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Integrated Onboarding: Synchronous Teaching to Prepare Learners for Successful Orientation

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Purpose

Inpatient nursing orientation required examination to attempt to bridge the gap between clinical skills and electronic medical record (EMR) documentation to better prepare nurses for the clinical setting. The solution to this problem was to develop an Integrated Onboarding Program. Integrated Onboarding is the synchronous teaching of both clinical and electronic medical record EMR skills that are key to a successful transition to practice for the newly hired nurses.

Background

Nursing Professional Development (NPD) practitioners partnered with Software Training Specialist (STS) to create an innovative, interactive, integrated nursing onboarding education plan. The goal of NPD practitioners is to prepare nurses for all aspects of their role as a clinical nurse through an engaging onboarding experience. There was a disconnect identified between the clinical nursing orientation and EMR education. To eliminate this gap the team redesigned two separate curriculums into one cohesive plan.

Method

Members of each team from the NPD and the STS attended planning meetings throughout the redesign in order to ensure a cohesive transition into the new Integrated Program. This included the following:

- Collaborative meetings to determine opportunities to team teach curriculum
- Development of curriculum that combines EMR with clinical education
- Pilot of newly developed curriculum
- Improvements made from experiences and learner evaluations/feedback
- Launch date and continuous improvements

This method integrated the PDS and STS teams presenting together in the classroom. For example, during intravenous (IV) insertion nurses learn the hospital policy, practice proper insertion technique with return demonstration, administer a medication, and removal. This teaching method simulates clinical workflow in real time which helps nurses retain clinical knowledge and electronic documentation.

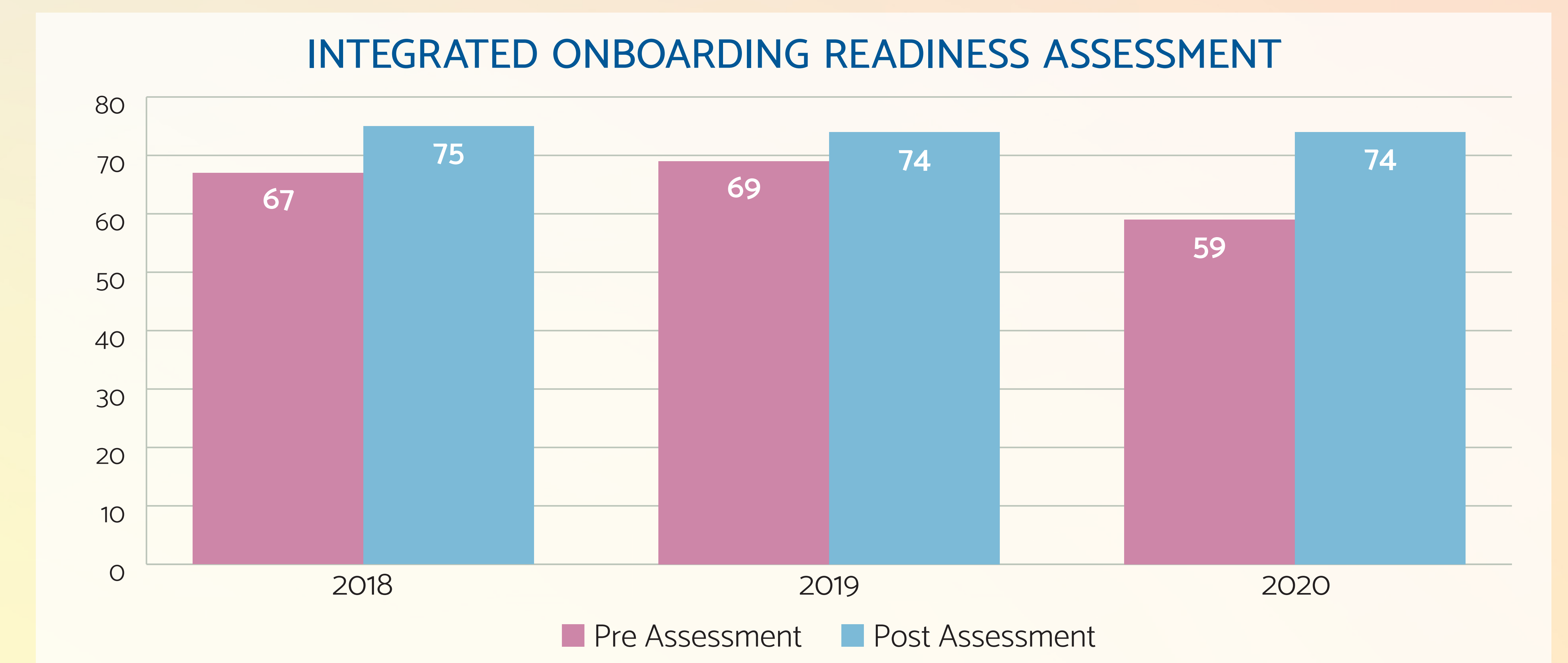
Findings

The NPD and STS teams created a pre and post assessment of 20 clinical readiness skills. The assessment is completed via QR code accessible from the learner's phone. By comparing pre and post assessment scores we were able to quantify how the onboarding process affects the learners' confidence and comfort in essential areas. In late 2020 nurses reported a total readiness of 74% which is a 15% improvement from the pre-assessment.

Implications

An integrated onboarding allows for education to be continuously updated to align with the rapidly changing evidence-based policies and procedures in the clinical setting. An example of this efficiency and versatility is how a new suicide screening tool was easily implemented in integrated onboarding with the use of both clinical education, hands on training, and EMR documentation. This was accomplished to coincide with the hospital go live date.

This Integrated Onboarding was first instituted in 2018 at a large Magnet® Health Network. Since the beginning four smaller community hospitals have joined the health network. These successful implementations prove that an integrated onboarding can be achieved no matter the hospital size.



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