Practice Leader (PPL) / Site Residency Coordinator and Unit Manager.

ASSESSMENT CRITERIA	Orientee Assessment			Preceptor Assessment		
	1	2	3	1	2	3
CLINICAL						
Urgency: accurately prioritizes differentiation for patient complications/needs						
Problem recognition: accurately interprets clinical data, anticipates & identifies problems/complications						
Problem management: initiates appropriate nursing interventions, SBAR MD communication with complete data/anticipates relevant orders, f/u monitor & assess						
Rationale: provides relevant rationale for interventions/management (nursing & medical)						
WELLSTAR CORE & ROLE SPECIFIC COMPETENCIES						
Cost Control: plans & uses resources efficiently; prioritizes to promote patient flow						
Communication/Interpersonal Skills: communicates well; reports accurate & punctual; share information & ideas with others; demonstrates good listening skills; solicits/accepts performance feedback; builds relationships, flexible						
Customer Focus/Service builds customer confidence; committed to improving customer satisfaction, handles customer questions, complaints, service problems politely/efficiently; available for customer, maintains pleasant and professional image.						
Dependability: meets commitments, attendance/ punctuality requirements; attends staff meetings/educational programming; timely response/completion to email/CBLS/assignments						
Integrity/Ethics: deals with others in straightforward, honest manner, accountable for actions, maintains confidentiality, supports company values						
Job Knowledge: understands duties/responsibilities to perform safely						
Quality: performs care with attention to detail & accuracy, looks for improvement opportunities, participates in unit/department quality initiatives						
Teamwork: displays positive attitude, meets team deadlines/goals						
Work Environment/Safety: promotes mutual respect & clean/safe workplace						
Decision Making/Judgment: recognizes/responds to problems, seeks information & input from others, makes timely decisions & communicates decisions to others						
Initiative: tackles problems, take appropriate actions, seeks new opportunities/experiences						
Personal Organization: keeps information organized/accessible, maintains functional workspace						
Productivity: manages assigned workload, priorities activities, develops good work processes; works efficiently, manages time well						
Results Focus: sets targets, achieve results, shows progressive improvement						

Note: if assigning 1's beyond the first two weeks of orientation, please provide specific examples of how the new team member is not meeting the standard expectations

AN 5.28.2020

Preceptor/Orientation Evaluation

This form is completed by the orientee at the end of orientation and submitted to the Unit Manager. The Unit Manager submits the document to HR. Feedback is also shared during one-on-one meetings with the Unit Leader and Preceptor throughout orientation.



PRECEPTOR/ORIENTATION EVALUATION

Preceptee Signature _____ Date _____

RN Primary Preceptor _____ Unit _____

Please indicate your agreement with the following statements using this scale and placing a 3 in the appropriate column:

1 = strongly disagree 2 = disagree 3 = agree 4 = strongly agree

Preceptor Evaluation	Rating				Comments
	1	2	3	4	
My preceptor was knowledgeable					
My preceptor willingly shared his/her knowledge					
My preceptor created a supportive learning environment					
My preceptor was responsive to my learning needs and sought out learning opportunities for me					
I believe my preceptor will be my best friend at work during the next year					

Orientation Evaluation	Rating				Comments
	1	2	3	4	
The other unit team members were supportive of my learning					
The orientation allowed me to enhance my clinical skills					
The orientation allowed me to develop my teambuilding skills					
The mid-point and end of orientation evaluation helped me prioritize my learning needs					
I accomplished the goals I set for my orientation					

Things I liked *best* about my clinical orientation experience on the unit:

Things I would have changed regarding my clinical orientation experience on the unit:

Comments or Suggestions for Improvement:

Resources For Managers



Why incorporate development into rounding / one-on-ones?



Wellstar is asking you to include career development questions in your upcoming rounding or one-on-ones so we connect with team members on both personal and professional levels.

To recognize the unprecedented challenges our leaders and team members have faced this past year, this revised approach will:

- **eliminate** the formal Midyear Check-ins for FY 2021,
- **reduce stress** and workload, and
- focus on the **well-being, work contributions, and development** of your team members.



Connecting on well-being and development is a powerful way to encourage and engage our team members. [Click here](#) to learn more about the power of connection.



Your role in this rounding process:

Your role as a leader is to **connect with each team member** about:

- their **well-being and how you care**,
- their **strengths and/or development opportunities**,
- **what's going well and any challenges** they're experiencing, and
- **development opportunities** or **career goals** the team member might like to pursue.



Things to do and keep in mind:

Before your rounding or scheduled one-on-one, think about:

- what you have noticed about this team member and **their recent work**, and
- when you have seen them **fully engaged in their role** and potential **future opportunities at Wellstar** you may see for them.

During this discussion:

- keep the conversation **focused on them** and their experience and development,
- **do** as much listening as possible and provide concrete **ideas, support, and next steps** when appropriate,
- refer team members to the 2021 [Team Member](#) or [Leader Development](#) Catalogs for development ideas,
- **avoid clouding the discussion** with corrective actions.

After the discussion:

- find ways to **pursue what brings them joy** and alleviate stress,
- encourage them to explore **Individual Development Plan (IDP)** [learning](#), [IDP Quick-Start Guide](#), and [career resources](#), as time permits, and
- ensure you are regularly checking in and **following up** on these conversations throughout the year, not only at mid-year or end-of-year timeframes.



Key questions and considerations:

How can I set development goals?

Setting goals doesn't have to be a difficult task. [Click here](#) to see how easy it is to **set effective and actionable goals** for your team members.

What if a team member is not meeting performance expectations?

Connect with your site's HR Partner to help document performance concerns and discuss practices to manage performance concerns on an **ongoing basis**.



Questions to integrate into your discussion:

Connecting on Well-being (limit to one question)

- Potential Questions**
- How are you doing and how can I support you?
 - What brings you joy in your work these days?

Connecting on Work

- Potential Questions**
- What are you finding most challenging in your day-to-day work?
 - What's been going well or are you most proud of recently?
 - Tell me more about what brings you joy at work...
 - In what areas would you like to grow and develop?

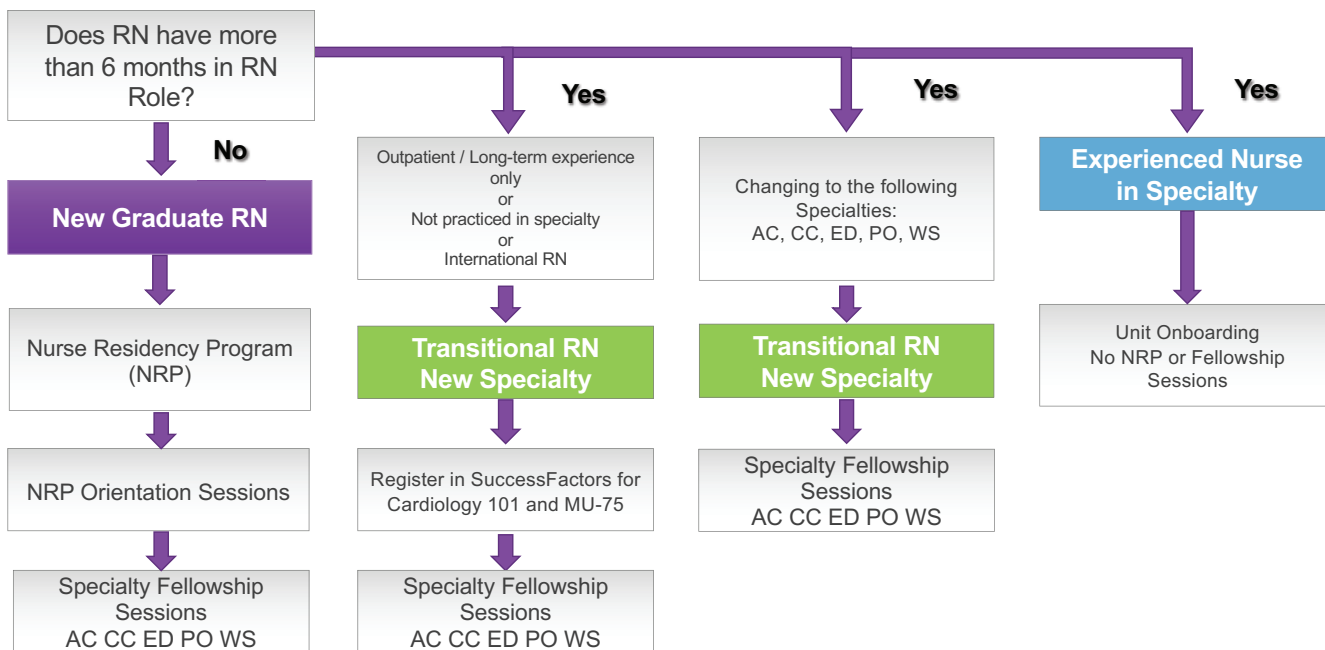


What about performance discussions?

Work with your local HR Partner if you need support addressing performance or behavioral issues. Be sure to discuss ways to manage performance concerns through **ongoing conversations**.

Manager's Guide for Determining Which RN Track is Appropriate for New RN

Nursing Onboarding Pathways



Contact Information

Center for Nursing Excellence: centerfornursingexcellence@wellstar.org

Specialty Fellowship Emails

Acute Care Specialty Fellowship: acfellowship@wellstar.org

Cath Lab Specialty Fellowship: cvfellowship@wellstar.org

Emergency Services Fellowship: emergencyservicesfellowship@wellstar.org

Critical Care Specialty Fellowship: criticalcarefellowship@wellstar.org

Perioperative Specialty Fellowship: periopfellowship@wellstar.org

Women's Services Specialty Fellowship: perinatalfellowship@wellstar.org

Neonatal Specialty Fellowship: perinatalfellowship@wellstar.org

Nurse Residency Program: nurseresidencyprogram@wellstar.org

