

Southlake Regional Health Centre Critical Care Course Strategies to Support Successful Transition from Theory to Practice August 13, 2020

Background

Prior to 2013, Southlake Regional Health Centre (Southlake) sponsored staff to attend a critical care course offered by George Brown, Humber or Seneca Colleges. In 2013 Southlake developed an in house Critical Care course that was facilitated by various Southlake Nurse Educators.

The benefits of implementing a Southlake in house course were outlined in a poster presentation (Appendix A) and included the following:

- Cost savings associated with external tuition and travel fees.
- Reduced travel time. Southlake staff reported that they would not have been able to attend the course had it been offered off site in the downtown Toronto locations. This was related to personal and family commitments.
- Opportunity to learn in a familiar environment as classes and clinical occur at Southlake. By providing the program in their home organization the students were familiar with the environment and process, allowing them to focus on critical care content.
- Professional growth opportunities for staff.
- Recruitment strategy for critical care staff.

Appendix A - An evaluation of Southlake's in house critical care course



In 2017 a business cases analysis, Appendix B, supported the opportunity to recruit a full time Critical Care/Corporate Nurse Educator at which time Deborah Butt, Critical Care/Corporate Nurse Educator assumed this position.

Appendix B – Critical Care Business Case 2017





At the onset of the course all students receive the Course Curriculum as well as the Standards for Critical Care Nursing in Ontario (Appendix C) and the Canadian Association of Critical Care Nurses Standards for Critical Care Nursing Practice (Appendix D) which outlines clear expectations for critical care nursing standards.

Appendix C – Standards for Critical Care Nursing



Appendix D – Canadian Association of Critical Care Nurses Standards for Critical Care Nursing Practice



Successful completion for the course is based on achieving a minimum grade of 75% on all three of the interim tests. A supplemental test is offered for each of the three tests if the candidate is not successful on the first attempt. In addition the candidate must obtain a passing clinical evaluation from the Critical Care Nurse Educator based on feedback from the unit nurse education, staff and clinical manager and director.

Current State:

The upcoming September 2020 intake will be the 15th in house course to be offered. An evaluation of the program includes the following statistics:

- Graduates to date = 111 Southlake nurses
- Success rate = 94%
- Staff complete a course evaluation (Appendix E) upon completion. To date the feedback is very positive and staff report feeling prepared to assume a position in the critical care unit post-graduation.

Appendix E – Southlake Critical Care Course Evaluation





- Voluntary withdrawals from course = 5
 - Reasons for voluntary withdrawal from the course include:
 - At risk of failing course, therefore chose to withdraw and not write supplemental exam
 - o Course harder than expected
 - o Change in career path
 - Competing family priorities
- Unsuccessful at achieving a passing grade on the supplemental exam = 2

Strategies to Increase Support

• The Critical Care/Corporate Nurse Educator sent a six-month post course evaluation via survey monkey for feedback and opportunities to enhance course content and practicum please refer to Appendix F.

Appendix F – Critical Care Course 6 Month Post Evaluation Presentation



The following strategies will be implemented to increase the success rate of nurses completing the Southlake in house Critical Care course:

- The Critical Care Nurse Educator will participate on the interview panels for all Critical Care sponsorship positions.
- The Critical Care sponsorship interviews will include behavioural based questions, technical questions as well as new simulation based clinical scenario in order to identify the knowledge base of the candidate and ability to transfer knowledge in a simulated clinical setting.
- Throughout the course and particularly during final evaluations, the Critical Care/Corporate Nurse Educator strongly advises students to review the course content 6 and 12 months following completion of the course to reinforce theory and consolidate their knowledge.
- The Critical Care/Corporate Nurse Educator developed a standardized Critical Care Competency Checklists for all critical care units referenced as Appendix G. The competency checklist will be provided to each nurse during unit orientation and reviewed by each of the unit educators to assess and guide on-going educational needs.



Appendix G – Critical Care Competency Based Skills Checklist



- The Critical Care/Corporate Nurse Educator will verify the skills competency check list and sign off on the document at the start of the employee's orientation with regular review throughout the orientation period to the unit following successful completion of the critical care course.
- The Critical Care Nurse Educator will review the competency check during orientation to the unit as well as routinely ongoing until complete in order to assist in identifying appropriate learning opportunities on the unit.
- The Critical Care/Corporate Nurse Educator will be available during the clinical practicum and orientation shifts to assist in offering refresher education including more didactic and simulation exercises to support transition of course knowledge to the clinical situation.
- The unit manager will complete a 30 day check in with the employee using a template prepared by Human Resources.
- The staff member will be buddied for a minimum of eight shifts of orientation with a Critical Care nurse. The Staff member with be buddied with one or two consistent Critical Care nurses as schedules allow. The Critical Care/Corporate Nurse Educator and the Unit Nurse Educator will oversee the Employee using the skills competency checklist to guide the experience.
- The Unit Manager and Unit Educator will review and sign off on the skills competency check list at the start of unit orientation and at the end of the 8 shifts of orientation. At this time, a thorough review of the staff member's accomplishments and any gaps are identified on the checklist.
- The Unit Manager and Unit Educator will continue to review the skills competency check list with a review at three months to ensure the staff member is progressing well and identifying any required additional learning opportunities via tailoring patient assignments.
- Additional orientation shifts beyond the minimum eights shifts will be reviewed on a case by case basis. An additional four orientation shifts will be offered to the staff member should they require to attain a satisfactory level of completion of the skills competency checklist. The need to provide additional orientation shifts for a total of twelve shifts will be vetted with the Unit Manager in discussion with Unit Nurse Educator and staff member.
- Nurses who experience difficulty transitioning theoretical knowledge to the practical setting will be placed on a learning plan. A formal meeting with the Employee, Unit Manager, Unit Educator and the Critical Care/Corporate Nurse Educator will occur and the development of a formal performance and learning plan will be required using the Southlake Employee Performance Development template, see Appendix I
- If more than 12 orientation shifts are required or requested by the staff member a formal meeting with the Employee, Unit Manager and Unit Educator will occur and the development of a formal performance and learning plan is required using the Southlake Employee Performance Development template, see Appendix H.



Appendix H – Southlake Employee Performance Development Plan



Reference can be made to the Southlake policy HC010 Clinical Learning and Performance Development Plans – Guidelines for Management and Identification of and Transfer of Information, see Appendix I.

Appendix I - Southlake policy HC010 Clinical Learning and Performance Development Plans – Guidelines for Management and Identification of and Transfer of Information



A formal mentorship may be considered if all skills competencies are not yet achieved or should the staff member request more than the 12 orientation shifts. The performance development plan must specify the number of additional orientation shifts requested under the formal mentorship as per Article 9.08 (c) of the Hospital Central Collective Agreement which highlights the following:

- 1. The mentorship is between the two nurses which results in the professional growth and development of an individual practitioner to maximize her/his clinical practice.
- 2. The relationship is time limited and focused on goal achievement.
- 3. The expectations of the mentor and mentee are clearly outlined in the learning plan

Future Consideration

The minimum number of hours required to apply into the Critical Care sponsorship positions is 1950 hours. Consideration to increase the minimum number of hours required to apply to a sponsorship position may be sought in future sponsorship positions should the above strategies not prove to be successful

Respectfully submitted by Lorrie Reynolds, Director Patient Experience August 2020