

Memorial Sloan-Kettering Cancer Center

Heeding the Call to Improve Quality and Safety in the Delivery of Nursing Care; **Redesigning Oncology Nursing Orientation Competency Assessment Tools** Altagracia Mota MSN, RN, OCN, Nursing Professional Development Department, Manager, UHC-AACN Nurse Residency Program Coordinator

This presentation will demonstrate the application of quality and safety initiatives in the redesign of oncology orientation competency assessment for nurses. The redesign of competency assessment tools was based on the Quality and Safety Education for Nurses Initiative (QSEN) and the Novice to Expert theories of skill acquisition

Academic and practice partnerships have suggested bridging nursing education and the assessment of nursing competencies across all learning environments. This led to a collaborative departmental initiative to revise current competency assessment tools for oncology nursing orientation at this comprehensive cancer center.

Existing competency assessment tools were redesigned and competency statements re-grouped to reflect the QSEN competencies of patient centered care, team work and collaboration, evidence -based practice, quality improvement, safety and informatics. With the incorporation of the skill acquisition theory, competencies were divided into three levels. Level one, identifies competencies that demonstrate the acquisition of knowledge of concepts and theories required for the management of the oncology patient and general orientation to the institution. Level two, identifies general nursing skills required for the care and management of patients regardless of the oncology sub-specialty. Level three, delineates competencies requiring higher level psychomotor and critical thinking skills in applying focused nursing concepts to a specific oncologic patient population.

The purpose of this project was to redesign tools with a focus on the assessment of quality and safety competencies for the delivery of oncology nursing care. These competencies were designed to assess nurses at different dimensions of learning during orientation, incorporating the theories of skill acquisi-

These assessment tools were implemented into our current orientation program. Newly hired nurses are assessed based on these criteria. Surveys will be distributed to stake holders for the evaluation of new tools. Outcomes will focus on improved orientation to the role of oncology nurse and the delivery of safe, quality care.

The Institute of Medicine has put out a call for the improvement of education systems that will ensure the delivery of safe, quality care across settings. The development of QSEN competencies has established a framework for using these concepts to enhance the orientation of oncology nurses.

Objectives

- Discuss Institute of Medicine (IOM) reports and recommendations for safe nursing practice and educational reform
- Discuss Quality and Safety Education for Nurses (QSEN) national initiative
- Review Benner's Novice to Expert Theory
- Identify importance of a competency based approach to education
- Assess how the QSEN and Benner models can be integrated in performance evaluations

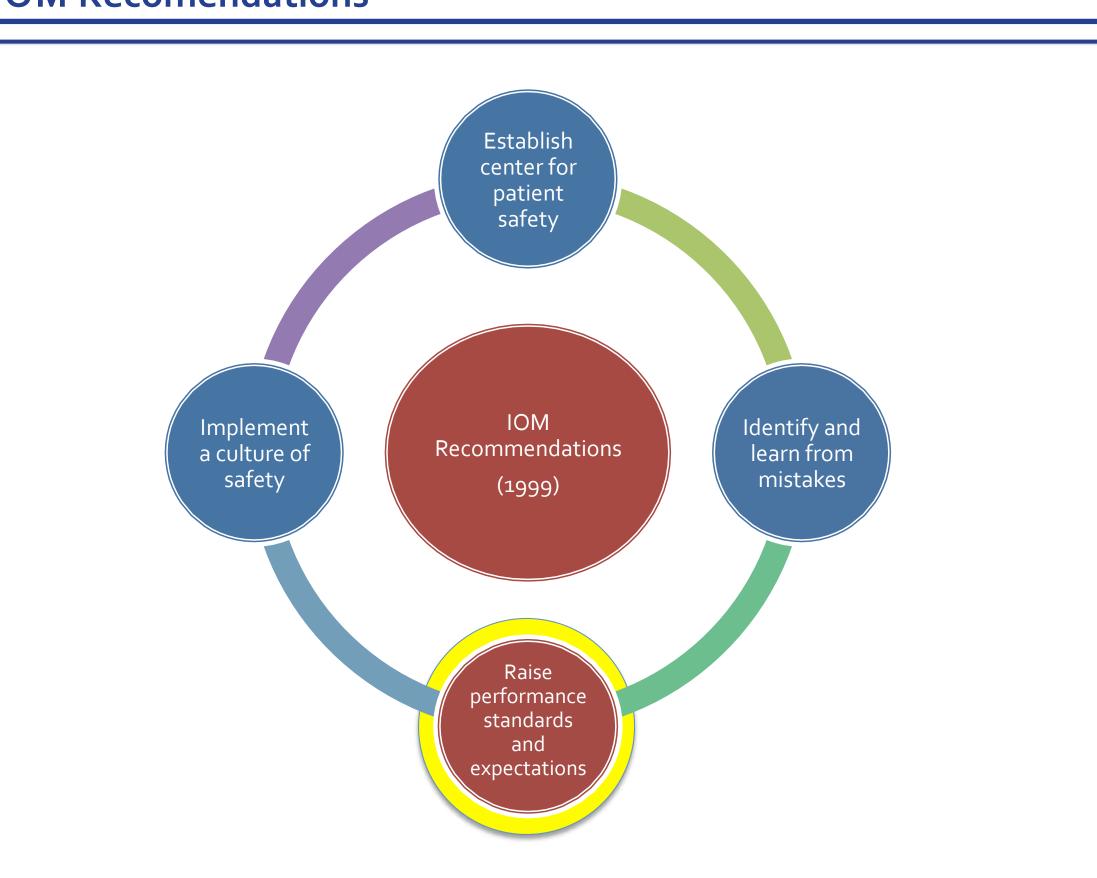
Review of the Literature

Committee on Quality of Health Care in America, Institute of Medicine (IOM). Kohn, LT, Corrigan JM, Donaldson. MS (eds.).(1999). To err is human: building a safer health system. Washington D.C.: National Academies Press

Statistical Analysis

- 98,000 deaths due to errors
- 66% sentinel events in hospitals caused by communication errors
- Total cost to society 17-29 billion dollars (additional care, lost income, and disability)
- Lost trust in system

IOM Recomendations



Committee on Quality of Health Care in America, Institute of Medicine. (2001). Crossing the quality chasm: a new health system for the 21st century. Washington, DC: National Academies Press.

Health professionals:

 Not adequately prepared to address shifts in national population

- Asked to work together but not trained together
- Confronted with research and high volume of evidence but not schooled in how to access information
- Unprepared for assessing root cause analysis
- Not provided basic foundation of informatics

Greiner, A.C. & Knebel ,E. (2003). Health professions education: A bridge to quality. Retrieved from http://www.nap.edu/catalog/10681. html on May 2, 2012.

Competency Based Education

- Focuses on making learning outcomes for courses explicit
- Evaluates how well students master outcomes
- Potentially results in increased quality care
- Cost effective (increased communication & coordination)
- Processes are streamlined
- Recommended overhaul of health professions education
- Identified five competencies:
- 1. Patient Centered Care
- 2. Interdisciplinary Teamwork
- 3. Evidence-Based Practice
- 4. Quality Improvement
- 5. Informatics

Cronenwett,L., Sherwood,G., Gelmon,S. B. (2009). Improving quality and safety education: The QSEN Learning Collaborative. Nursing Outlook, 57 (6), 304-312

- Robert Wood Johnson Foundation (RWJF) funding
- A multi-institutional initiative
- Promoting quality and safety competencies
- Added safety: "The six competencies"

Memorial Sloan-Kettering Cancer Center, New York, NY

Revising

M/QSEN Competencies for Health Professions Education
Patient (family) centered care • Respect patients' differences, values, preferences and needs • Coordination of care • Advocacy
Safety Integration of safety measures to minimize risk to patients, families, and colleagues
Interdisciplinary teamwork • Collaboration, communication and integration of care among team members
Employ evidence-based practice • Integration of research with clinical expertise • Participation in ongoing learning activities
Application of quality improvement Identification of errors Implementation of safety standards Testing of interventions
Utilization of informatics • Use informatics to improve communication and manage information
ree Phases of QSEN Initiative

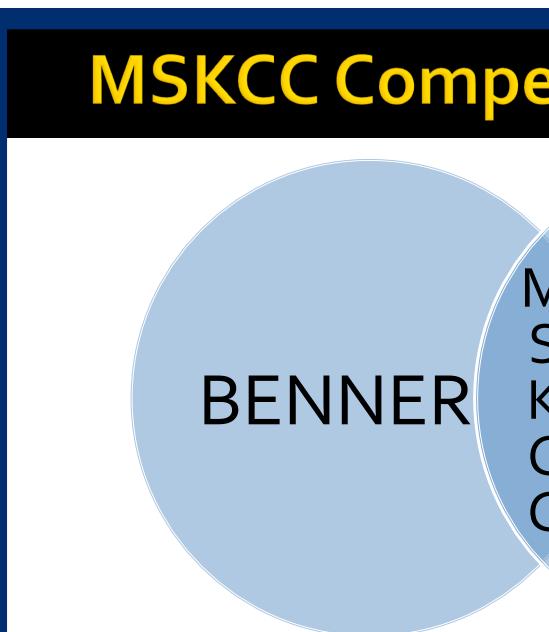
Phase 1	• Knowledge, Skills, Attitudes (KSAs) for competencies
	 Pilot learning collaborative (15 schools) Develop and test teaching strategies
•	 Faculty preparation National Safety Forum Textbook development
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· · •	984). From novice to expert: Excellence and power in clini- practice. Menlo Park: Addison-Wesley, pp. 13-34.
	Expert
	Proficient

Competent

Advanced Beginner

Novice

- Nurses develop skills and understanding of patient care over time through ongoing learning as well as a variety of experiences
- Progression consists of extending practical knowledge ("knowing that") through theory-based scientific investigations ("knowing how")

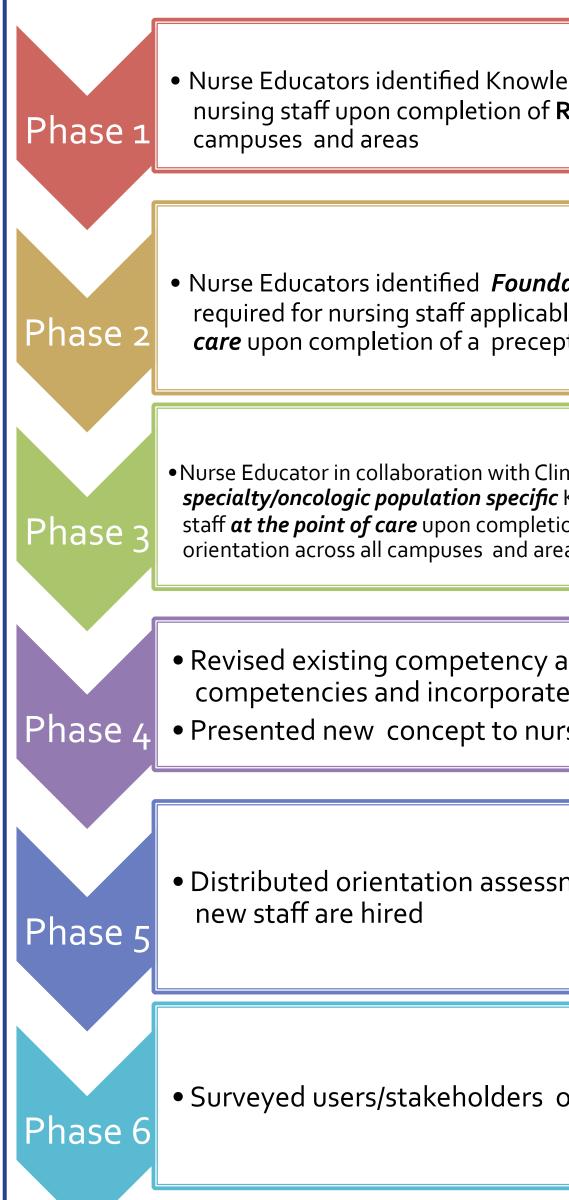


- Identified need to revise competing
- Discussion with partnering college
- Generated ideas to bridge QSEN fessional practice
- Identification of generic and spe
- Streamlining required knowledd
- Assessment of progression of s
- Tools for Preceptors and Educa

Orientation Competency: Levels

- Level #1: Generic foundationa essary to work as an RN, regard to hospital policies and procedu
- Level #2: Generic demonstra point of care, regardless of area ples, technology)
- Level #3: Higher level applica ing skills and attitudes, which r specific patient population

Phases of Oncology Orientation C



etency Revision
etency tools lege curriculum advisory committee EN competencies to oncologic pro-
becific competencies dge, skills and attitudes skill acquisition ators
s al knowledge and basic skills nec- dless of area (including orientation
ted application of knowledge at a, (nursing process, safety princi- ation of knowledge, critical think- relate to the specialty area and
Competency Revision
vledge, Skills, and Attitudes required for all F RN Nursing Orientation Classes across all
dational Knowledge, Skills, and Attitudes ble across all campuses and areas at the point of eptor based orientation
Elinical Nurse Specialists and Nurse Leaders identified ic Knowledge, Skills, and Attitudes required for nursing tion of a unit/population-specific preceptor based reas
assessment tools to reflect the 6 QSEN te the previously identified KSAs ursing staff and leadership
sment tools on a rolling bases to units as
on new competency assessment tools

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		FION COMPETEN	CY		
	1	LEVEL I			
Name	Title	ID	DOH	CC	
		leted Key Grid			
		able for this Employee/	area		
Directions: Use the Completed I	Key Grid above to docum	ent demonstration of co	mpetency.		
At completion of Departmen	t of Nursing Orientatio	on Classes (RNO):			
Nurse will recognize the patien respect for individualized patien knowledge and skills necessary cultural/language, spiritual, he	nt/family as full partners ent population specific p y to provide service app	references, values an copriate care based or	ssionate and coor d needs. The Nu n the age, disease	rse will integr e process,	
	Competency		Completed	Initials	Da
care for the age disease process cultural/language spiritual needs health literacy gender/sexual orientat Discuss principles related to tr		the oncology			
patient Identify acute/chronic pain ma	nagement strategies				
Discuss psychosocial aspects of	<u> </u>				
Identify principles of patient ri		ves			
Identify early warning signs of (Simulation)	•				
Demonstrate the nurses role in State procedure for contacting Team	•	/			
Demonstrate CPR skills					
Identify high risk criteria and	management of child ab	duction (code pink)			
Demonstrate knowledge of: • I.V. Medication (exam	1)				
Blood & Blood Produ	cts policy review (exam	return demonstration))		
Medication Dosages (Calculating IV Drip Ratexams)	es/Calculating			
Identify Concepts of: • Human Subjects Prote	ction (video/lecture)				
	encies\NEW OSEN ORIENT	ATION DOCUMENTAT	ION FORMAT\RN	Level 1\RN Orie	entation 1 (of 3

<u>MEMORIAL SECAN-RETTERING CANCER</u> <u>DEPARTMENT OF NURSING</u> NURSING PROFESSIONAL DEVELOPM			
RN ORIENTATION COMPETENCY LEVEL 2			
Name Title: ID Unit F	opulation	CC	
$\frac{\text{Completed Key Grid}}{\checkmark = \text{Completed/Passed}}$ NA = Not Applicable for this Employee/area			
Directions: Use the Completed Key Grid above to document demonstration of competence	ency.		
Patient-Family Centered Care At end of orientation, the Nurse will recognize the patient/family as full partners coordinated care based on respect for individualized patient population specific will integrate the knowledge and skills necessary to provide service appropriate cultural/language, spiritual, health literacy, gender/sexual orientation needs of the	preferences, val care based on t	lues and needs	. The Nurse
Competency	Completed	Initials	Date
 At the completion of a unit/population specific based orientation the nurse will : Discuss the Primary Nursing Care delivery model and how it promotes continuity of care. Apply nursing process when delivering care: Assessment Development of a plan of care Implementation of care Evaluation of patient response/progress Recognize acute changes in patient condition and respond accordingly Demonstrate safe practices when performing nursing clinical skills as per hospital and regulatory policies and procedures Prioritize patient care needs Organize work & provide timely care Assess, manage, and evaluate for pain (acute/chronic) Medication Administration Administer medications as per hospital guidelines 			
Perform medication reconciliation process			
 Psychosocial support Assess, coordinate and collaborate with interdisciplinary healthcare team to address cultural, psychosocial and spiritual needs Access translational resources and services on MSKCC Language Assistant Program intranet site. 			
 <i>Patient/Family Education</i> Identify patient/family learning needs and educational resources 			
 Provide patient/family education at all points of the care continuum Document educational sessions and outcomes 			

EHX0I4\RN Orientation Competency Level 2 (July

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<u>DEPARTMENT OF NURSING</u> NURSING PROFESSIONAL DEVELO	-		
NORSENG I KOT ESSIGNAE DE VEEC			
<u>RN ORIENTATION COMPETE</u> LEVEL 3	<u>NCY</u>		
M8: Adult Hematopoietic Stem Cell Transpla	antation (HS	<u>CT)</u>	
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Completed Key Grid ✓ = Completed/Passed NA = Not Applicable for this Employee/	area		
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- Orientation Levels 1-3
- tency Assessment

Ongoing Annual Competency Assessment and QSEN Initiative

- tools

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H:\Nursing Edu Assessment (5).

- Gives purpose for actions

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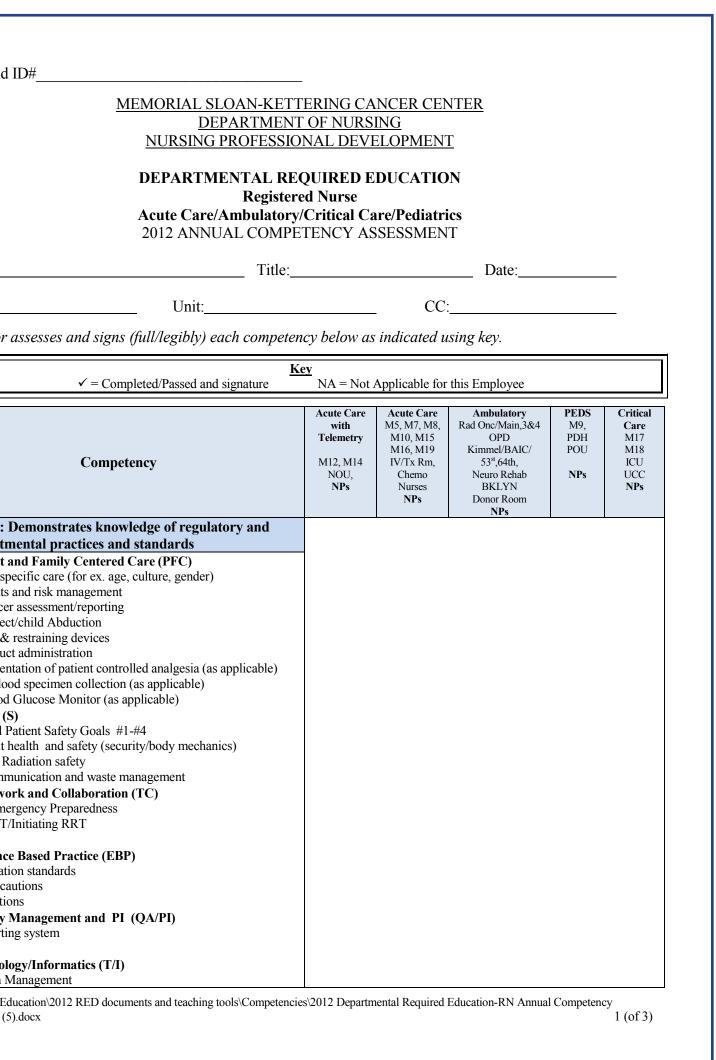
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Department of Nursing Required Education Day (RED) Compe-

 Incorporating QSEN learning strategies and competency assessment for annual competency review day

• Restructuring of Required Education Day (RED) Competency



Summary: Focus on Quality and Safety

Promotes concepts of Relationship- Based Care

Care revolves around patient outcomes

Reinforces nurses' accountability for outcomes

Supported by scientific evidence

Competency identification and restructuring:

Summary: Survey Results

- Application to practice
- User-friendliness
- Tool for preceptors
- Landmarks for skill acquisition

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Bridging QSEN idea and conceptualization in collaboration with:

Susan Sakalian, MS, RN, OCN

Graduate Alumni The College of New Rochelle New Rochelle, New York

Administrative Support

Josephine Nappi, MA, RN Director of Nursing Professional Development

Rosa Iamiceli Administrative Assistant