

Change Ideas for Orientation

Typical issues & evidence of discordance:

- New CNAs picking up undesirable work habits from their peers rather than following facility protocol
- CNAs using care methods or espousing philosophies that were learned at an old job and that don't jibe with expectations at the new one
- CNAs being given responsibility for patient care before they feel ready to handle it

Barriers:

- Low morale among newly hired CNAs
- High turnover rates during the first six months of employment
- Employers with vacant CNA positions to fill often hesitate to lengthen orientation beyond two or three days
- Fulfilling detailed regulatory requirements and filling out the associated paperwork often occupies all the time allotted to orientation
- Employers believe the job is easy, so new CNAs don't need added supports and on-the-job training to solidify skills
- Employers don't see value of peer-to-peer education

Goal:

- To teach new CNAs about the organization's culture and values
- To ensure that new CNAs understand the facility's mission and values as well as its policies, procedures, and protocols
- To initiate and nurture relationships between new workers and the residents, supervisors, and peers they will be working with
- To reinforce new care giving skills among CNAs who have just completed training.

Infrastructure helpful to support the change:

- Extend orientation to last at least a week. Don't require new CNAs to carry a full patient care load during that time.
- Institute a peer mentor or buddy program

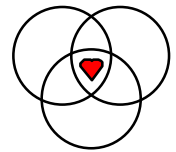
Measurement possibilities:

- Survey or informally interview newly hired CNAs soon after their first week to learn how confident they feel in doing their jobs, how well they understand the organization's mission and values, and how well they are relating to residents, coworkers, and supervisors. Talk to their peer mentors and supervisors to see if their observations back up what the CNAs say.
- Measure turnover during first three months to see if new orientation program reduces loss of new CNAs.

PDSA Cycles:

PLAN: Determine what is and is not working about your current orientation program, with input from some of your most successful and some of your newest CNAs.

DO: Design a new orientation program that lasts at least a week. Emphasize organizational values and communication with residents and



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other workers as well as policies and procedures. Include frequent check-ins by peer mentors and supervisors. Consider having new aides shadow peer mentors before taking on their own caseload.

STUDY: Check in with newly hired CNAs and their peer mentors and supervisors to see how they're adjusting to the organization and the job.

ACT: Based on the feedback from CNAs, mentors and supervisors, make changes to the orientation program as necessary

Questions to consider:

- Do we make our new nursing assistants feel welcome?
- Do we ask CNAs to handle a full workload before they feel ready?
- How do new CNAs learn about our organizational mission and values?
- Do our new CNAs have someone they feel comfortable approaching when they have a question or need advice or support?
- If a new CNA did something that didn't jibe with our facility's protocols or philosophy, would someone notice and correct the behavior before it became a habit?

Change Ideas:

- Teach newly hired nursing assistants about your organization's culture and values -- things like the value placed on teamwork, what is meant by resident-centered care and how that plays out in the workplace, and how staff treat each other, residents, and residents' family members.
- Encourage supervisors to check in frequently with new workers during this period and offer support and advice, laying the groundwork for a positive and trusting relationship.
- Assign each new CNA a peer mentor.
- Have new hires shadow experienced workers and assist them with some of the easier tasks for a few days before giving them their own workloads.
- Establish clear expectations for what CNAs are expected to achieve during their first three months on the job if they are to move from probationary to permanent employment. Create checklists so supervisors or peer mentors can check off each goal as it is accomplished. Have each worker review his or her checklist with his or her supervisor at the end of the first three months.

Resources:

For descriptions of successful peer mentoring programs, go to www.directcareclearinghouse.org/practices/index.jsp and select “peer-mentoring”

A curriculum for teaching a peer mentor program will be available from the Paraprofessional Healthcare Institute as of fall or winter 2005. To order a copy, go to www.directcareclearinghouse.org or e-mail info@directcareclearinghouse.org