Rethinking Policies, Guidelines, Procedures And Competency Validation

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Background and Planning

The management of policies, guidelines, procedures and competency validation tools in the perioperative setting has continually become more complex along with the diversity of our workforce. Our team recognized that there was redundancy and overlap in many of our documents that limited staff to easily access and understand the information that they need to practice safely.

Team

- Associate Chief Nurse Perioperative Services
- Clinical Manager Perioperative Education
- Unit-based Educators: CVI OR, East OR, Perioperative Nurse Entry Program, West OR
- Perioperative Information Management System (PIMS) Resource Nurse

Assessment

A four part assessment was completed:

1

Literature Review

- Workforce diversity
- Adult learning styles
- Differences
 between digital
 natives and
 digital
 immigrants
 learning
 attributes

2

Exploration of the attributes of our learning management system which offers

- Ability to provide learning
- Performance reviews
- A single source of truth for documentation of employee compliance

3

Review of the content of policies, skills checks and other competency validation tools

Found

- Overlap in content
- In some instances, not congruent

4

Brain-stormed how can we deliver content using Teach-Backs

- Digital learners
 (Easily retrieved,
 using graphics
 before text)
- Digital immigrants (printable as a document with linear naming of the must dos)

Policy

Title: Immediate-Use Steam Sterilization (IUSS) in the Operating Room

Policy #: PSM 200-104

Purpose: O.R. sterilizers are used to ensure that sterile instruments are available at all times to meet the surgical team's and patient's changing needs during a procedure.

Definition:

"Immediate use" is broadly defined as the shortest possible time between a sterilized item's removal from the sterilizer and its aseptic transfer to the sterile

field. Immediacy implies that a sterilized item is used during the procedure for

is not stored for future use, nor held from one case to another.

Policy Statement:

mmediate-Use Steam Sterilization

- Immediate-use steam sterilization (IUSS) should be kept to a minimum and should only be used in urgent clinical situations.
 Prior to immediate-use sterilization, the recommended critical cleaning and
- decontamination steps are completed by CPD staff according to manufacturers' instructions for use.

 3. Only closed sterilization containers will be used for IUSS to prevent
- 3. Only closed sterilization containers will be used for IUSS to prevent contamination during transfer to the sterile field. To accommodate the closed containers, O.R. Sterilizers

 a. are set on pre-vacuum
- b. no IUSS loads will be processed using gravity displacement

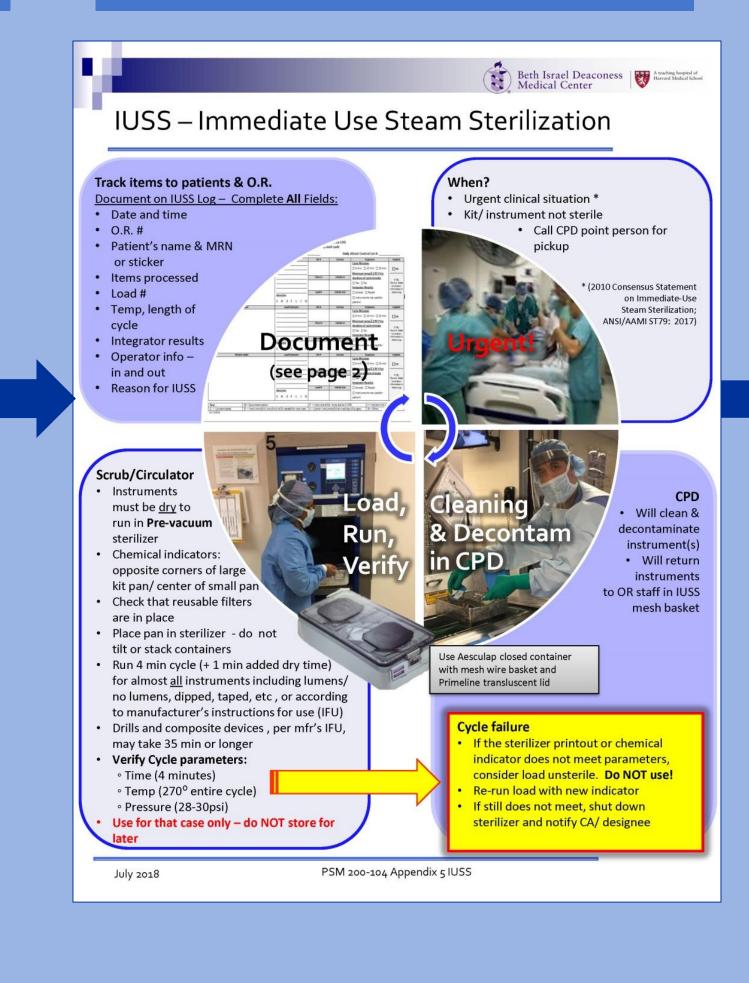
 A chemical indicator(s) will be used within the container being sterilized and
- validated that sterilization parameters have been met.

 5. Sterilized items are used immediately during the procedure for which the
- 6. IUSS should NOT be done on implants except in a documented emergency situation when no other option is available. The Circulating RN should notify
- the Nursing Director/ designee of the need to IUSS7. An IUSS log is maintained at each sterilizer to record information on each IUSS load.

Associated Documents

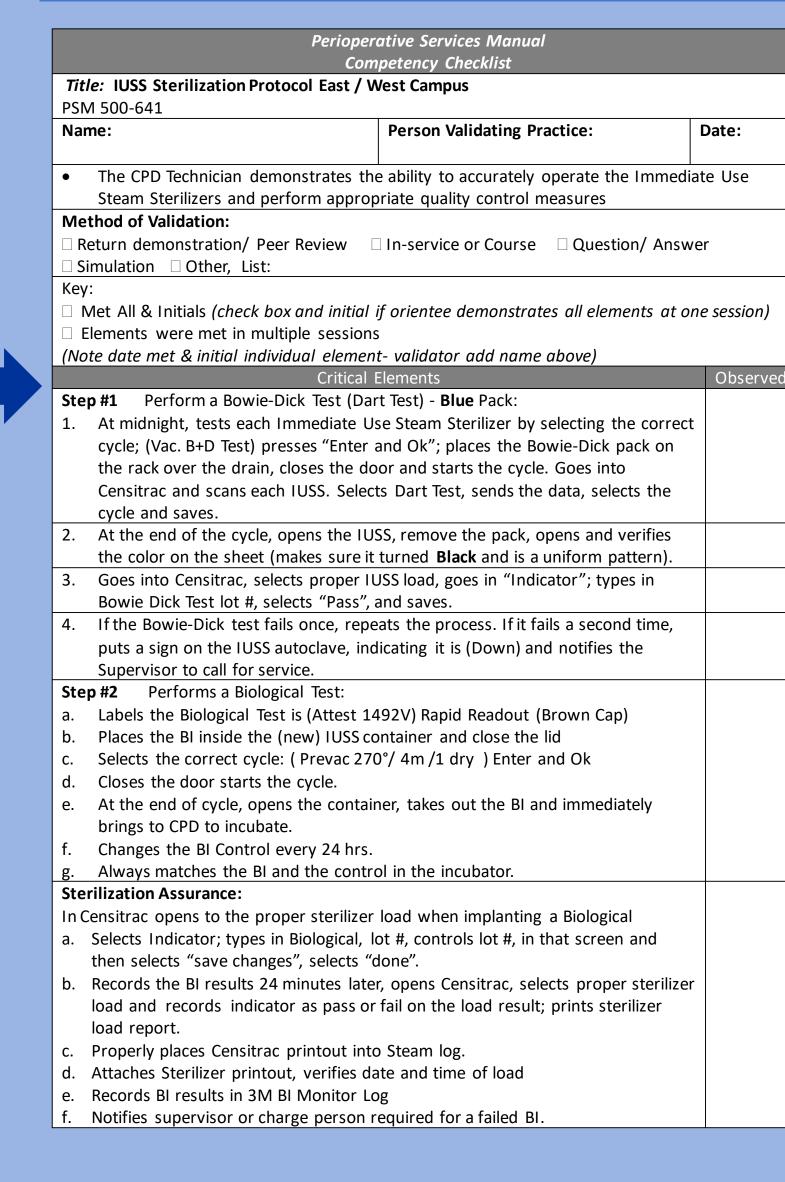
- PSM 200-104 Appendix 5 Teachback IUSS pages 1 and 2
 PSM 500-153 Skill Checklist Immediate Use Steam Sterilization Loading/ Unloading an IUSS Sterilizer
- 3. PSM 600-401 Biological Monitoring of Sterilizers
- 4. PSM 600-401 Appendix 5 Biological Monitoring Immediate Use Steam Sterilizers

Assoc. Doc. 1: Teach-Backs



Assoc. Doc 2: Skills Checklist / Competency Validation Tool

TAP TO GO BACK



Findings

- Content of our many of our policies were too broad and included a lot of procedures.
- Skills checks and other competency validation tools were redundant with the steps of the related policy and, in some instances, not congruent.
- Using a paper system of competency validation was cumbersome.

Crafting a New Direction

- 1. Policy stating the must dos and the references companion documents as appendices.
- 2. A competency validation tool which outlines the steps to delivering the care.
- 3. Teach-back(s) that are point of care digital learning tools.
- cycle.
 5. Plan: Convert all policies over the three year review cycle.

4. Implementation during the FY 2018 review

Outcomes

- Favorable feedback was received after the release of the trialed policies.
- All documents are easily retrievable in the on-line Perioperative Services Manual.
- System is designed to:
- highlight continuous improvement in high reliability teams,
- Capture competency validation with a single source of truth measuring the steps of care delivery in the competency validation process, and
- Place relevant tools into the hands of the people who do the work where they work.

References

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 Partnerships for Sustainable Health,
 4th Edition. 2015, Jones & Barlett
 Learning, USA. P.3