

**General Inpatient LPN Nursing Orientation Competencies**

 (Initial Launch 1-15-2019)

 (Updated)

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| **#1 Nursing Process: Data Collection** |
| **Competency Statement** | 1. The licensed practical nurse (LPN) at Cheyenne Regional Medical Center (CRMC) collects pertinent information relative to the situation and patient condition and shares this information with the registered nurse (1, 2b, 2c, 3).
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| **Behavioral Criteria** | 1. **Gathering Data**
	1. The LPN contributes to the assessment of a patient’s health status under the supervision of a Registered Nurse (RN). These assessments are focused data gathering, not synthesis of information.
	2. Identifies abnormal findings and recognizes patient characteristics that may affect the patient’s health status (1, 2c, 3).
	3. Recognizes and responds to changes in patient condition and alerts the RN and provider of such changes (2a).
2. **Prioritization:**
	1. Prioritizes the collection of pertinent data/ information based on the patient’s immediate condition or anticipated needs for the situation.
3. **Risk Screening:**
	1. Gathers data to assign patient risk for developing adverse events. The following scales are used to collect data regarding patient risk. However, the initial screening must be completed by an RN. The LPN can contribute to the risk assessment or screening under the supervision of the RN:
		1. “6-Clicks” Mobility Screening
		2. Braden Scale
		3. IV Phlebitis and Infiltration Scale
		4. Morse Fall Scale (2e)
		5. Nutritional Screening
		6. Pain Scales (2d)
		7. Sepsis Screening
		8. Venous Thromboembolism (VTE) Risk
4. **Documentation:**
	1. Accurately documents data obtained in a timely manner as to provide information to the inter-professional team (1).
	2. Validates that the RN completes a thorough assessment every 24 hours.
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| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge:**
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	* Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	* The preceptor validates the employee’s ability to document findings by submitting 1 patient audit (Assigned in HealthStream).
	* Completes 1 patient audit located in HealthStream (Assigned in HealthStream).
3. **Competency in Attitude:**
	* Writes an Exemplar in the Comments sectionthat meets the following conditions:
		1. Describes a patient they cared for that demonstrates their ability to recognize and respond to changes in patient condition.
 |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [482.28(b) (1), 482.439(c) (4), 482.23(b) (4)]. Retrieved from <https://www.cms.gov/RegulationsandGuidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. The Joint Commission. (2018) Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>
	1. *PC.02.01.19: The hospital recognizes and responds to changes in patient condition*.
	2. *PC.01.02.01: The hospital assesses and reassesses its patients.*
	3. *PC.01.02.03: The hospital assesses and reassesses the patient and his or her condition according to defined time frames.*
	4. *PC.01.02.07: The hospital assesses and manages the patient’s pain and minimizes the risks associated with treatment.*
	5. *PC.01.02.08: The hospital assesses and manages the patient’s risk for falls.*
3. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from [https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf](https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20%28Clean%29%20v2%20%205.12.17.pdf)
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| **#2 Nursing Process: Plan of Care** |
| **Competency Statement** | 1. The LPN at CRMC contributes to the plan of care and updates the plan of care in collaboration with the RN (1, 2a, 3).
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| **Behavioral Criteria** | 1. **Nursing Diagnosis:**
	1. Applies the nursing diagnosis/es (formulated by the RN) as a foundation for implementing interventions (1, 2b, 3).
2. **Planning and Implementation:**
	1. Demonstrates the ability to validate and verify provider orders (2a).
	2. Contributes to the development and modification of the plan of care by (3):
		1. Planning episodic nursing care for a patient whose condition is stable and predictable.
		2. Assisting the RN or supervising provider in identification of patient needs and goals.
		3. Determining priorities of care together with the supervising RN or provider.
	3. Implements aspects of a patient’s care consistent with the LPN scope of practice in a timely and accurate manner including (3):
		1. Follows nurse and physician orders and seek clarification of orders when needed.
		2. Administers treatments, medications and procedures.
		3. Attends to patient and family concerns or requests.
		4. Communicates patient information to health team members including:
			1. Patient concerns and special needs
			2. Patient status and progress
			3. Patient response or lack of response to interventions
			4. Significant changes in patient condition
3. **Outcome Identification and Evaluation:**
	1. Contributes to evaluation of the plan of care by:
		1. Gather, observe, record, and communicate patient responses to nursing interventions.
		2. Modify the plan of care in collaboration with an RN based on an analysis of patient responses.
4. **Resource utilization:**
	1. Contributes to the interdisciplinary team in the development of the plan of care by identifying the role patient care conferences and team rounding has on improving patient outcomes (1, 2a).
	2. Supports the work of the interdisciplinary team during patient care conferences or team patient rounding by implementing interventions as stated by the group.

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| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge:**
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	* Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	* Direct observation of the LPN working in collaboration with the RN to progress toward the attainment of goals and outcomes.
	* The preceptor validates the employee’s ability to update and revise the plan of care by submitting 1 patient audit (Assigned in HealthStream).
	* The new employee completes 1 patient audit (Assigned in HealthStream).
3. **Competency in Attitude:**
	* Writes an Exemplar in the comments section that meets the following criteria:
		1. Describes the importance of the plan of care process in providing collaborative, safe care.
		2. Describes the LPN’s role in the plan of care process and describes a plan of care that they collaborated with the RN to complete.
 |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP 482.23(c), 482.24(c)] Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. The Joint Commission. (2018). Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>
	1. *PC.01.03.01: The hospital plans the patient’s care.*
	2. *PC.02.01.03: The hospital provides care, treatment, and services as ordered or prescribed, and in accordance with law and regulation.*
	3. *RC.02.03.07: Qualified staff receive and record verbal orders.*
3. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from [https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf](https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20%28Clean%29%20v2%20%205.12.17.pdf)
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| **#3 Teamwork, Coordination, and Collaboration** |
| **Competency Statement** | 1. The LPN at CRMC collaborates with the patient and other healthcare providers in the conduct of nursing practice (1, 2, 3a, 3c, 4).
2. The LPN at CRMC communicates effectively in all areas of practice (3b).
3. The LPN at CRMC uses the knowledge of one’s own role and those of other professions to appropriately assess and address health care needs of patients. (1, 5).
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| **Behavioral Criteria** | 1. **Chain of Command**
	1. Contacts appropriate nursing personnel with regards to clinical issues
		1. Utilizes the correct chain of notification for questions or issues regarding clinical practice (Charge Nurses, Administrative Rapid Response, Clinical Educator, and Clinical Nurse Specialists).
		2. Utilizes the correct chain of notification for questions or issues regarding administrative issues (Charge nurses, nurse manager, CNO)
		3. Utilizes the correct chain of notification for questions or issues regarding concerns in patient condition (Physician, Department Chair, Medical Director or Chief of Staff)
		4. Notifies the Rapid Response team early in patient care for declining patient condition, troubleshooting equipment, or advance critical thinking skills.
		5. If situation appears to be an immediate life threatening event, correctly alerts others of a code blue.
2. **Communication Skills**
	1. Acts as a conduit to communicate, collaborate, and coordinate care between a patient and the interprofessional team (3c).
	2. Chooses effective communication tools that enhance team functions (2).
	3. Identifies personal strengths and limitations and identifies how personal communication impacts others on the team, patients, and family (2).
	4. Respectfully gives timely, constructive feedback to peers and others (2).
	5. Identifies barriers to effective communication and team functioning.
	6. Engages in crucial conversations to facilitate conflict resolution.
	7. Effectively participates in team rounding.
3. **Delegation**
	1. Uses the unique and complementary abilities of all members of the team to optimize patient care.
	2. Utilizes proper delegation strategies and provides adequate oversight in accordance with the Wyoming State Board of Nursing when delegating tasks to Certified Nurses Aids (3c, 4).
	3. Identifies the 5 Rights of delegation (Right task, under the Right circumstance, to the Right person, given the Right direction, and with Right supervision and evaluation.)
	4. Recognizes the role LPN’s play in providing care and the role of the LPN in oversight of the LPN.
4. **Hand-off report**
	1. Ensures safety and continuity of care during patient transitions by conducting a thorough hand-off report (2).
	2. Displays proficiency in utilizing AIDET principles when introducing self or coworkers to the patient and family.
5. **Relationship Based Care**
	1. Understands Relationship Based Care and how it applies to nursing practice at CRMC.
	2. Articulates core elements of the Professional Practice Model.
6. **Roles and Scope of Practice**
	1. Explains the roles and responsibilities of other healthcare providers and how the team works together to provide safe and efficient care (4).
	2. To provide continuity of care, recognizes the contributions of each member of the team:
		1. Nurses
		2. Social Workers
		3. Cardiopulmonary Therapists
		4. Physical/Occupational/Speech Therapists
		5. Pharmacists
		6. Rapid Response Team members
		7. PART Team
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| **Evidence of Achievement**(Checklist of what the nurses must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	* Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	* Completes the EBSCO Interactive Checklists: Patient Hand-Off (Assigned in HealthStream).
3. **Competency in Attitude:**
	* Writes an Exemplar in the comments section that meets the following criteria:
		1. Articulates risks associated with incomplete handoffs among providers and across transitions of care.
		2. Discusses the value and process of appropriate delegation in enhancing patient care and the patient experience.
		3. Describes a time when they had to delegate to another member of the team and how they used the 5 rights of delegation.
		4. Describes a time when they had to use the chain of command protocol and communicate clearly with multidisciplinary team members.
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| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP: 482.43 (b)(2), 482.55, 482.58, 482.61, 483.65]. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice. Retrieved from <https://nebula.wsimg.com/2f68a39520b03336b41038c370497473?AccessKeyId=DC06780E69ED19E2B3A5&disposition=0&alloworigin=1>
3. The Joint Commission. (2018). Accessed by The Joint Commission secure web site.
	1. *PC.02.01.05: The hospital provides interdisciplinary, collaborative care, treatment, and services.*
	2. *PC.02.01.21: The hospital effectively communicates with patients when providing care, treatment, and services.*
	3. *PC.02.02.01: The hospital coordinates the patient’s care, treatment, and services based on the patient’s needs.*
4. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from [https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf](https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20%28Clean%29%20v2%20%205.12.17.pdf)
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| **#4 Health Teaching And Health Promotion** |
| **Competency Statement** | 1. The LPN at CRMC reinforces health information provided to the patients as directed by the supervising RN or provider or according to an established educational plan (2a, 2b, 3).
2. The LPN at CRMC maintains competence through ongoing learning.
3. The LPN at CRMC engages in continuous professional and interprofessional development to enhance team performance.
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| **Behavioral Criteria** | 1. **Patient Teaching:**
	1. Continues and reinforces initial education as provided by the RN.
	2. Utilizes teaching strategies that meet the patient’s current beliefs, developmental level, learning needs, language preferences, and readiness to learn (1, 2b).
	3. Uses plain language principles, teach-back method, and/or return demonstration while providing information.
	4. Identifies barriers to learning and collaborates with the RN to develop teaching strategies that align with knowledge acquisition.
	5. Identifies ancillary team members who play a role in patient education, such as:
		1. Diabetic Educator
		2. Pharmacist
	6. Appropriately documents information provided to the patient.
2. **Self-Care promotion:**
	1. Employs strategies to encourage self-health promotion to prevent stress and burnout.
	2. Engages in continuous lifelong learning.
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| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
2. **Competency in Skill:**
	* Describes how patient understanding is validated.
	* Refrains from asking questions such as “Do you have any questions” or “Do you understand”.
	* The preceptor validates the employee’s ability to document education by submitting 1 patient audit (Assigned in HealthStream).
	* Completes 1 patient audit (Assigned in HealthStream).
3. **Competency in Attitude:**
	* Writes an Exemplar in the comments section that meets the following criteria:
		1. Describes the resources they have used in providing education to a patient.
		2. Describes a time that they utilized the “Teach back” method with patient or family.
		3. Describes a patient that experienced educational barriers and how they overcame these barriers
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| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP 482.43 (b), 482.62 (c), 482.43 (c), 483.15]. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. The Joint Commission. (2018). Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>
	1. *PC.02.01.21: The hospital effectively communicates with patients when providing care, treatment, and services.*
	2. *PC.02.03.01: The hospital provides patient education and training based on each patient’s needs and abilities.*
	3. *PC.04.01.01: The hospital has a process that addresses the patient’s need for continuing care, treatment, and services after discharge or transfer.*
	4. *PC.04.01.05 & PC.04.02.01: Before the hospital discharges or transfers a patient, it informs and educates the patient about his or her follow-up care, treatment, and services.*
3. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from [https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf](https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20%28Clean%29%20v2%20%205.12.17.pdf)
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| **#5 Patient/ Family Centered Care** |
| **Competency Statement** | 1. The LPN at CRMC demonstrates honesty, integrity, and practices ethically (3b, 4, 5).
2. The LPN at CRMC practices in a manner that is congruent with cultural diversity and inclusion principles (1, 2).
3. The LPN at CRMC recognizes the patient or designee as the source of control and full partner in the decision making process.
4. The LPN at CRMC respects the patient’s preferences, values, needs (1, 2, 5).
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| **Behavioral Criteria** | 1. **Against Medical Advice (AMA):**
	1. Understands the appropriate steps to take when a patient requests to leave AMA.
2. **Emergency Detention:**
	1. Utilizes appropriate resources to manage the patient placed on a protective hold (emergency detention).
	2. Identifies the process for managing care while maintaining safety for caring for inmates.
3. **Ethics:**
	1. Delivers care in a manner that preserves and protects patient autonomy, dignity, and rights (4).
	2. Serves as a patient advocate protecting patient’s rights and assisting patients in developing skills for self-advocacy (4).
	3. Maintains a therapeutic and professional patient-nurse relationship with appropriate professional role boundaries (4).
	4. Reports illegal, incompetent, or impaired practices (4).
	5. Identifies correct steps to take during cases during cases that create an ethical dilemma.
	6. Demonstrates high standards of ethical conduct and quality of care in one’s contributions to team-based care (1).
4. **Patient DNR Status:**
	1. Knows how to access the patients advanced directive information for living will, DNR, or other like information.
	2. Verbalizes understanding of patient code status.
	3. Correctly identifies patients that are actively a DNR by utilizing hospital protocol.
5. **Patient/ Family Centered Care:**
	1. Queries patient to determine the level of preferred family involvement (5).
	2. Identifies how family dynamics, cultural background, age, ethnic, community, and socioeconomic backgrounds impact and shape the patients personal values (1, 2, 5).
	3. Places the interests of the patients at the center of health care delivery. Recognizes the patient is the overall authority on their health. Honors patient’s preferences and respects patient’s decisions.
	4. Identifies and assesses barriers to effective communication and common barriers of active involvement of patients in their own health care process.
	5. Communicates with patients of various cultures utilizing medical interpreters, translators, and written materials where appropriate. Staff know how to access a medically qualified interpreter when needed.
	6. Considers the unique challenges of vulnerable populations and its impact on care.
	7. Identifies the impact personal attitudes and values have patient care.
6. **Patient grievances:**
	1. Uses basic strategies to manage an upset patient/ family member and mitigate a solution that meets the needs of the patients and the healthcare team.
	2. Alerts appropriate chain of command or patient grievance coordinator for issues involving patient complaints (1, 3f).
	3. Receives basic knowledge on techniques to resolve conflicts when dealing with frustrated or irate patients/ family members. Utilizes help and recruits appropriate resources when patients are beginning to elevate.
	4. Alerts the RN/charge nurse of conflicts.
7. **Patient Rights and Responsibilities**
	1. Articulates understanding of the need for patients-rights and responsibilities. Can locate and access the rights and responsibility forms (1, 3d).
8. **Patient Satisfaction:**
	1. Verbalizes CRMC’s Mission Vision, and Values (3a).
	2. Identifies where to locate the units/ organizations quality patient satisfaction reports.
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| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	1. Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	2. Reviews related hospital-specific policies and references listed below.
2. **Competency in Attitude:**
	1. Writes an Exemplar in the comments section that meets the following criteria:
		1. Describes a situation in which they provided care to a patient that was not satisfied with their care. Describes how this situation was handled and describes outcomes.
		2. Describes a patient interaction with a patient that held a different value/ belief system than the LPN.
		3. Describes how this impacted care provided and articulates what changes were made to the plan of care to meet these needs.
		4. Lists the steps required for using interpreter services.
 |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP 482.13, 483.10, 483.12(c)(1), 482.58(b)] Retrieved from <https://www.cms.gov/RegulationsandGuidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice. Retrieved from <https://nebula.wsimg.com/2f68a39520b03336b41038c370497473?AccessKeyId=DC06780E69ED19E2B3A5&disposition=0&alloworigin=1>
3. The Joint Commission. (2018). Retrieved from <https://edition.jcrinc.com/ProxyLogin.aspx?lnk=8AA7CF7F3484>
	1. *LD.02.01.01: The mission, vision, and goals of the hospital support the safety and quality of care, treatment, and services.*
	2. *LD.04.02.03: Ethical principles guide the hospital’s business practice.*
	3. *PC.01.02.09: The hospital assesses the patient who may be a victim of possible abuse and neglect.*
	4. *RI.01.01.01 & RI.02.01.01: The hospital respects, protects, and promotes patient rights. Patient is informed of their rights and responsibilities.*
	5. *RI.01.02.01: The hospital respects the patient’s right to participate in decisions about his or her care, treatment, and services.*
	6. *RI.01.07.01: The patient and his family have the right to have a complaint reviewed by the hospital.*
4. Psychiatric-Mental Health Nursing. (2018). Psychiatric-Mental Health Nursing: Scope and Standards of Practice 2014 Edition. Retrieved from <https://www.apna.org/i4a/pages/index.cfm?pageid=3342>
5. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from [https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf](https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20%28Clean%29%20v2%20%205.12.17.pdf)
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| **#6 Environmental Health and Safety** |
| **Competency Statement** | 1. The LPN at CRMC promotes an environment of safety for patients, visitors, and other healthcare professionals (2).
2. The LPN at CRMC minimizes risk of harm to patients and providers (1, 2, 3d).
 |
| **Behavioral Criteria** | 1. **Alarm Safety:**
	1. Responds appropriately to alarms (3h).
	2. Reports concerns regarding alarm parameters to the RN.
	3. Appropriately tags and reports broken equipment.
	4. Removes broken equipment from service.
2. **Change in patient condition:**
	1. Advocates for the patient when care processes and treatment decisions do not appear to be in the best interest of the patient. In doing so utilizes the appropriate chain of command until a resolution is reached.
	2. Consults with Administrative Rapid Response team members when patient safety is of concern or for increasing patient instability.
3. **Code Response:**
	1. Follows policy for emergency situations including, tornado plans, infant abductions, mass casualty plans, snow plans, and fire response plans.
		1. Seeks help and/or calls a code yellow during potentially harmful situations.
	2. Follows policy for emergency situations including active shooter, or bomb threat.
	3. Identifies their role in caring for a declining patient or during a patient code:
		1. Utilizes AHA BLS skills in initiating a code (5).
		2. Utilizes appropriate notification system in the event of a code.
		3. Locates the code cart and can set the defibrillator to AED mode, or utilizes unit AED.
		4. Follows direction from senior staff and rapid response during patient emergencies.
4. **Egress:**
	1. Patients may not be able to move on their own to escape fire or danger. Therefore, the LPN:
		1. Maintains the hallways clear of clutter for moving patient beds.
		2. Ensures that any self-closing doors are not propped open unless secured with an automatic release device that closes the door in response to an emergency (1, 3d).
5. **Environmental Awareness:**
	1. Identifies physical safety elements in the environment such as the fire extinguisher locations, fire alarm stations, escape routes, evacuation equipment, fire doors, medical gas and oxygen shut off valves (3a, 3e, 3f).
6. **Evacuation Equipment:**
	1. Describes steps to take during an evacuation and properly uses emergency evacuation equipment.
		1. Med-sled
		2. Evacuation Chair
7. **Patient Identification:**
	1. Prevents patient errors by utilizing at least two patient identifiers when performing treatments or administering medications. The patient room number cannot be used as an identifier (3g).
8. **Purposeful Rounding:**
	1. Identifies the role purposeful/hourly rounding plays in promoting patient safety.
	2. Correctly articulates the key concepts involved in purposeful rounding.
9. **Reporting:**
	1. When actual or potential harm to a patient, visitor, or staff member occurs, communicates and reports concerns related to the event to the appropriate leader. Documents these concerns in the MIDAS reporting system.
10. **Safe Environment:**
	1. Values the contributions of standardization in improving patient safety and outcomes.
	2. Safeguards privacy and confidentiality for patients and patient data (3k, 4).
11. **Suicide Prevention/ Ligature Risk:**
	1. Protects suicidal patients from self-harm by ensuring a safe room environment by removing potential risks for ligature, cutting, or ingestion harm (3i).
 |
| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	1. Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	2. Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	1. Participates in Code Blue or other practice drills on the unit when provided**.**
3. **Competency in Attitude:**
	1. Actively participates in purposeful rounding as a way to increase patient safety.
	2. Describes with the unit leader, an unsafe situation that was observed and discusses what actions were taken as a result of this situation.
 |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP: 482.13, 482.41 (b)(1)(i), 482.42, 482.51]. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. Interprofessional Education Collaborative. (2016). Core competencies for interprofessional collaborative practice. Retrieved from <https://nebula.wsimg.com/2f68a39520b03336b41038c370497473?AccessKeyId=DC06780E69ED19E2B3A5&disposition=0&alloworigin=1>
3. The Joint Commission. (2018). Accessed by The Joint Commission secure web site.
	1. *EC.02.03.01: The hospital manages fire risks.*
	2. *EC.02.02.01: The hospital manages risks related to hazardous materials and waste.*
	3. *IC.02.02.01: The hospital reduces risk of infections associated with medical equipment, devices, and supplies.*
	4. *LS.03.01.20: The hospital maintains the integrity of the means of egress.*
	5. *LS.02.01.34: The hospital provides and maintains fire alarm systems.*
	6. *LS02.01.35: the hospital provides and maintains systems for extinguishing fires.*
	7. *NPGS.01.01.01: Use at least two patient identifiers when providing care, treatment and services.*
	8. *NPSG.06.01.01: Improve the safety of clinical alarm systems.*
	9. *NPSG.15.01.01: Identify patients at risk for suicide.*
	10. *PC.02.01.11: Resuscitation services are available throughout the hospital.*
	11. *IM.02.01.01: The hospital protects the privacy of health information*
4. Wyoming State Board of Nursing. (2018). Scope and standards of nursing practice and CNA role. Retrieved from [https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20(Clean)%20v2%20%205.12.17.pdf](https://nursing-online.state.wy.us/Resources/FINAL%20--%20Ch%203%20%28Clean%29%20v2%20%205.12.17.pdf)
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| **#7 Information/Technology** |
| **Competency Statement** | 1. The LPN at CRMC is accountable for clear and accurate documentation of the care provided to the patient (2, 3d).
 |
| **Behavioral Criteria** | 1. Verbalizes expectations and responsibilities of complete documentation including but not limited to:
	1. Pain- frequency of pain assessment and reassessment
	2. Safety checks- frequency and requirements
2. Engages in safe electronic practices to protect patient information including the electronic medical record. Safeguards the privacy and confidentiality of patients and patient data (1, 2, 3a).
3. Identifies resources for assistance in documentation in the medical record.
4. Identifies the correct process for accurately documenting errors in the medical record (3b).
5. Understands the importance of charting in a timely manner (2, 3f).
6. Demonstrates clear understanding of the ethical, legal, and regulatory implications breakdowns in patient confidentiality (1).
7. Verbalizes the expectations and process of documentation in case of an unexpected downtime (2, 3c).
8. Utilizes order entry and order verification process to validate an order is appropriate and safe for patient care (3g).
9. Oversees delegation of assigned charting requirements for students or other ancillary team members where appropriate (2, 3e).
10. Consults provider before sharing / disclosing information to the patient regarding tests/treatments.
11. Encourages the patient to engage in their care by facilitating access to the patient portal through the electronic medical record.
 |
| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	1. Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	2. Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	1. The preceptor validates the employee’s ability to document appropriately by submitting 1 patient audit (assigned in checklist of LPN's HealthStream).
	2. The new employee validates their ability to document appropriately by submitting 1 patient audit (assigned in LPN's HealthStream).
3. **Competency in Attitude:**
	1. Documents all required information in a timely manner.
	2. Delegation of assigned charting requirements are co-signed where appropriate.
 |
| **References** | 1. American RNs Association. (2015) *Nursing scope and standards of practice*. (3rd ed.)
2. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP 482.13, 482.15 (b)(5), 482.24 (c), 482.24(b), 482.58, 482.61 (c), 483.10]. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
3. The Joint Commission. (2018). Accessed by The Joint Commission secure web site.
	1. *IM.02.01.01: The hospital protects the privacy of health information*
	2. *IM.02.01.03: The hospital maintains the security and integrity of health information*
	3. *IM.02.01.03: The hospital plans for continuity of its information management processes*
	4. *RC.01.01.01: The hospital maintains complete and accurate medical records for each individual patient.*
	5. *RC.01.02.01: Entries in the medical record are authenticated.*
	6. *RC.01.03.01: Documentation in the medical record is entered in a timely manner.*
	7. *RC.02.03.07: Qualified staff receive and record verbal orders.*
 |
| **#8 Safe Medication Administration**  |
| **Competency Statement** | 1. The LPN at CRMC safely manages and administers medications to the patient.
 |
| **Behavioral Criteria** | 1. Utilizes the six rights of medication administration for med pass (1, 2j).
2. Utilizes the six rights of medication administration during an independent double check of medications with other nurses (1, 2j).
3. Uses technology (bedside bar scanning) to assure safe medication administration.
4. Correctly identifies the process for rescheduling medications, due to patient preference or clinical indications.
5. Utilizes weight dose based medication calculations in determining correct dosages where applicable.
6. Recognizes and alerts the RN of adverse drug reactions or unexpected responses to medication (1, 2k).
7. Takes the correct actions when a medication error occurs (1, 2k).
8. Avoids using dual parameter orders on medications and takes steps to correct orders that reflect duplicate ranges.
9. Correctly disposes of medications in the appropriate receptacles including narcotics and hazardous drugs (2b).
10. Labels medications or other solutions not immediately administered and places a BUD date on all opened vials (2c, 2d).
11. Follows a list of prohibited abbreviations, acronyms, symbols, and dose designations (2a).
12. Collaborates with pharmacy when questions arise regarding medication administration.
13. Identifies High-alert medications and actions to take when administering high-alert medications (1, 2g).
14. Contrasts look alike and sound alike medications (1, 2h).
15. Safely administers problem prone medications. Examples include but are not limited to:
	1. PO and Sub Q Anticoagulation Therapy (2d)
	2. Zosyn Administration (2f)
16. **Home Medications:**
	1. Follows facility policy in the event the patient requests the use of home medications while in the hospital (1, 2i).
	2. Counts medications in front of patient, secures signature from second RN, and delivers the medications to the pharmacy for review.
	3. Identifies that pharmacy will not accept medications that are not labeled or brought in via pill box.
	4. For patient that is ordered to self-administer medications, assesses patients capability to safely administer own medications and documents this assessment.
17. **Multidrug Resistant Organisms.** (Antimicrobial Stewardship):
	* + 1. Follows evidence-based practices to prevent the proliferation of antibiotic resistant bacteria through the appropriate use of antibiotics (2f).
				1. Describes the risks of overuse of inappropriate antibiotics, and how overuse leads to antibiotic resistant strains of bacteria.
				2. Lists the various types of Antibiotic resistant strains.
				3. Identifies the various mechanisms of antibiotic resistance.
 |
| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	* Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill (The preceptor will validate that the LPN can):**
	* Demonstrates the use of the medication administration cabinet.
	* Demonstrates safe use of narcotic waste procedures.
	* Complies with barcode administration procedures.
	* Applies the six rights of safe medication administration for routine medication administration and during the dual sign off procedures.
3. **Competency in Attitude (Through discussions with Manager and Preceptor):**
	* Identifies situations that lead to medication errors
	* Discusses feelings and attitudes related to medication errors.
 |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP: 482.23 (c), 482.25 (b), 482.26 (b), 482.53 (b)]. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. The Joint Commission. (2018). Accessed by The Joint Commission secure web site.
	1. *IM.02.02.01 The hospital effectively manages the collection of health information.*
	2. *EC.02.02.01 & MM.01.01.03: The hospital manages risks related to hazardous materials and waste.*
	3. *NPSG.03.04.01 & MM.05.01.09: Label all medications, medication containers, and other solutions on and off the sterile field in perioperative and other procedural settings. Medications are labeled.*
	4. *NPSG.03.05.01: Reduce the likelihood of patient harm associated with the use of anticoagulant therapy.*
	5. *NPSG.03.06.01 & MM. 08.01.01: Maintain and communicate accurate patient medication information. Manages the medication reconciliation process.*
	6. *NPSG.07.03.01 & MM.09.01.01: Implement evidence-based practices to prevent health care –associated infection due to multidrug-resistant organisms in acute care hospitals. The hospital has an antimicrobial stewardship program based on current scientific literature.*
	7. *MM.01.01.03: The hospital safely manages high –alert hazardous medications.*
	8. *MM.01.02.01: The hospital addresses the safe use of look-alike/ sound-alike medications.*
	9. *MM.03.01.05: The hospital safely controls medications brought into the hospital by patients or their families.*
	10. *MM.06.01.01: The hospital safely administers medications.*
	11. *MM.07.01.03: The hospital responds to actual or potential adverse drug events, significant adverse drug reactions and medication errors.*
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| **#9 Quality Improvement Indicators/ Core Measures**  |
| **Competency Statement** | 1. The LPN at CRMC understands the role that quality indicators play in guiding safe patient care (1, 2a, 2b).
2. The LPN at CRMC is prepared daily for accreditation surveys.
 |
| **Behavioral Criteria** | 1. **Survey Readiness:** Demonstrates readiness for visits from accreditation site surveyors such as Joint Commission, Center for Medicare and Medicaid Services, and/ or other unit specific accreditation centers.
2. **Quality Indicators:**
	1. Identifies which individual core measures are reported to the Centers for Medicare and Medicaid services (CMS) (2, 3).
	2. Identifies which measures are reported to the National Database of Nursing Quality Indicators (NDNQI).
	3. Explains how each nurse’s actions impacts these quality measures.
	4. Identifies the implications of poor performance on quality indicators.
	5. **Core Measures:**
		1. **Heart Failure:**
			* 1. Ensures left ventricular function has been evaluated during hospital stay.

If ejection fraction is < 40%, the LPN ensures the patient has a prescription upon discharge for the following items (or documentation completed if contraindicated): ACE inhibitor or Angiotensin II receptor blocker (ARB) * + - * 1. Identifies patients who are discharged with heart failure have received discharge education on:

ActivityDietFollow-up appointmentWeight monitoringDischarge medicationsWhen to call the provider* + 1. **Immunizations:** Follows hospital policies and evidence-based practices to provide immunizations.
			- 1. Demonstrates a complete immunization screening on admission, including historical documentation of vaccines.
				2. Properly orders the vaccine from the pharmacy.
				3. Provides the patient/family with the Vaccination Information Sheets (VIS) appropriate for the correct vaccination.
				4. Administers the vaccination in the appropriate manner.
				5. Documents the vaccination in the MAR.
		2. **Sepsis Bundles:**
			1. Recognizes signs and symptoms of sepsis/ septic shock (2 or more signs of Systemic Inflammatory Response Syndrome SIRS).
			2. Alerts the RN of patients that meet any of the risk factors for sepsis, and follows protocols to assure timely treatment.
		3. **Venous Thromboembolism (VTE) Prophylaxis and Anticoagulation:** Follows evidence-based practices to prevent the development of DVTs and blood clots through the use of sequential compression devices and/or coagulation therapy.
	1. **National Data on Nursing Quality Indicators (NDNQI):**
		1. **Fall Prevention:** Follows evidence-based practices to prevent falls while the patient is hospitalized (3f).
			+ 1. Identifies patients at high risk for falls based on individual patient population.
				2. Promotes evidence-based activities to improve safe care and prevent falls.
				3. Demonstrates appropriate interventions after a fall has occurred. Follows and documents post fall management.
				4. Correctly follows fall alarms including but not limited to bed alarms and chair alarms.
				5. Utilizes the AvaSure monitor in prevention of falls.
		2. **Pressure Injury Prevention:** Follows evidence-based practices to prevent pressure ulcers while the patient is hospitalized.
			+ 1. Conducts subsequent Braden skin assessments and alerts the RN of patients that score high on the scale so appropriate interventions may be initiated.
				2. Updates the plan of care to reflect activities that prevent pressure ulcer development.
				3. Provides accurate documentation of wound including photos, when a wound is identified.
				4. Collaborates appropriately with the wound care team to assure optimal healing of a wound/ pressure ulcer.
				5. Reports wounds acquired in the hospital setting via MIDAS reporting system.
	2. **Infection Prevention:**
		+ 1. **Central Line-Associated Blood Stream Infection (CLABSI**): Follows evidence-based processes in the management of central line, PICC lines, and IV lines to prevent central line blood stream infections (3c).
				1. Notifies the RN when there are changes in the central line dressing that could impact patient health.
			2. **Catheter Associated Urinary Tract Infection (CAUTI):** Follows evidence-based processes in the management of urinary catheters to prevent catheter associated urinary tract infections (3e).
				1. Articulates appropriate indications for indwelling catheter use.
				2. Identifies alternative treatments and can appropriately place external catheters.
				3. Follows evidence-based guidelines and hospital policy in the insertion and management of a urinary catheter. This includes the use of the hospital-based nurse-driven protocol.
				4. Monitors for side effects of use of a urinary catheters.
				5. Appropriately utilizes a bladder scanner for the identification of urinary retention.
				6. Documents care given in the electronic medical record.
			3. ***Clostridium Difficile (C.Diff)***: Prevents the spread of *C. Diff* by using evidence-based infection control measures.
				1. Demonstrates proper hand washing techniques instead of hand sanitizer for patients for *C.Diff* precautions*.*
				2. Demonstrates appropriate use of bleach wipes, instead of routine disinfection wipes, when cleaning equipment and surfaces for patients in precautions for *C.Diff*.
				3. Orders stool specimens and utilizes the nurse driven protocol for the detection of patients with *C.Diff*.
				4. Bathes or showers patients admitted for *C.Diff*. daily. Changes linen daily, and wipes down mattresses daily with bleach wipes.
			4. **Surgical Site Infections:**  Implements evidence-based guidelines for the prevention of surgical site infections (3d).
				1. Articulates the importance of providing showers/ baths with an Antimicrobial/ Antiseptic skin cleanser prior to surgery.
				2. Articulates the importance of utilizing Pre-Op wipes.

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| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	* Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	* The preceptor validates the employee’s ability to be prepared for accreditation surveys by submitting a “Survey Readiness Preparation checklist” (assigned in checklist of LPN's HealthStream).
	* Preceptor validates that the employee can locate hospital-specific quality indicators on the hospital web page.
	* Demonstrates personal responsibility in assuring personal practice reflects current standards.
3. **Competency in Attitude:**
	* Discusses the relationship between personal professional practice and organizational quality outcomes.
 |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. Press Ganey. (2018). Nursing Quality (NDNQI). Retrieved from <http://www.pressganey.com/solutions/clinical-excellence/nursing-quality>
3. The Joint Commission. (2018). Accessed by The Joint Commission secure web site.
	1. *LD.03.04.01: The hospital communicates information related to safety and quality to those who need it, including staff, licensed independent practitioners, patients, families, and external interested parties.*
	2. *LD.03.06.01: Those that work in the hospital are focused on improving safety and quality.*
	3. *NPSG.07.04.01: Implement evidence-based practices to prevent central line-associated bloodstream infections.*
	4. *NPSG.07.05.01: Implement evidence-based practices for preventing surgical site infections.*
	5. *NPSG.07.06.01: Implement evidence-based practices to prevent indwelling catheter-associated urinary tract infections (CAUTI).*
	6. *PC.01.02.08: The hospital assesses and manages the patient’s risk for falls.*
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| **#10 Safety in Utilizing Common Procedures**  |
| **Competency Statement** | 1. The LPN at CRMC utilizes common procedures/ skills to provide safe patient care.
 |
| **Behavioral Criteria** | CRMC identifies that LPNs may not have the opportunity while on orientation to become proficient in all nursing tasks. Therefore, the LPN at CRMC collaborates with experienced staff members to ensure patient safety is maintained when completing new or unfamiliar skills. 1. **Admission/ Transfers.**
	1. Within the LPN scope of practice, assists with the admission, transfer, and discharge of patients.
2. **Critical Lab Values:**
	1. Reports critical lab values to providers established time frames (3c).
	2. Documents notification of the provider appropriately.
3. **End-of-Life Care:**
	1. Understands the processes of end-of-life care, post-mortem care, and comfort care in the identified unit (3j)
	2. Identifies the appropriate process for organ donation (3k).
4. **Glucometer use:**  (3l)
	1. Attends new employee orientation and receives training on the proper use of the glucometer.
	2. Monitors and evaluates patient blood sugar levels.
	3. Utilizes screening results to follow physician parameters for the management of hyper and hypoglycemia.
	4. Appropriately labels QC and strips with expiration dates.
	5. Performs QC and maintains annual QC.
5. **Immediate post-operative care:**
	1. Identifies parameters for post op monitoring and vital signs.
	2. Adequately controls post op pain.
	3. Identifies signs of symptoms of common postoperative complications specific to the type of procedure performed.
6. **Infection Prevention:** Utilizes hospital policies and evidence-based practices to prevent the spread of communicable diseases and limit harm to patients (1, 3a).
	1. Contrasts the differences in the various types of precautions.
	2. Understands disease states and identifies infectious process that cause communicable diseases.
	3. Works to prevent the spread of hospital acquired infection by identifying and using appropriate PPE while caring for patients under different forms of isolation.
		1. Standard Precautions
		2. Contact Precautions
		3. Droplet Precautions
		4. Airborne Precautions
		5. Neutropenic Precautions
7. **IV Maintenance:**
	1. Under the direction of the RN and maintaining the LPN’s scope of practices, follows hospital policies and evidence-based practices for the maintenance of intravenous care.
	2. Completes the phlebitis and infiltration scale per hospital policy.
	3. Identifies steps to take in the event of infiltration or extravasation.
8. **Pain management:**
	1. Collaborates with the RN regarding effective treatment in the relief of pain and suffering of the patient.
	2. Initiates effective treatments to relive pain and suffering, monitors patient pain, and advocates for patients comfort (3b, 3d).
	3. Demonstrates a comprehensive understanding of the concepts of pain and suffering, including physiologic models of pain and comfort (2).
	4. Monitors patient’s pain using the most appropriate scale following hospital policy parameters.
	5. Establishes a mutually identified pain goal and updates the goal as necessary.
	6. Articulates various intervention techniques in the management of pain. Utilizes pharmacological and non-pharmacological pain interventions that are evidence-based and per organizational standards.
	7. Documents pain assessments and interventions to reflect care given.
9. **Restraint Use:** Uses hospital protocols and demonstrates understanding of proper use of restraints (1, 3e, 3f).
	1. Defines restraint and seclusion.
	2. Lists alternatives to using restraints.
	3. Describes appropriate use of restraints while maintaining patient dignity and advocating for patient rights.
	4. Demonstrates the correct application of soft restraints.
	5. Describes the importance of a one hour face-to-face interview and who is responsible for obtaining the initial one hour face-to-face with the patient.
	6. Identifies the various timing of monitoring and release parameters associated with non-violent and violent restraints.
	7. Reviews the CRMC policy on restraints and seclusion.
 |
| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	* Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	* Demonstrates skill in safely securing restraints by completing the “EBSCO: Interactive checklist: Limb restraints adults” check sheet (located in HealthStream).  Must be validated by preceptor.
	* Employee demonstrates skills listed above that are appropriate for job responsibilities
3. **Competency in Attitude (Discusses with nursing leader and Preceptor):**
	* Follows policy and procedures and seeks guidance when not sure of appropriate procedures.
	* Utilizes appropriate reference materials when seeking clarity around procedures.
	* Seeks help from key experts for procedures that the LPN is new to utilizing or unsure of.
 |
| **References** | 1. Centers for Medicare and Medicaid Services. (2017). State Operations Manual: Survey Protocol, Regulations and Interpretive Guidelines for Hospitals. [COP: 482.13 (b) & (e), 482.21, 482.24 (c), 482.27, 482.42, 482.43, 482.45(a), 482.51(b), 482.58(b)(3), 482.62, 483.12(a)(2)]. Retrieved from <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltcf.pdf>
2. Quality and Safety Education for RNs. (2018). QSEN Competencies. Retrieved from <http://qsen.org/competencies/pre-licensure-ksas/>
3. The Joint Commission. (2018). Accessed by The Joint Commission secure web site.
	1. *IC.02.01.01: The hospital implements its infection prevention and control plan.*
	2. *LC.04.03.13: Pain assessment and Pain management, including safe opioid prescribing, is identified as an organization priority for the hospital.*
	3. *NPGS.02.03.01: Report critical results of tests and diagnostic procedures on a timely basis.*
	4. *PC.01.02.07: The hospital assesses and manages the patient’s pain and minimizes the risks associated with treatment.*
	5. *PC.02.02.13: The patient’s comfort and dignity receive priority during end-of-life care.*
	6. *PC.03.05.01 through PC.03.05.19: Restraint and seclusion application, monitoring, documentation, reporting.*
	7. *PC.04.01.03: The hospital discharges or transfers the patient based on his or her addressed needs and the organization’s ability to meet those needs.*
	8. *PC.05.01.09: The hospital safely provides blood and blood components.*
	9. *RI.01.03.01: The hospital honors the patient’s right to give or withhold informed consent.*
	10. *RI.01.05.01: The hospital addresses patient decisions about care, treatment, and services received at the end of life.*
	11. *TX.01.01.01: The hospital develops and implements written policies and procedures for donating and procuring organs and tissues.*
	12. *WT.03.01.01: Staff and licensed independent practitioners performing waived tests are competent.*
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| **#11 Safety in Utilizing Common Skills/Equipment** |
| **Competency Statement** | 1. The LPN at CRMC utilizes common equipment provide safe patient care.
 |
| **Behavioral Criteria** | CRMC identifies that LPNs may not have the opportunity while on orientation to become proficient in all nursing tasks. Therefore, the LPN at CRMC collaborates with experienced staff members to ensure patient safety is maintained when completing new or unfamiliar skills (1). 1. **Call light system**
	1. Properly utilizes patient call system to track location of peer nursing staff.
	2. Answers call lights according to unit/ organization expectations.
	3. Utilizes tracker badges where appropriate.
2. **Code cart and emergency equipment:**
	1. Locates the code cart and demonstrates appropriate use of the code cart and emergency equipment.
3. **Incentive Spirometer (IS):**
	1. Demonstrates with a patient or discusses the proper use of IS.
	2. Collaborates with Cardiopulmonary to implement the use of IS.
	3. Documents all patient’s attempts in utilizing IS.
4. **Patient Transfer Equipment:**
	1. Utilizes specialized transfer equipment to move patients safely from one location to the next.
	2. Uses lift equipment for bariatric patients.
	3. Attends new employee training to receive hands on demonstration transfer devices including those listed below, but not limited to:
		1. Lateral-Transfer Devices
		2. Sling Lifts
		3. Sit-to-Stand Assistive Devices
		4. Full-Assist Lifts
5. **Personal Protective Equipment (PPE):**
	1. Demonstrates appropriate use of PPE to prevent the spread of infection.
	2. Attends powered air purifying respiratory (PAPR) training live at new employee orientation.
	3. Demonstrates correct use of the N95 respirator.
6. **Sequential Compression devices:**
	1. Applies, monitors, and describes the need for sequential compression devices.
7. **Specialty Beds:**
	1. Demonstrates use of standard bed utilized in the department.
	2. Identifies patients that meet criteria for the use of a specialty bed.
	3. Demonstrates correct use of specialty beds including the bariatric bed and/or the air bed depending on job responsibilities.
8. **Telemetry Monitoring (Tele):**
	1. Identifies patients that are candidates for telemetry monitoring.
	2. Identifies the role the LPN plays in applying and supporting telemetry monitoring.
	3. Alerts the telemetry techs and when there is anticipated removal of the tele-box for bathing, or other procedures.
	4. Immediately alerts the nurse and the charge nurse when notified by the tele-tech of abnormal events.
9. **Additional equipment (Preceptor is responsible for going over the following items with the new employee):**
	1. It is impossible to ensure every LPN experiences every skill needed during orientation. LPNs on orientation may not have the opportunity to become competent or proficient in the following skills.
	2. The following skills will be discussed with the preceptor and where available during orientation will be demonstrated.
		1. **Bladder Scanner:**
			1. Correctly utilizes the bladder scanner to determine bladder fullness.
			2. Appropriately documents results.
		2. **Central monitoring devices** (Where utilized)
		3. **Oxygen Administration set up and maintenance:**
			1. Correctly uses oxygen delivery devices commonly found on the unit.
			2. Facilitates the acquisition of home O2.
			3. Titrates oxygen saturations according to provider orders.
				1. Appropriately notifies provider for increasing O2 needs
		4. **Wall Suctioning:** Correctly uses wall suctioning.
		5. **Wound Vac:**
 |
| **Evidence of Achievement**(Checklist of what the LPN must do to fulfill this requirement) | Identified behavioral criteria can be assessed using competency in knowledge, skill, and attitude.  The LPN **must** complete the following:1. **Competency in knowledge**:
	* Completes associated HealthStream courses listed below and successfully completes posttest quizzes.
	* Reviews related hospital-specific policies and references listed below.
2. **Competency in Skill:**
	* Employee demonstrates skills listed above that are appropriate for job responsibilities.
3. **Competency in Attitude (Discuss with nursing leader or preceptor):**
	* Follows policy and procedures and seeks guidance when not sure of appropriate procedures.
	* Utilizes appropriate reference materials when seeking clarity around procedures.
	* Collaborates with experienced staff members to insure patient safety is maintained when completing new or unfamiliar skills.
 |
| **References** | None |

Approximate Time to complete on-line learning courses

|  |  |  |
| --- | --- | --- |
| Competency Statement | Approximate minutes needed for curriculum completion  | Total  |
| #1 Nursing Process: Assessment | 40 |
| #2 Nursing Process: Plan of care | 0 |
| #3 Teamwork, coordination, and collaboration | 80 |
| #4 Health Teaching and Health Promotion | 15 |
| #5 Patient/ Family Centered Care | 170 |
| #6 Environmental Health and Safety | 125 |
| #7 Information Technology | 15 |
| #8 Safe Medication Administration | 220 |
| #9 Quality Improvement Indicators/ Core Measures | 230 |
| #10 Safety in Utilizing Common Procedures | 130 |
| #11 Safety in Utilizing Common Skills and Equipment | 120 |
| Complete Competency statements | 60 |  |
| Audit | 30 | 1135 min/ **18 hours** |