Multi-Hospital Standardized Orientation for Float Pool Staff Competency

Michelle Reigard RN, CNOR
Lehigh Valley Health Network, Michelle_D.Reigard@lvhn.org

Follow this and additional works at: http://scholarlyworks.lvhn.org/patient-care-services-nursing

Part of the Nursing Commons

Published In/Presented At

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.
Multi-Hospital Standardized Orientation for Float Pool Staff Competency
Perioperative Services
Lehigh Valley Health Network, Allentown, Pennsylvania

With the signing of the 2010 Affordable Care Act, operating rooms across the nation are challenged to decrease operational cost while increasing quality and optimal surgical outcomes for survival.

PROBLEM:
Perioperative services at each campus of a Community based, Academic, Magnet designated network operated solely from each other.
• Each campus hired staff at 100% capacity to meet their individualized schedule needs.
• Staff oriented only to hired campus.
• Staff furloughed on low volume surgical days.
• Due to different workflow and processes, staff not clinically competent to rotate to other campuses to meet the constant fluctuation in staffing needs.

CHALLENGES:
• Structural differences at each campus made standardization of processes and workflow difficult.
• Physician’s resistance with standardization of equipment and supplies.
• Staffs apprehension of traveling to different campuses.

INITIATIVES:
Implement a perioperative standardized orientation program across a multi-campus hospital network.
• Standardized workflow and processes at all campuses.
• Standardized equipment and supplies at all campuses.
• Standardized validation forms and competency checklist for all perioperative roles.
• Oriented staff to all campuses.

PROCESS IMPROVEMENT:
• Decreased operational cost in staffing, equipment and supplies.
• Increased efficiency and workflow which enhanced process improvement throughout the network.
• Decreased furloughing staff on low volume days which increased employee satisfaction.
• Increased staff competency to rotate to another campuses to help meet staffing needs.