## **Orientation Action Plan for the Preceptor**

## **INTRODUCTIONS**

☐ E	Name, role, degree, certifications (if applicable) (experience within current practice setting (include years of service & roles/responsibilities) (experience within institution (identify any current or previous roles)
_	experience outside the institution (identify any current or previous roles)
☐ P	<ul> <li>ntee:</li> <li>Name, role, degree, certifications (if applicable)</li> <li>Previous professional experiences</li> <li>Preferred learning style(s) (can complete the VARK Questionnaire if unsure)</li> <li>VARK Learning Style Questionnaire: How do you learn best? (vark-learn.com)</li> </ul>
Departmental Introduction	
C	Four of the department  Treate and/or review a checklist of important locations within the department  Examples include but are not limited to nurses' station, medication room, code carts, emergency equipment (ie, fire extinguishers, gas shut-off valves), emergency exits, kitchen(s) for staff and/or patients/families, bathrooms, breakroom(s)  Provide an overview of the Competency-based Orientation (CBO) Manual or establish list(s) of clinical needs if a CBO Manual is not available  Expected See below in "Planning Learning Activities" for considerations of clinical needs dentify colleagues within the interprofessional team that you interact with most frequently outline the roles and expectations of the nurses within your department
□ T □ C	tutional Introduction (for the orientee new to the institution)  four of the hospital  freate a checklist of important locations within the hospital  • Examples include but are not limited to practice settings your department interacts with most frequently (ie, preop, PACU, ICU, Emergency Department), laboratory services, pathology, blood bank, pharmacy, the cafeteria
IDENTIFY & ASSESS	
	s of Comfort: previous orientee experiences  Clinical situations of comfort  Common patient populations from previous experiences  Communication skills (consider both verbal and written communication)
profe	cipated Educational Needs: consider situations of limited exposure during previous essional or educational experiences New team of interprofessional colleagues Difficult situations, such as unexpected clinical decline or code situations Uncommon or unfamiliar patient populations Emerging/new technologies
□ U	ntation Goals  Utilize the SMART format for establishing goals  Specific, Measurable, Attainable, Relevant, Time-bound  Establish goals on a weekly basis, monthly basis, and for the orientation in general

## **PLAN LEARNING ACTIVITIES** Clinical Competence Observe bedside practices ☐ Elicit responses to questions that promote critical, creative, and practical thinking and exhibit clinical competence (examples below) • Critical thinking: how can our hospital policy be implemented for this patient? Creative thinking: what are some of the strategies we could implement to ensure patient compliance with our policy? • Practical thinking: what are some challenges we could anticipate when working with the patient diagnosed with • Patient Experiences: utilize the CBO Manual (if available) or create a checklist of patient opportunities to ensure experience with during the orientation phase This checklist should include, but is not limited to common procedures and patient diagnoses, age groups of patients, cultural considerations for care Collaborate with the charge nurse regarding patient assignments to ensure opportunity for these experiences Interprofessional Experiences: create a list of important members of the interprofessional team, as well as their roles and responsibilities This list should include, but is not limited to attending physicians, fellows, anesthesiologists/ CRNAs, other nurses, unlicensed assistive personnel (if applicable) **REVIEW/SHARE** CBO manual (if applicable) • Commonly used policies & procedures, clinical practice guidelines • Educational resources/tools ☐ Unit-based educator(s) and programs ☐ Institutional education offerings **EVALUATION** Provide guidance and support during the orientation phase Identify strengths and opportunities for growth Provide concrete, in-the-moment feedback (or as close to the moment as possible) · Reflect on goals at their deadline ☐ Have they been met? Were there any barriers to meeting those goals? If so, what were they? Does there need additional clinical experiences or education provided? Recognize when to step back as a preceptor and provide independent practice opportunities Orientee should be exhibiting competent clinical practice at the bedside for allowance of

independent practice