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Conference

Rising Together: Development of Nurse Preceptors in a Surgical Intensive Care Unit

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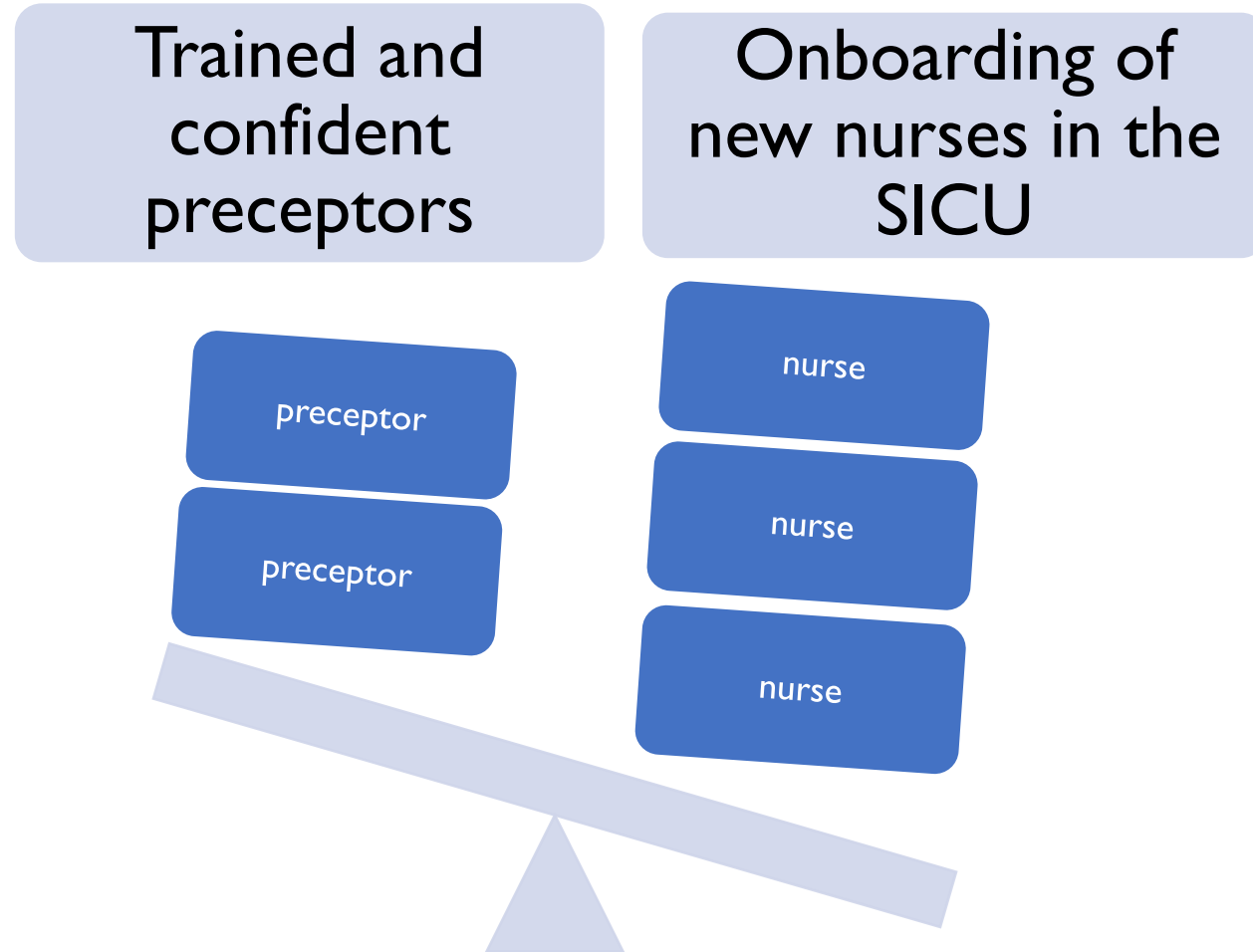
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Introduction

Surgical Intensive Care Unit

-  SICU is 18-bed unit that cares for complex, critically ill adults
-  Specialize in adult polytrauma, abdominal transplant, vascular, ortho/neuro-spine, complex GI surgeries, and more
-  SICU has 62 RN FTEs with ongoing onboarding of new hires that are made up of New Graduate RN's and Experienced Acute Care, IMC and/or ICU RN hires.



Our Aim



Improve the confidence and competence of preceptors in orienting new nurses in the high-pace ICU environment

Formal training and on-going support for nurse preceptors has:

- ✓ Increased new nurse retention
- ✓ Improved new nurse critical thinking skills
- ✓ Improved preceptor confidence and competence

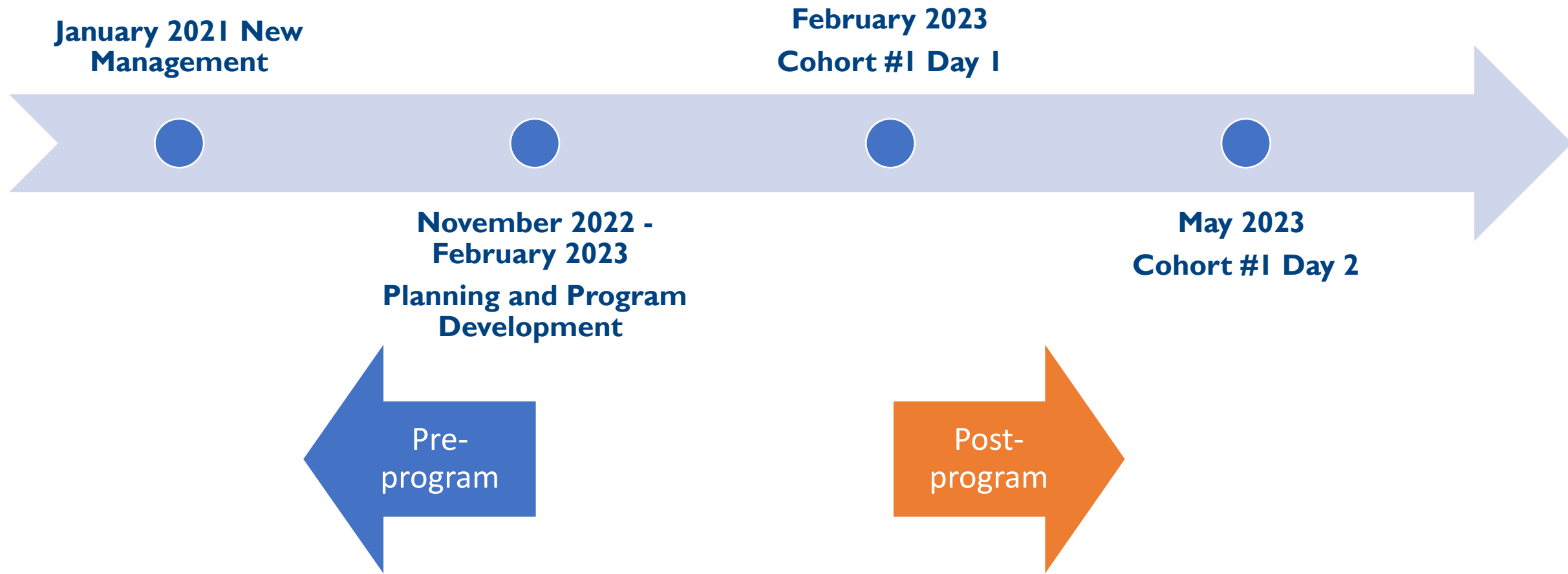
Items to address:

- ✓ Preceptor expectations in the SICU
- ✓ SICU Phased Orientation Process
- ✓ Application to the ICU environment
- ✓ Feedback tools and strategies
- ✓ Preceptor Reflection/Evaluation
- ✓ Teambuilding opportunities

- Theoretical Frameworks
- Group meetings
- Program Content Development
- Program Selection
 - ✓ Criteria: FTE > 30hrs/week, intent to remain in SICU for next year, SICU experience > 1.5 year, in good standing/no discipline
- Logistics



Project Timeline



Program Learning Objectives

By the end of the SICU preceptor development program, the learner will be able to:

1. Identify personal core values in alignment with the Johns Hopkins Nursing Core Values and Professional Practice Model.
2. Determine behaviors and characteristics of an effective and successful preceptor.
3. Discuss the role and expectations of a preceptor in the SICU.
4. Develop feedback skills through scenario-based dyads and discussion.
5. Discuss common teaching principles and applicable tools.
6. Explain the phased orientation process for nurses across various levels of experience in the SICU.
7. Understand behaviors that help build trust and partnership amongst preceptor-orientee teams.
8. State appropriate preceptor resources that are available within the organization.
9. Evaluate and reflect on one's own preceptor competency and skills.

Day One

Program Content

DAY 1

- Teambuilding exercises
- Core Values Exercise
- Trust and Precepting
- What is a Preceptor?
- Phased Orientation Process
- Your First Meeting
- Teaching Strategies and Tools
- Giving and Receiving Feedback



Day #1: Core Values

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- Reflective exercise used to explore, identify, refine and share our collective core values.
- Cultivates practicing with integrity

(Brown, n.d.; Rushton et al., 2021)

WHAT MAKES ME 'ME' 

Read the word list on the following page and circle any that resonate with you.
Group together those that are interrelated, and narrow the list down to 10.

Rank your top 10 values in order.
If you're having a difficult time deciding how to rank them, compare them to each other two at a time and ask yourself, "If I absolutely had to choose one over the other, which would I choose?" Think of situations where the values might come into conflict.

Review your top 5 to make sure you've got them right. Look over your list of top 5 values. Do a gut-check. Is it right? Does it ring true? Does it express something important about who you are on your most fundamental level? If not, go back a step or two and revise until you've got it right.

When you're done, congratulations! You've just identified your core values.

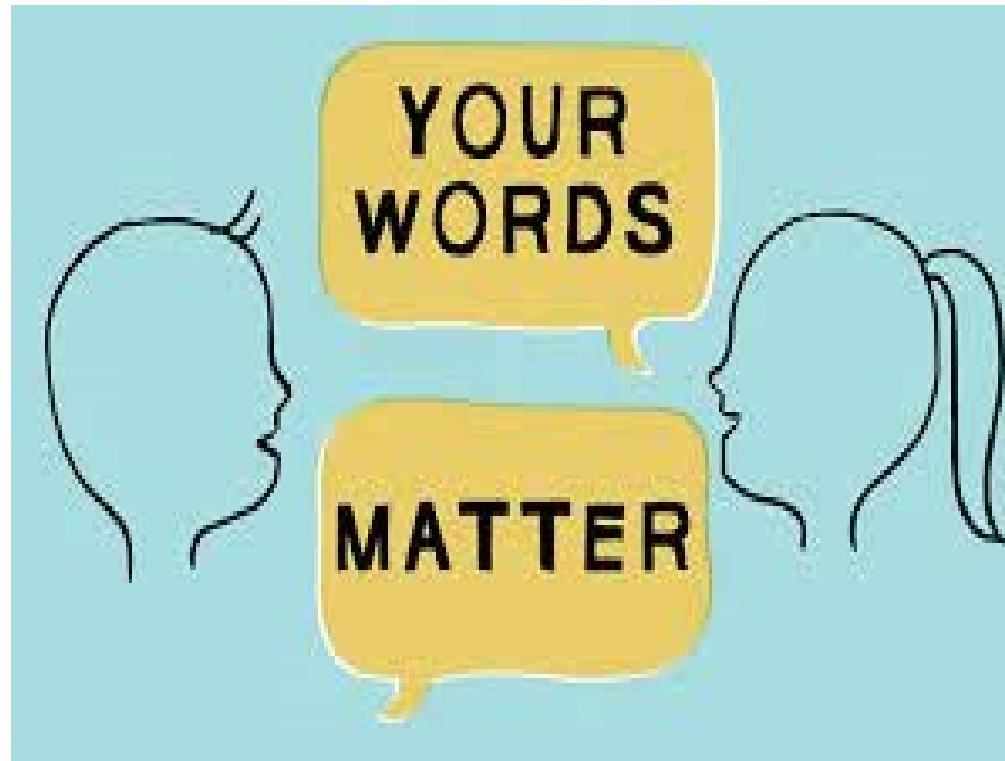
I STAND FOR...

Day #1: Trust and Precepting

What does trust mean?

Foundations of Trust

Characteristics of Preceptor and Orientee



Introduction to "The Three C's"

Types of workplace betrayals

Psychological Safety

Day #1: What is a Preceptor?

What are
you worried
about?

What are you
excited about?

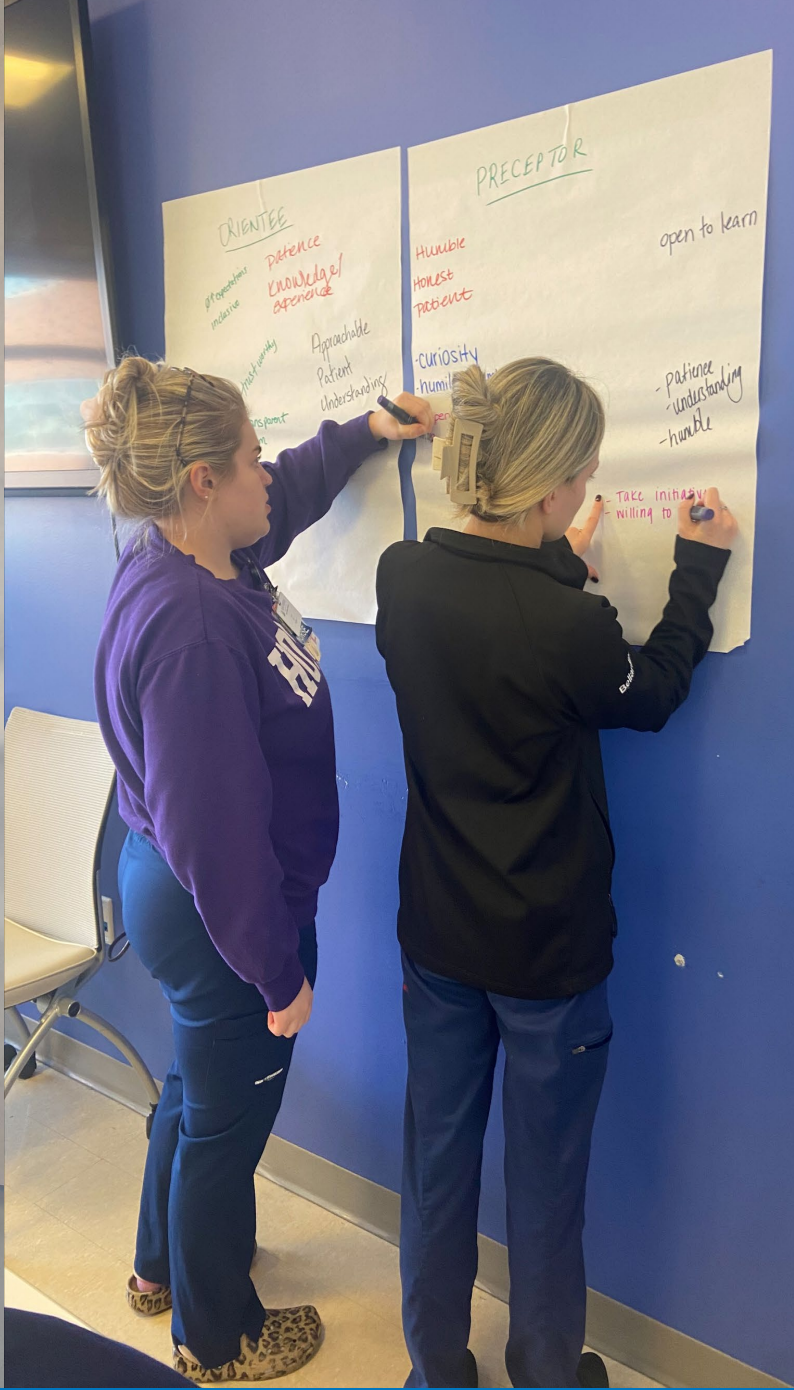
Behaviors I
want to
demonstrate
in preceptors

Behaviors I
don't want to
demonstrate
as a
preceptor

What are you worried about?

not having/ knowing all the answers

- taking feedback personally
- orientate not learning and growing
- being paired with a clashing personality
- not having all the answers
- Being younger/ less experience than my orientee
- if they are not successful
- if I don't know something
- orientee not being successful

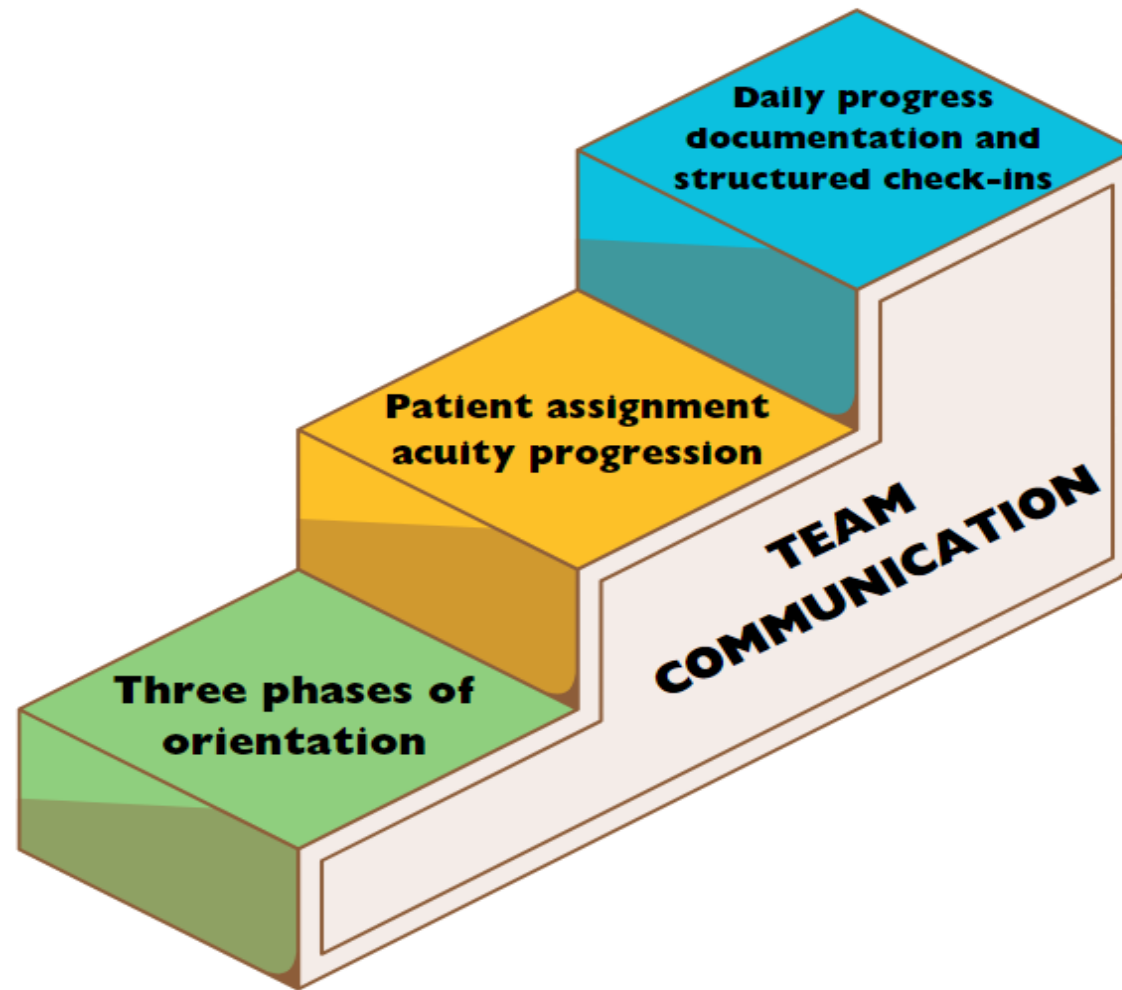


Day #1: Phased Orientation Process

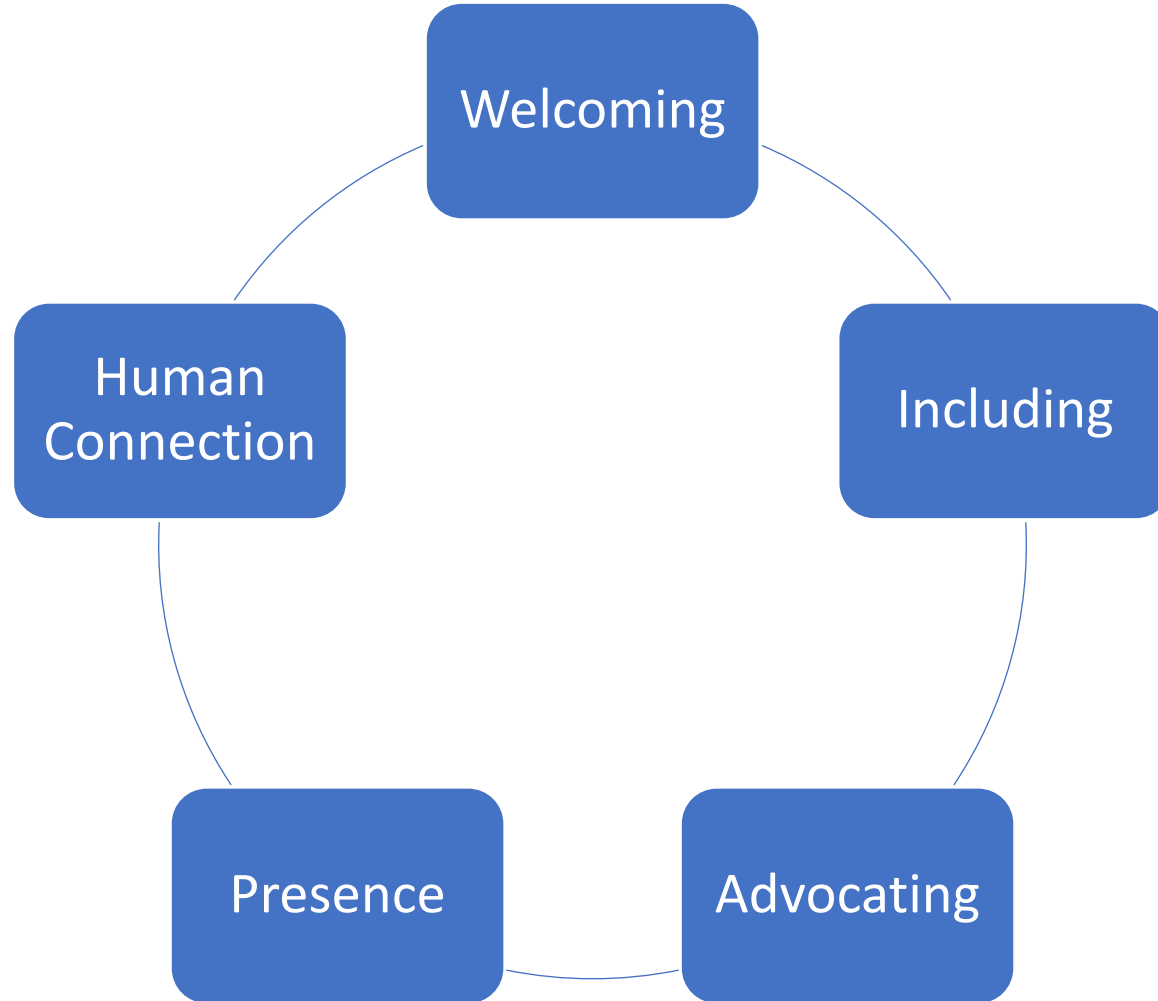
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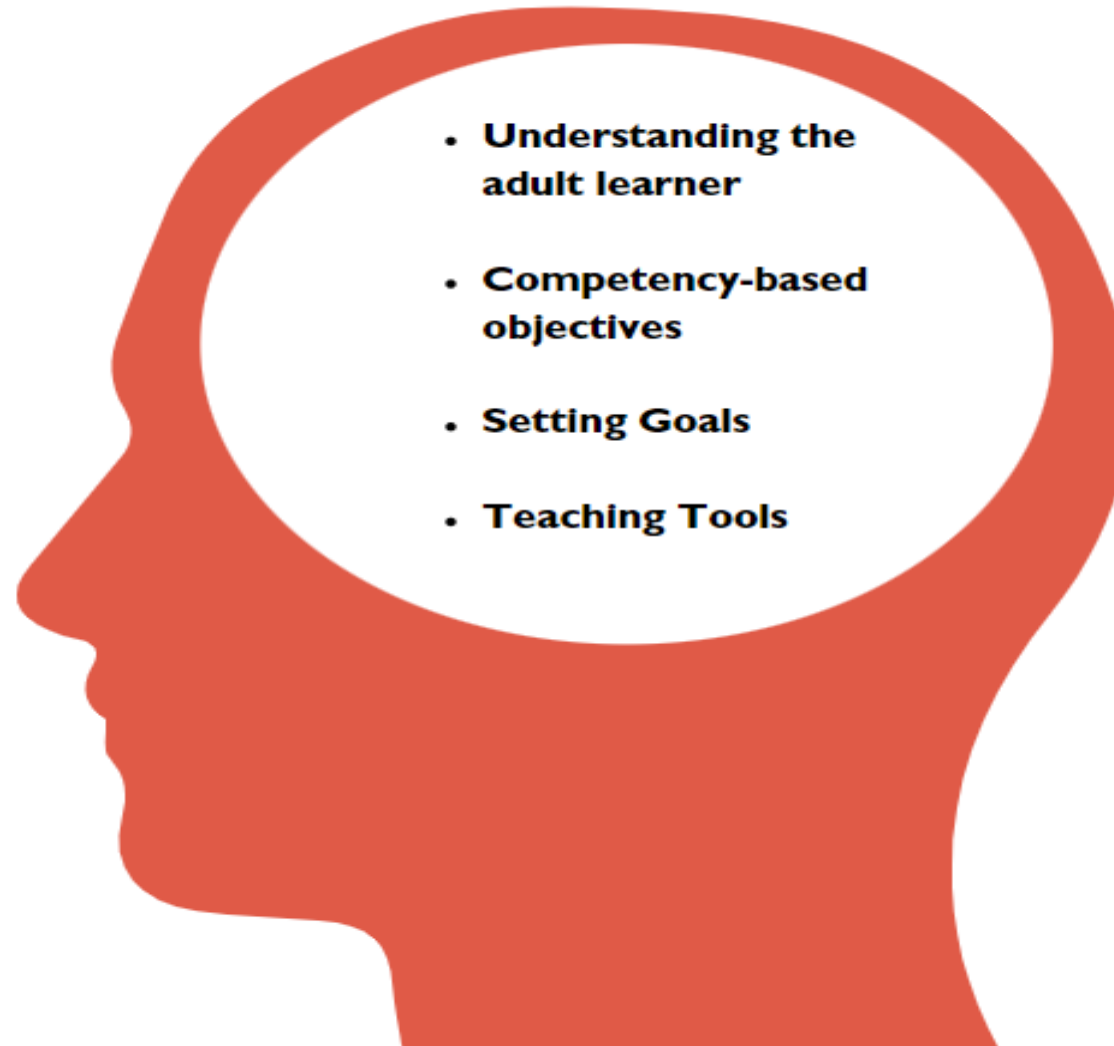


Day #1: Your First Meeting



(Schumacher, 2007)

Day #1: Teaching Strategies and Tools



Day #1: Giving and Receiving Feedback

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Scenario #1:
**Debriefing a
difficult day**

Scenario #2:
**Addressing
poor
performance**



Day Two

Program Content

DAY 2

- Leadership Styles and Personalities
- Follow-up on Trust: The Three C's
- Failed Orientation Process
- Feedback Round II: Setting the Example



16 Personality Types:

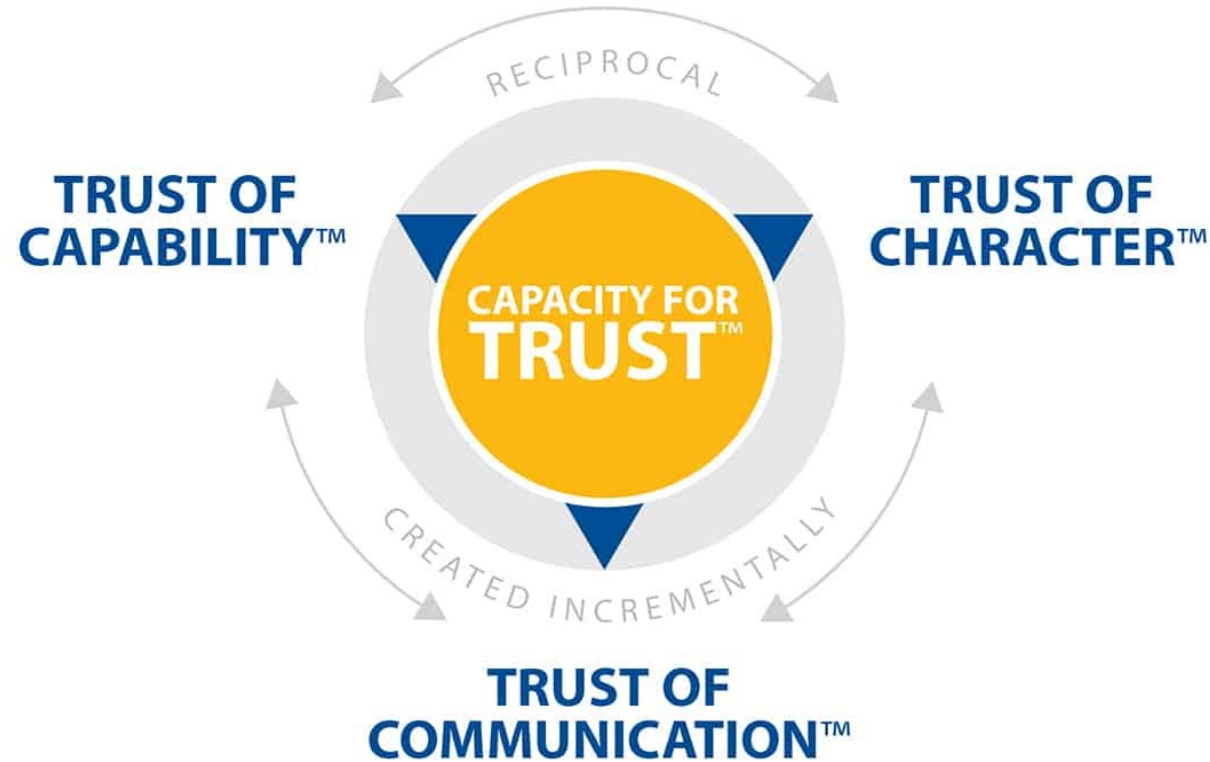
Personality Quiz tells us:

- Strengths of preferences
- Description of your personality type
- Communication and learning style
- Behavior under stress

Quiz helps guide us:

- Understand your leadership development
- Understand the other's unique contributions

Day #2: Follow-up on Trust-The Three Cs



66
99

"Trust is a workplaces' competitive advantage when its present and its Achilles heel when its absent"

(Reina & Reina, 2006)

Day #2: Failed Orientation Process

- Triggers/concerns/safety issues
- Documentation, clear feedback and follow up
- Discussions and check point meetings
- Scheduling Failed Orientation meeting with stakeholders in Nursing Leadership, HR, NR



Day #2: Feedback Round II-Setting the Example

Scenario #1:
**Coaching orientee
through difficult
conversation**

Scenario #2:
Asking for help



Deliverables: Preceptor Projects

SICU Fast Fact Cards

ORTHOSPINE

PSF= POSTERIOR SPINAL FUSION
ACDF= ANTERIOR CERVICAL DECOMPRESSION & FUSION
ALIF= ANTERIOR LUMBAR INTERBODYFUSION
TIF= TRANSFORAMENALINTERBODYFUSION
PLF= POSTEROLATERALINTERBODYFUSION
CORPECTOMY= EXCISION OF A VERTEBRAL BODY
SACRECTOMY= EXCISION OF SACRUM

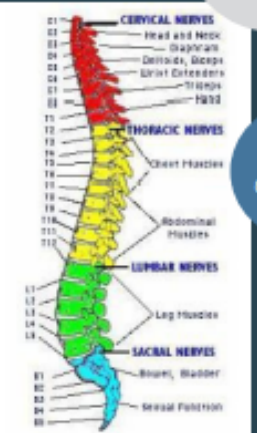
OPIOD TOLERANT **FLUID SEEKING**

CONCOMITANT ISSUES WITH ANXIETY **HYPOTENSIVE**

HYPOTHERMIC **VASODILATED**

FACIAL SCLERAL EDEMA **1-3 DRAINS**

PRONE PRESSURE INJURIES **BLEEDING**



CORUS: ADULT ORTHOPEDIC INPATIENT/FLOOR PAGER

SPINAL ASSESSMENT
 PERFORMED Q1/Q2 AS ORDERED
 BE SURE TO ASSESS ALL SPINAL LEVELS AT & BELOW THE LEVEL OF REPAIR
 COMPARE PT'S STRENGTH IN UPPER EXTREMITIES BY TESTING R & L ARMS AT THE SAME TIME.
 ASSESS LEG STRENGTH 1 LIMB AT A TIME (IT TAKES BOTH OF YOUR ARMS TO TEST ALL LEG MUSCLE GROUPS EFFECTIVELY)
 IT IS BEST TO HAVE THE SICU RESIDENT SEE YOUR INITIAL ASSESSMENT
 COMMUNICATE ANY CHANGES TO THE SICU RESIDENT **IMMEDIATELY**

THE DEVELOPMENT OF A HEMATOMA CAN CAUSE SPINAL CORD COMPRESSION AND PERMANENT PARALYSIS

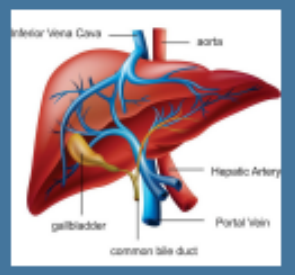
SPECIAL CONSIDERATIONS: DURAMORPH, DURAL TEARS, BLT PRECAUTIONS

EPIC TIP: MAKE SURE SPINAL/SENSORY MOTOR ASSESSMENTS ARE ORDERED DOCUMENT ON THE SPINAL/SENSORY MOTOR FLOWSHEET.

NHO IMMEDIATELY IF YOUR DRAINS SUDDENLY STOP DRAINING

GET PT/OT CONSULT

ORTHOTOPIC LIVER TRANSPLANT (OLT)



QUESTIONS FOR THE OR:
 WHAT IS THE IV ACCESS?
PA? CORDIS? CVP?
 ARE THEY INTUBATED?
 ARE THEY ON ANY DRIPS?

FREQUENT LABS: PT/INR, APTT, TEG, HBG/NA/K+/GLU/, LAC, CBC, CMP

PRE-OP CONSIDERATIONS
 ETIOLOGY OF LIVER FAILURE
 MELD SCORE
 RISK FACTORS/DISPO
 SEVERITY OF SYMPTOMS
 FUNCTIONAL STATUS
 PSYCHOSOCIAL SUPPORT

*"The man who is prepared has his battle half-fought."
 -Cervantes*

LIVER DUPLEX ASAP!! (<1HR)

POST OP COMPLICATIONS
 BILE LEAK (MONITOR JP) • GRAFT DYSFUNCTION (CHECK LABS) • BLEEDING
 FLUID/ELECTROLYTE IMBALANCE • VASCULAR THROMBOSIS • INFECTION
 REJECTION • HYPER/HYPO GLYCEMIA
 ABDOMINAL COMPARTMENT SYNDROME (ACS) • HEMODYNAMIC INSTABILITY • INSULIN GTT + Q1 GLUCOSE CHECKS • PAIN
 AGITATION • DELIRIUM • CVVD • RESPIRATORY SUPPORT • DRUG TOXICITY

LABEL JP DRAINS RIGHT TO LEFT
 #1 RUQ: SUPERIOR TO LIVER
 #2 RUQ: NEXT TO BILIARY ANASTOMOSIS
 #3 LUQ: BELOW OF INTERIOR TO LIVER
 EMPTY Q4

LAB FINDINGS

↑ BILI	↓ ALBUMIN
↑ INR	↓ PLATELETS
↑ ALT/AST	↓ HEMOGLOBIN
↑ ALK PHOS	↓ WBC
↑ AMMONIA	↓ GLUCOSE

SECURE CHAT/PHONE: FELLOW ON CALL CORUS:TRANSPLANT SERVICE PAGER

Infinite Legacy
 Making Life Last Longer

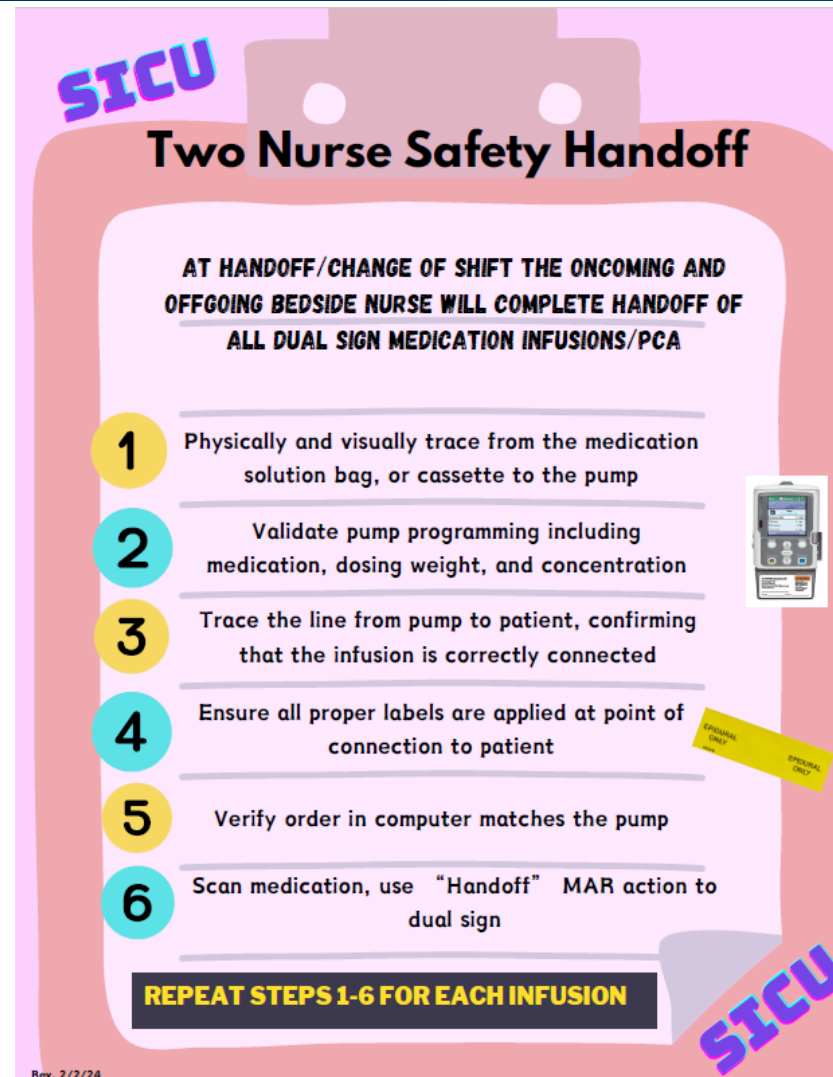
Deliverables: Preceptor Projects

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SICU Safety Handoff



SICU

Two Nurse Safety Handoff

AT HANDOFF/CHANGE OF SHIFT THE ONCOMING AND OFFGOING BEDSIDE NURSE WILL COMPLETE HANDOFF OF ALL DUAL SIGN MEDICATION INFUSIONS/PCA

- 1 Physically and visually trace from the medication solution bag, or cassette to the pump
- 2 Validate pump programming including medication, dosing weight, and concentration
- 3 Trace the line from pump to patient, confirming that the infusion is correctly connected
- 4 Ensure all proper labels are applied at point of connection to patient
- 5 Verify order in computer matches the pump
- 6 Scan medication, use "Handoff" MAR action to dual sign

REPEAT STEPS 1-6 FOR EACH INFUSION

SICU

Rev. 2/2/24

Additional visual elements: A small image of a medication pump is shown next to step 2. A yellow label with 'EPIDURAL ONLY' is shown next to step 4.

Program Survey Development

- Adapted from validated preceptors' orientation competence instrument (POCI) using 5-point Likert Scale
- Survey Contents: (16 Questions total)
 - Demographic questions (2)
 - Comfortability (Q1, Q2, Q10, Q12)
 - Familiarity with preceptor roles (Q4)
 - Confidence in ICU skills (Q3)
 - Competence in preceptor roles (Q6, Q7, Q8, Q9, Q14, Q13)
 - Tools and resources (Q5, Q11)

Pre

- Prior to Program start

Post #1

- After Day 2 of program (3 months after Day 1)

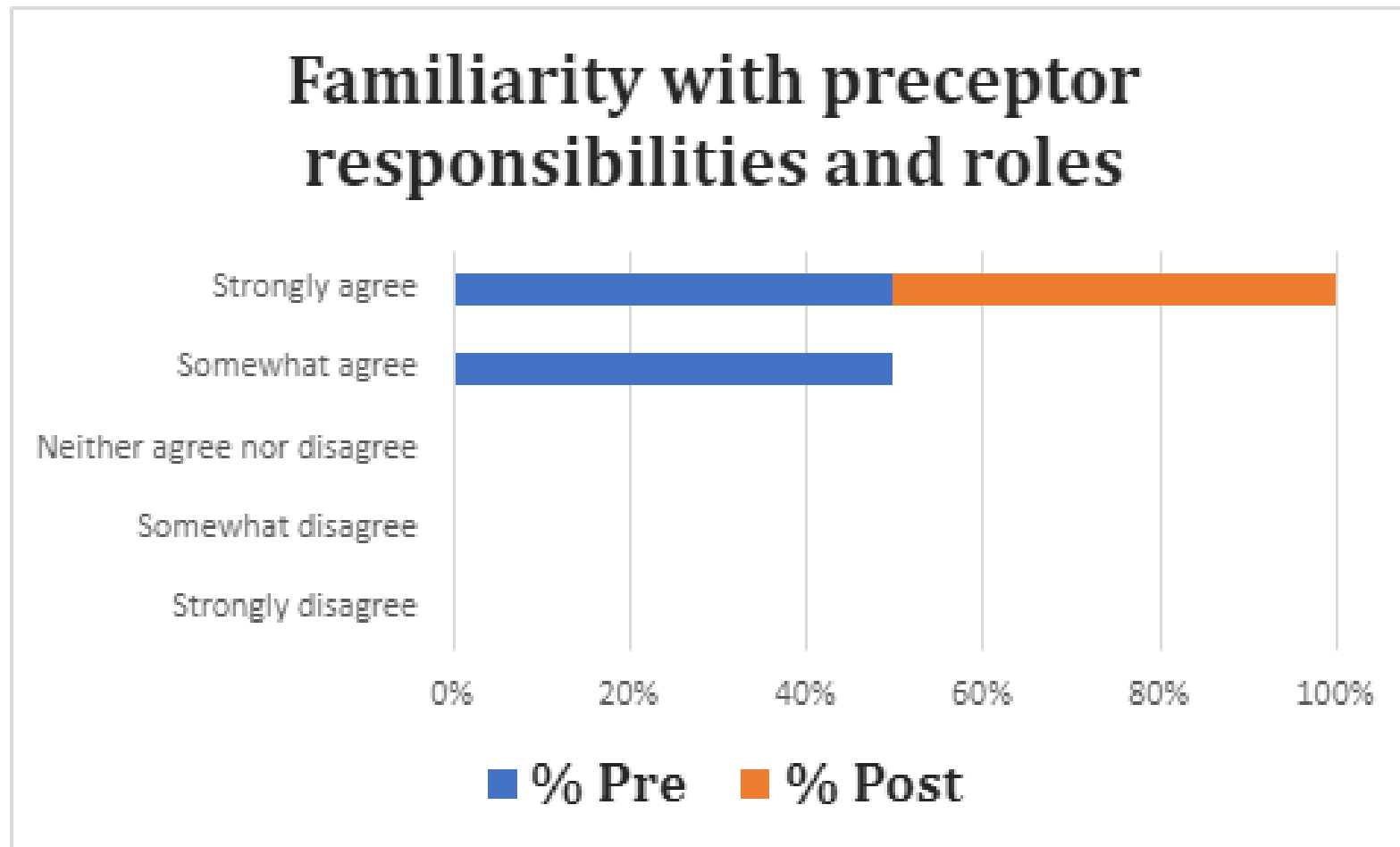
Post #2

- After 6 months

Survey Results

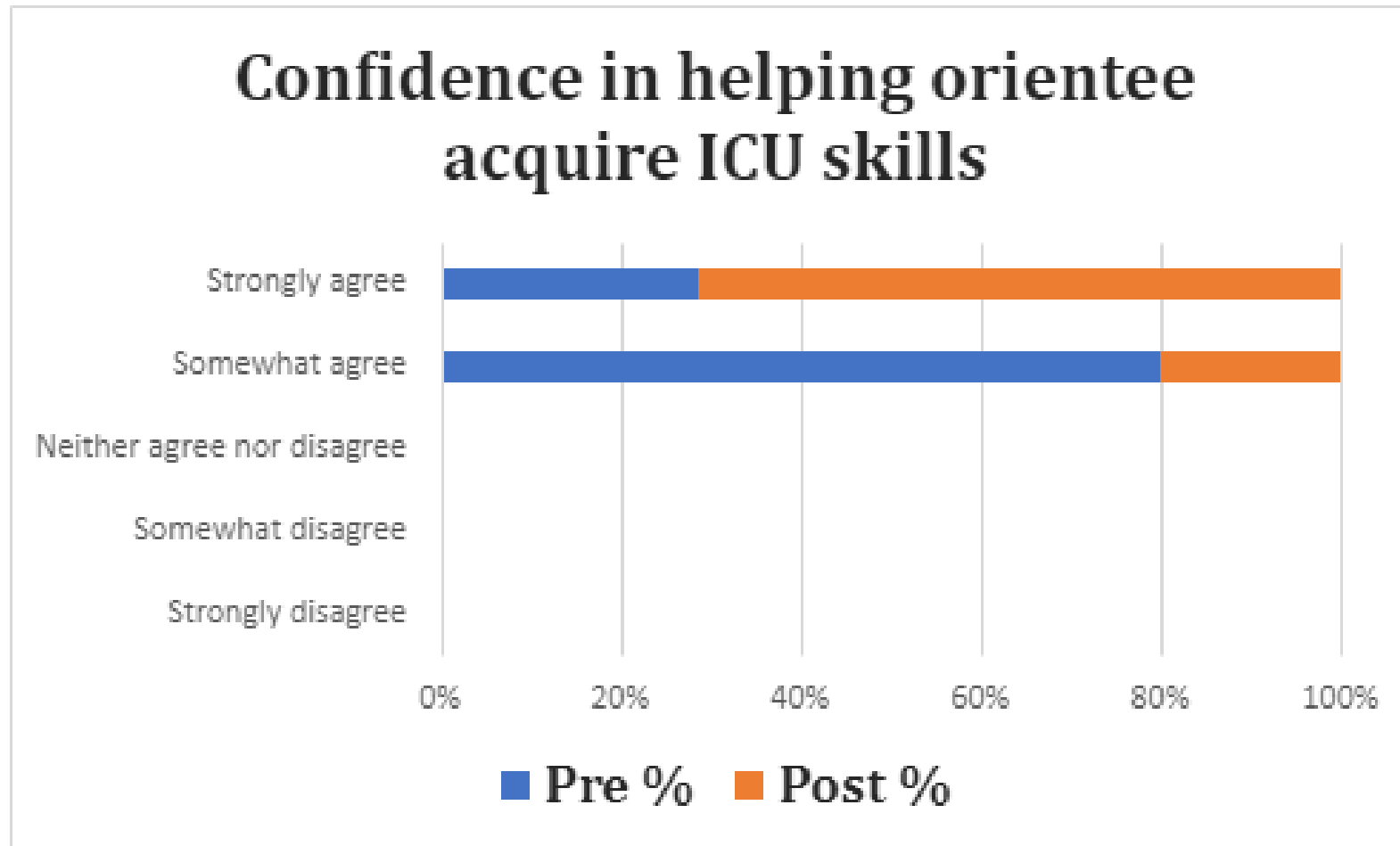
Survey Question #4

I am familiar with preceptor responsibilities and characteristics.



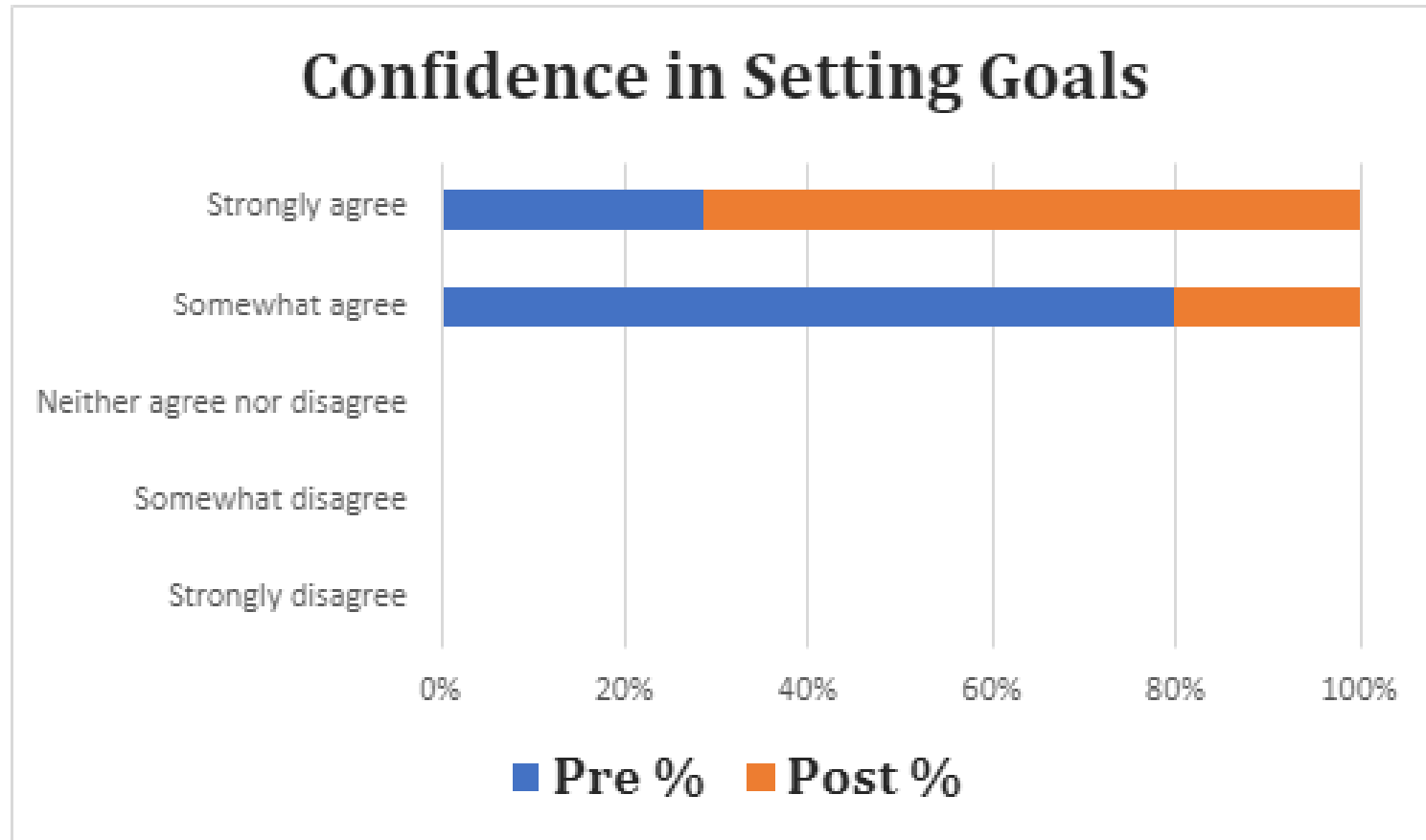
Survey Question #6

I am confident that I can help an orientee to acquire necessary ICU nursing skills and knowledge on common procedures and hospital policies that are utilized in the SICU.



Survey Question #7

I feel confident that I can guide the orientee in setting learning goals for the orientation/educational period.

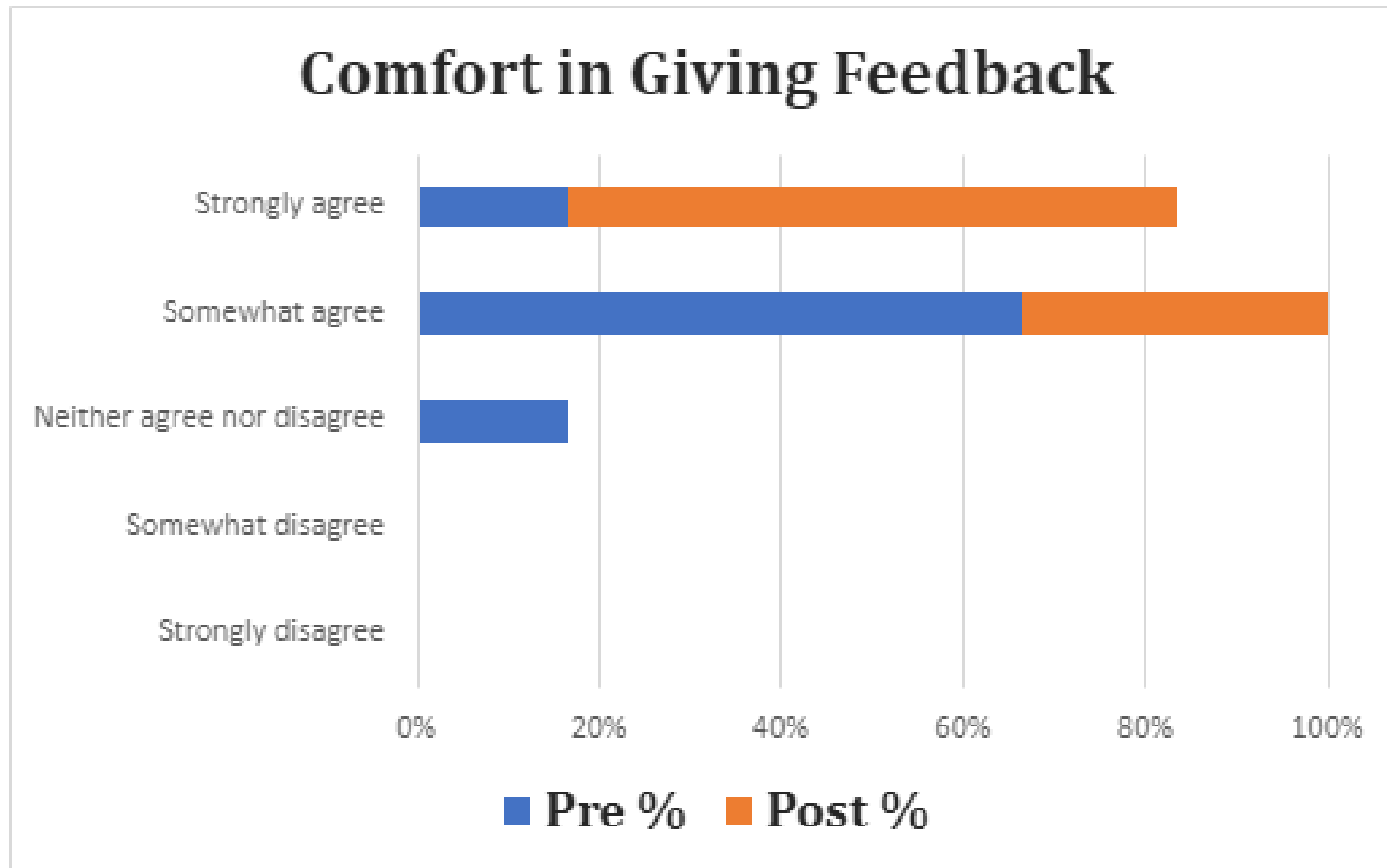


Survey Question #10

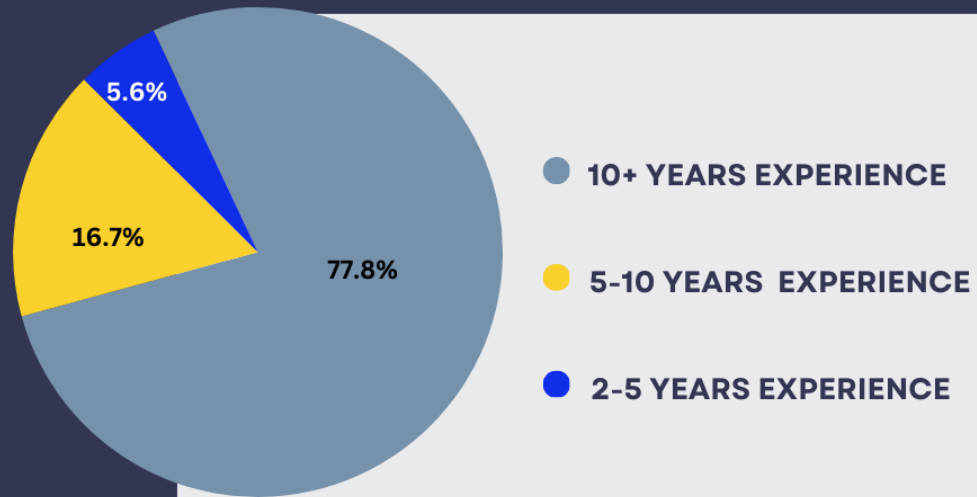
I feel comfortable giving feedback to my orientee on their performance to encourage professional development.

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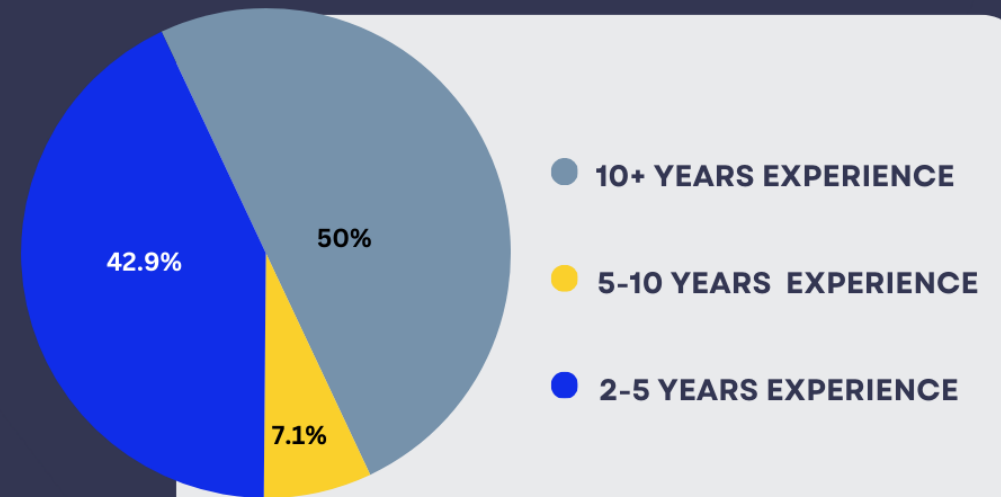
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SICU PRECEPTORS (PRE)

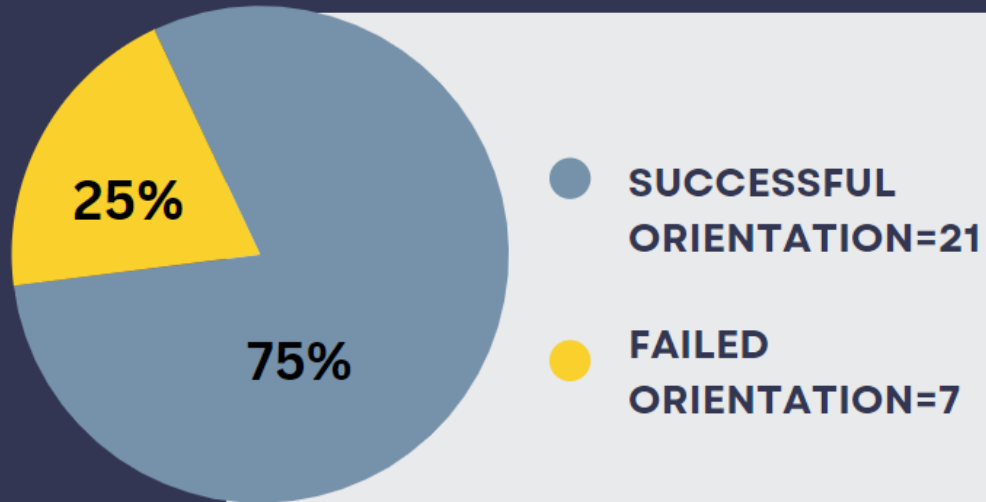


SICU PRECEPTORS (POST)



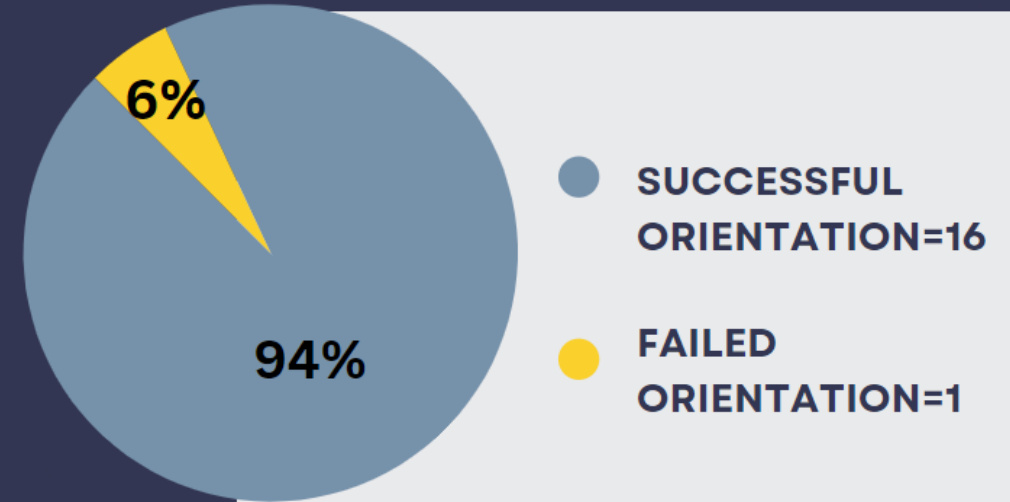
Orientation Findings/Outcomes

FAILED ORIENTATIONS (PRE)

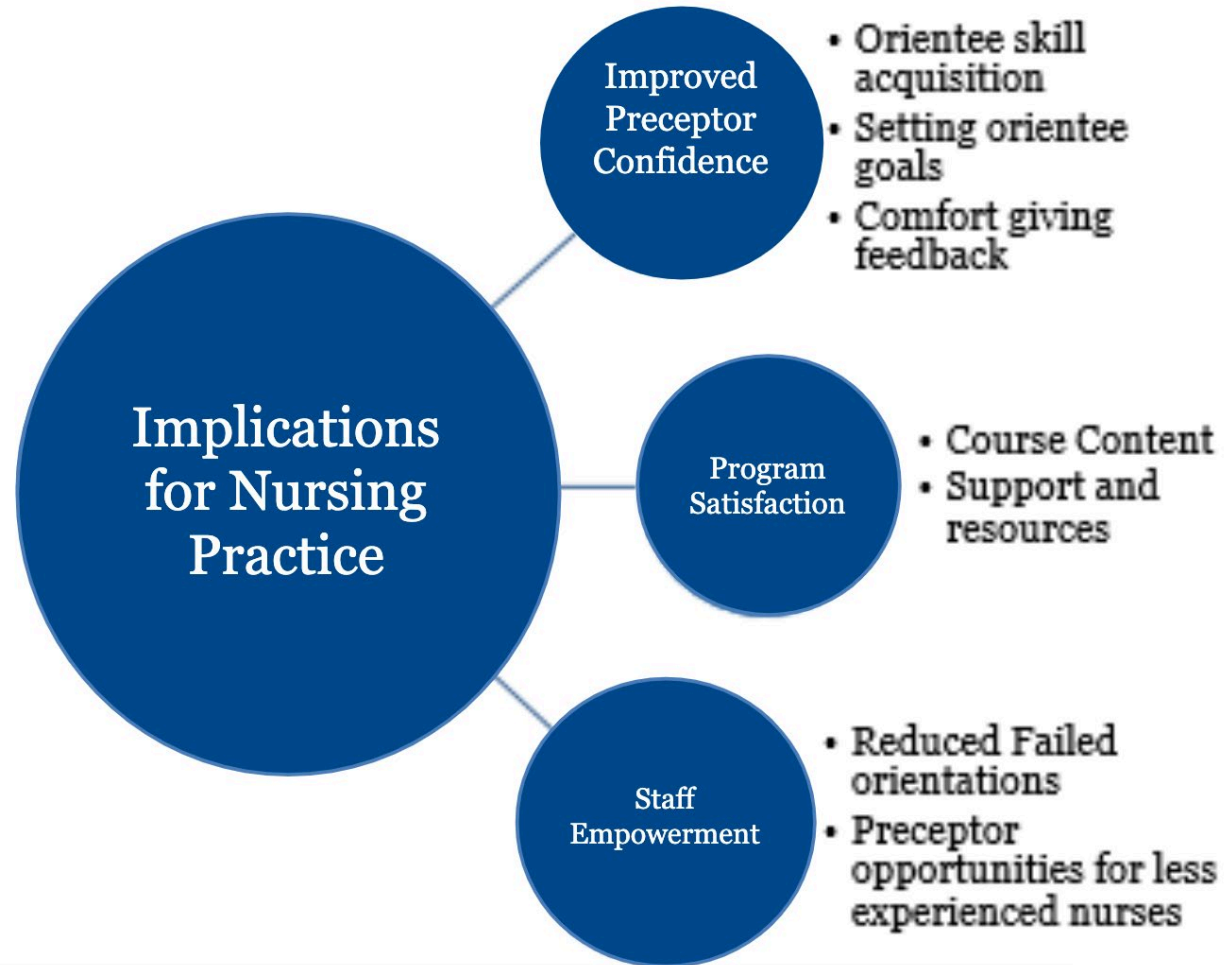


July 2021 to January 2023

FAILED ORIENTATIONS (POST)



February 2023 to February 2024



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Questions?