

Pediatrics Training Program

Key Guidelines:

- “One KP” training for all Pediatric nurses
- Incorporates **Caring Science, HeartMath, TeamSTEPS, and HRO** communication tools and **KP’s Solutions for Patient Safety Program** components into the expectations of practice and care at the bedside
- Promotes decentralized training

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In Collaboration with NCAL Patient Care Services, Practice Excellence & Care Delivery Innovation

Overview

This program uses the Children’s Hospital Association Curriculum for nurses new to the Pediatrics Specialty.

The Children’s Hospital Association (CHA) content is offered via online interactive modules, complemented with live interactive sessions to build on the content. The modules provide a foundation for novice nurses inexperienced in Pediatric nursing to effectively care for pediatric patients using quality evidence-based practices and professional standards of care. The curriculum offers CE hours and includes case scenarios, practice activities, and tests. It is the ideal didactic foundation for a blended learning program including: workshops, simulations, critical thinking discussion groups, and preceptorship. Some modules include:

- Congenital Heart Disease: An Overview
- Congenital Heart Disease: Acyanotic Defects
- Congenital Heart Disease: Cyanotic Defects
- Pulmonary Arterial Hypertension
- Basic Principles of Oxygen Therapy, Specialty Gases and Noninvasive Ventilation
- Introduction to Arterial Blood Gas Interpretation
- Understanding Abnormal Blood Gases
- Status Asthmaticus
- Hemodialysis
- Diabetic Ketoacidosis
- Diabetes Insipidus/SIADH
- Pediatric Toxicology Exposure
- Pediatric Spinal Column/Cord Injuries
- Pediatric Orthopedics

On Hire

Hiring Manager shares expectation that the training schedule will require a minimum of 32-40hrs/week. Completion of the program is competency based and typically 14-16 weeks. Orientation timeline may be extended as needed. Manager will confirm that new employee has completed:

- BLS (Basic Life Support)
- *PALS (Pediatric Advanced Life Support) **To be completed in the program if employee does not have on hire*



*Standardized approach that uses a blended learning model for new staff nurses who are hired into training positions with no previous **pediatric** experience*

Objectives

1. Provide the NCAL medical centers with a standardized approach that uses blended learning for inexperienced staff nurses who are hired into training positions with no previous Pediatric nursing experience
2. Outline the use of the didactic curriculum and compliment with coordinating critical thinking exercises, simulation training, skill development and clinical assignments
3. Provide a comprehensive program outline to help the new pediatric nurse to integrate into the pediatric environment as a member of the nursing care team both clinically and interpersonally
4. Ensure that the inclusion of Caring Science, Care Experience and Equity Inclusion, and Diversity behaviors are nurtured throughout the program and embedded into practice at the bedside from the start
5. Deliver curriculum that will support the new Pediatric nurse to assess and care for children based on the diverse patient population served in the Pediatric unit using evidence-based practices
6. Demonstrate examples of application of knowledge, skill and competency for special procedures conducted within the Pediatric unit
7. Complete module objectives found within the CHA curriculum

Roles and Responsibilities

RN Resident or Fellow:

- “Owns” success in Program, including all Orientation Documents
- Completes all didactic and simulation sessions and patient care assignments as planned by On-Site Coordinator and Clinical Preceptor
- Completes “KP NCAL Pediatric Pathway” Document
- Completes Association of Pediatric Hematology/Oncology Nurses (APHON) Pediatric Chemotherapy and Biotherapy Provider Program
- Completes Culminating Project & Presentation

Unit Preceptor:

- Must complete KP approved preceptor training
- Preceptor Training Includes Mosby’s Health Stream Module and In-Person Component
- Reviews “KP NCAL Pediatric Pathway” Document
- Reviews and incorporates orders, protocols, workflows, and equipment as part of orientation. Demonstrates use of the Clinical Library as primary source for evidence-based practice. *Note: For some medical centers, this may be a change in how the preceptor currently precepts*

*Orientee completes **APHON** within the program*

Preceptors are the key to this program’s success and must complete approved preceptor training

Roles and Responsibilities Continued

Program Facilitator (Onsite):

- Oversees and guides the implementation of the CHA curriculum within the blended learning orientation and training program
- Formally meets regularly with RN Resident/Fellow and manager to ensure the RN is progressing in his/her orientation and able to apply the knowledge from the modules to the clinical skills and experience. This conference is documented on the ““KP NCAL Pediatric Pathway” Document
- Meets regularly with preceptor, shares communication expectations, and offers mentorship
- This person can be an educator, CNS, Nurse Manager, ANM, and/or designee

Manager:

- Collaborates with local service line director to ensure facility readiness for the program
- Assigns a primary and secondary preceptor to the RN Fellow and ensures the preceptor’s patient assignment supports a learning environment
- **Joins regular conference sessions with RN Fellow, preceptor, and program facilitator** to ensure RN is progressing through their orientation and to determine if any issues have surfaced that require operational interventions
- Supports preceptor professional development and identifies and supports mentorship opportunities

Manager supports a learning environment and ensures orientee integration as a member of the nursing care team both clinically and interpersonally

*CHA Didactic:
Available through KPNC Health Stream Learning Center for easy assignment and monitoring for completion*

Access to CHA content and Health Stream

The CHA curriculum has been purchased by Regional PCS Leadership for staff nurses hired into Pediatrics without previous experience. The content is accessible via the KPNC Health Stream Learning Center. Modules can be self-assigned by the learner or packaged and assigned by local Health Stream Administrator.

For Preceptor training, the “Basic Preceptor Mosby course” curriculum is available in Health Stream and **will need to be assigned and tracked by Regional Health Stream Administrators**. After course completion, the ‘preceptor in training’ will need to attend an interactive Preceptor Training Session and meet with the On-Site Program Facilitator to discuss role expectations and responsibilities, review supporting documents, case scenarios, and answer any outstanding questions.

- *Program lead will contact Caroline Waters at Caroline.R.Waters@kp.org for assignment as needed for new preceptors or preceptors without evidence of Basic Preceptor Training for access to the AACN course. Your employee’s last name, first name, NUID, Location and Outlook email address will be needed*

*To ensure adequate preceptor preparation each Program Lead will need to reach out to Regional PCS contact:
Caroline.r.waters@kp.org
as needed for assignment of “Basic Preceptor AACN Course” (Batching of groups appreciate!)*





Supporting a learning environment is critical to the success of the orientee

The preceptor needs access to the program curriculum to ensure shared expectations

They encourage critical thinking by asking more probing questions while ensuring orientee feels safe and supported in this challenge

Recommendations

Managers / Orientation Design:

- Recognize and respond to the identification of drift and the opportunity to elevate nursing practice throughout the unit through these programs
- Space may need to be provided for computer access. For any self-study review time, consider headphones for attendees due to noise level with multiple learners
- Schedule your orientees for their live learning sessions with instructor delivered content spaced throughout the program. Ensure each learner has access to microphone or call-in to meeting option for discussion participation
- When possible, connect learning from modules with corresponding patient assignments
- Use simulations to stimulate critical thinking based on learned knowledge and skills
- Include KP initiatives/tools whenever available and supplemental modules or case studies to enrich learning
- If possible, assign RN Fellow for shadow shifts with variety of Pediatric experts throughout the program (e.g., Oncology RN, Vascular Access Specialty RN, Transport RN, Sedation RN, Child Life Specialist, MSW, LC, etc.)
- Create time for orientee to ask questions with preceptor and/or onsite coordinator. Consider adding additional break relief time to ensure precepting pair have time to review needs and engage in deliberate practice
- Ensure preceptor's patient assignment supports a learning environment for the RN Fellow

For Preceptors:

- Preceptors need to complete all Preceptor Training and commit to a growth mindset throughout the program accessing opportunities to learn with the RN Fellows
- Preceptors need to have access to the content that the RN Fellows are receiving, please encourage staff and leaders to access some of these modules within HealthStream for review. Consider creating a preceptor binder with content they need to know to support and reinforce the learning
- Encourage preceptors to participate in teaching sections of the didactic sessions when possible
- Preceptors are encouraged to ask more probing questions as program progresses in a safe way to facilitate critical thinking

Transition to Practice

Intentional Design:

- The KP NCAL Training Programs represent an opportunity for units to surface practice gaps, challenges, and drift. Through the use of current professionally recognized content and application of KP Standards we are intentional in responding to opportunities to elevate practice
- Pediatric nurses are often quite anxious at the thought of completing their orientation and “going out on their own”. Consider additional resourcing/unit support in the first 1-2 weeks off orientation to ensure adequate support, confidence building and exceptional quality care
- Consider appropriateness of on-going assignments as new RN progresses from Novice to Advanced Beginner throughout the first year of Pediatric practice
- Ensure new Pediatric nurses are prepared to engage in regular bedside rounds, case reviews or other forms of multi-disciplinary socialization and on-going educational opportunities
- Check in on post orientation progress throughout first year
- Cross Training to float is not recommended until new RN has had at least 6 months focusing exclusively on Pediatric nursing. When cross training is appropriate, should minimally include practical training and any supplemental initial competency validation

Supporting a learning environment that allows the new nurse to focus exclusively on the art of Pediatric Nursing is critical to the success of the orientee and ultimately the experience of our patients

