



# From Classroom to Circulator: Systemizing Perioperative Readiness



Presented by:  
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# Objectives



Identify why focused novice OR nurse orientation and onboarding is important



Describe collaborative efforts for standardization of novice OR orientation



Identify challenges faced in the process of standardization and considerations for undertaking the process in your facility

# Disclosures

The presenters have no financial relationships relevant to this presentation to disclose.

# Orientation Conundrum


Nursing education often lacks perioperative influence



Extended orientation in Periop



Perioperative nursing turnover rose from **25% in 2016** to **59% in 2022** (Xie et al., 2024)



Over **\$50,000** to train novice periop RN (Vortman et al., 2019)

# Orientation across HHC Perioperative Areas

## Hospital system with seven acute care facilities

- **2023:** Systemwide Perioperative Nursing Professional Development and Practice Excellence (NPDPE) Committee created
  - Interdisciplinary partnership
  - Define orientation expectations

## Novice OR Nurses and Periop 101

- Periop101 in use across all sites
- Areas of inconsistency
  - Availability of training resources
  - Adjunct foundational content covered at each site
  - Experience levels of program facilitators
  - Duration of the orientation program

# Our Experiences

## Midstate

- Defined curriculum developed in 2023
- Novice NPD

## Hartford

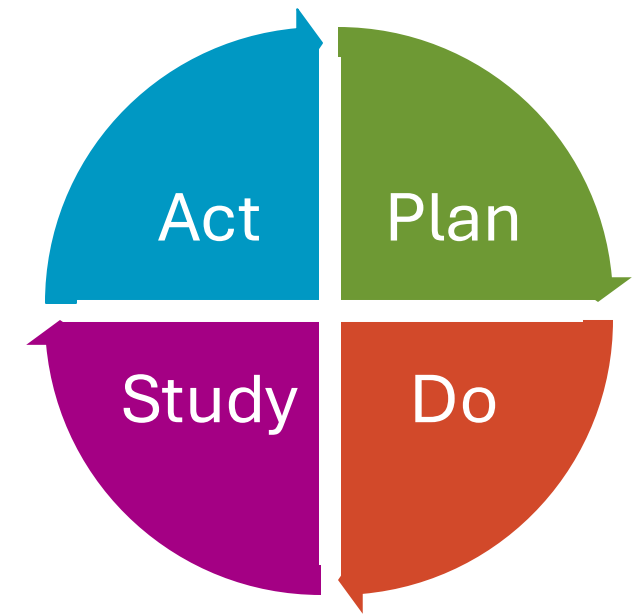
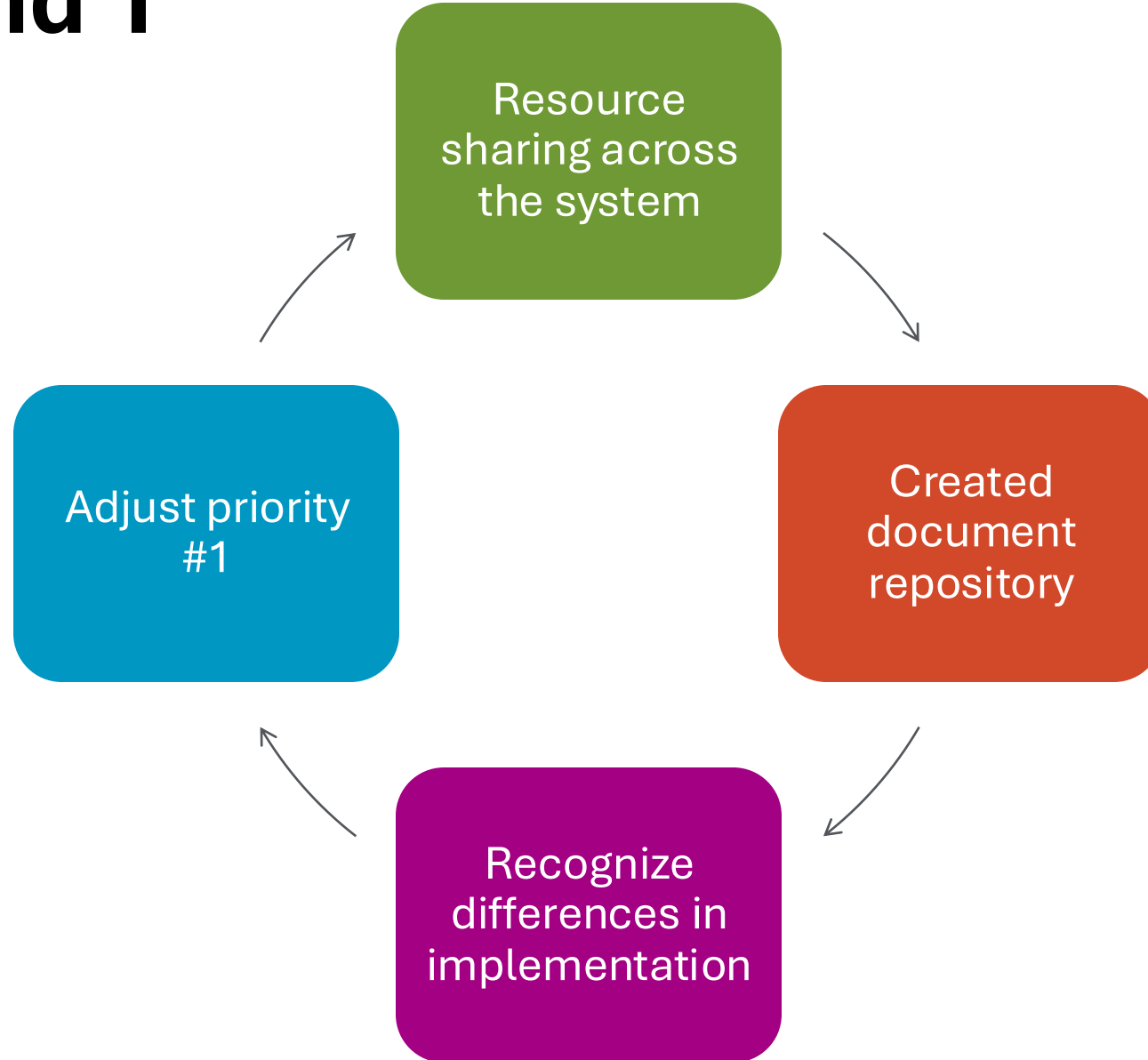
- Shift variability during orientation
- Lack of defined curriculum
  - Duration, content, evaluations
- Novice NPD



# Novice Orientation Crosswalk

Facility (# of OR's)	Orientation Length	Shadow Experience	Scrub Experience	Orientation Schedule	Simulation Experience	In-Person Lectures
<b>Charlotte Hungerford Hospital (5)</b>	<ul style="list-style-type: none"> <li>• 12 months</li> <li>• Didactic throughout orientation</li> </ul>	Yes	After Periop101 completion	5 days, 8 hours	No	No
<b>Backus Hospital (12)</b>	<ul style="list-style-type: none"> <li>• 6-12 months</li> <li>• Didactic over 16 weeks</li> </ul>	Yes	After Periop101 completion	5 days, 8 hours	Yes	Yes
<b>Hartford Hospital (48)</b>	<ul style="list-style-type: none"> <li>• 6-12 months</li> <li>• Didactic over 16 weeks</li> </ul>	Yes	4-6 weeks	Manager discretion	Yes	Yes
<b>The Hospital of Central CT (14)</b>	<ul style="list-style-type: none"> <li>• 6 months</li> <li>• Didactic throughout orientation</li> </ul>	Yes	4-12 weeks	5 days, 8 hours	Yes	Yes
<b>MidState Medical Center (15)</b>	<ul style="list-style-type: none"> <li>• 6-12 months</li> <li>• Didactic over 11 weeks</li> </ul>	Yes	Scrub observation	5 days, 8 hours	Yes	Yes
<b>St. Vincent's Medical Center (19)</b>	<ul style="list-style-type: none"> <li>• 11 months</li> <li>• Didactic over 6 weeks</li> </ul>	Yes	4 weeks	5 days, 8 hours	No	No
<b>Windham Hospital (6)</b>	<ul style="list-style-type: none"> <li>• 10-12 months</li> <li>• Didactic over 16 weeks</li> </ul>	Yes	After Periop101 completion	5 days, 8 hours	Yes	Yes

# Round 1



# Collaborative Curriculum Integration



MONTHLY  
MEETINGS



OBJECTIVES AND  
CURRICULUM  
CONTENT



CONSENSUS  
DRIVEN DECISION-  
MAKING



REPOSITORY OF  
SHARED  
RESOURCES



“RESOURCE TIME”



SKILLS VALIDATIONS




# System Repository: Assessment

Class	Learning Objectives	Content Overview (Est Time)	Methods & Materials	Evaluation Method	Resource Time
Assessment	<ol style="list-style-type: none"> <li>1. Discuss nursing priorities in preoperative phase of care.</li> <li>2. Discuss the importance of patient education.</li> <li>3. Discuss components of preoperative assessment and how it impacts intraoperative care.</li> <li>4. Discuss the importance of focused patient assessment in the perioperative environment.</li> <li>5. Identify the impact of social determinants of health on patient outcomes.</li> </ol>	<ul style="list-style-type: none"> <li>• Components of preop patient assessment</li> <li>• Nursing Process Elements</li> <li>• Social Determinants of Health</li> <li>• Patient Rights &amp; Responsibilities</li> <li>• Medication Assessment</li> <li>• ERAS</li> <li>• Care of special populations               <ul style="list-style-type: none"> <li>○ Older adults</li> <li>○ Bariatrics</li> <li>○ Conservatorships</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Modules</li> <li>• Cinemed</li> <li>• Preoperative shadow</li> <li>• Simulation</li> <li>• Care Plan presentation</li> </ul>	<ul style="list-style-type: none"> <li>• Post module quiz 80%</li> <li>• Cinemed Quiz 80%</li> <li>• Debrief reflection experience</li> <li>• Observations in clinical space</li> <li>• Preceptor evaluation tool</li> </ul>	<ul style="list-style-type: none"> <li>• “Cautionary tales from the field” - stories from our own past to be developed as an option to have conversations with orientees</li> </ul>

# System Repository: Assessment

Periop101 System Standardization Workgroup >

 Name ▾

 Simulation

 pocket\_cards\_starting case.pdf

 Preoperative Case Study.pptx

 Preoperative Reflection Questions.docx

 preoperative-assessment.pdf

 Sample Workflow\_Process Checklist Pocket...

 Skills Lab Checklist\_Assessment.docx

# Enhancing the Curriculum

## Sim Lab Experiences

- Foley Insertion
- Preoperative Interviews
- Pre-procedure Briefing
- Positioning
- Anesthesia Support
- Timeout
- Escape Room
- Surgical Site Prep

## Lectures

- Infection Prevention
- Environmental Cleaning
- Double Gloving
- Powered Equipment
- Surgical Energy/Surgical Smoke
- Staplers/Robotics
- Hemostasis Products
- Patient Safety

# Challenges

Meeting  
Attendance

Record  
Keeping

Program  
Evaluation

Data  
Collection

Resource  
Availability

Staffing  
Limitations

Preceptors

# Surveyed 2023-2024 HH Periop101 Graduates

**What aspects of the P101 residency program do you believe could be improved to better prepare nurses for their roles in the operating room?**

- “It would have been nice to have a little bit more time for specialty specific learning/simulations”
- “More skills labs would be very helpful and it all comes with time, but I really benefited from any days of skills.”
- “More in person and verbal teaching”

# AORN Platform Module Metrics

Module Name	Expected Module Completion Time	Average Completion Time
Anesthesia	1:00:00	0:59:06
Assessment	1:00:00	0:54:47
Endoscopic surgery	2:00:00	1:36:09
Environmental cleaning	1:20:00	1:01:29
Health Info Management	1:20:00	0:44:27
Hemostasis management	<b>2:00:00</b>	<b>1:06:42</b>
Medications	1:40:00	1:16:24
Org influences and pt outcomes	1:00:00	0:50:40
Post anesthesia care	<b>1:30:00</b>	<b>0:33:24</b>
Professionalism	1:30:00	1:04:19
Pt family education	1:00:00	0:27:01
Pt positioning	<b>2:30:00</b>	<b>0:52:31</b>
PT safety	2:00:00	1:33:10
Pt skin antisepsis	1:40:00	0:52:54
Safe use of equipment	2:40:00	1:54:56
Sterile technique	1:00:00	0:47:45
Sterilization process	2:30:00	1:48:21
Surgical draping	1:00:00	0:36:28
Surgical hand antisepsis & scrub attire	1:30:00	0:42:39
Surgical instruments	1:00:00	0:46:18
Surgical specimens	<b>1:30:00</b>	<b>0:33:02</b>
Transmission infection prevention	2:00:00	0:50:17
Wound closure and healing	2:00:00	1:34:30

\*average of 10 student experiences

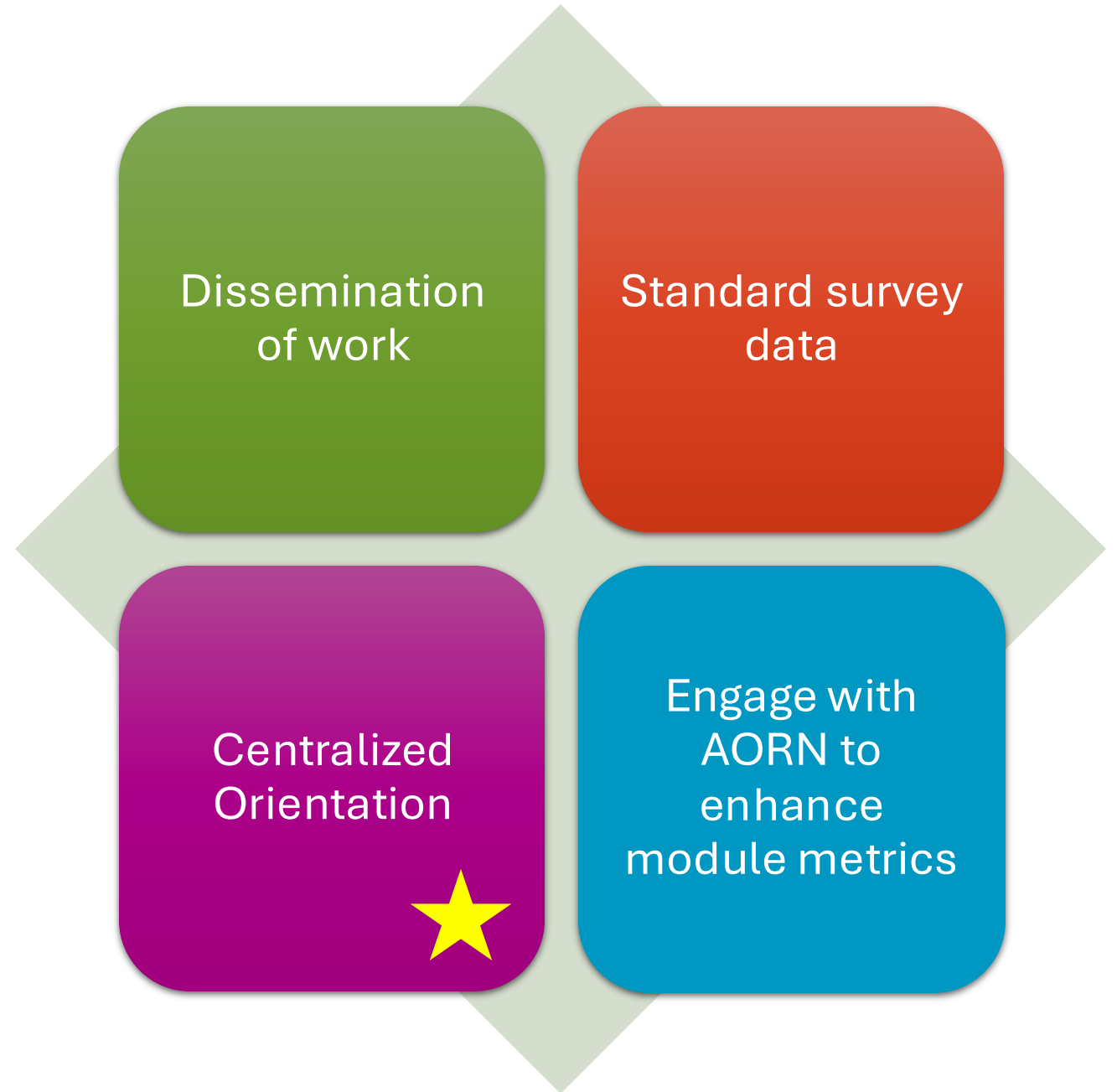
← **54 minutes**

← **27 minutes**

← **98 minutes**

← **57 minutes**

# Going Forward



# Looking Toward the Future

Perform gap analysis on program as a *Transition to Practice Program (PTAP)* to accreditation

Modifications for alignment with the PTAP objectives

Refine current survey to reflect PTAP learner survey topics



# Key Thoughts to Take Home



Perioperative nursing orientation must be robust and supportive



Collaborative efforts allows for reduced individual workloads



Standardizing curriculum provides shared baseline competency expectations



Record keeping is vital



Data collection is non-negotiable



Dream big!



**Any Questions?**

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