Not Your Grandma's BINGO: Basic Integrated Nursing General Orientation

Andi Churchill-Boutwell BSN, RN-BC, Carol A. Noriega MSN, RN, CEN Carole "Gert" Mayes MSN, RN-BC, CNOR, Rhonda Roberts BSN, MSA, RNC, Bastian Auer BA, ASN, CEN

Rutland Regional Medical Center
Rutland Vermont

Rutland Regional Medical Center
An Affiliate of Rutland Regional Health Services

MAGNET RECOGNIZED — AMERICAN NURSES CREDENTIALING CENTER

Abstract

The onboarding process within our rural community hospital for new nurses and medical professionals was fragmented and lacked organizational continuity. Through review of current evidence based practices, an opportunity was identified to advance the organization's enculturation of new staff members utilizing techniques and approaches not previously attempted on an organizational scale.

Utilizing inter-professional collaboration between Nursing Clinical Educators, Training Specialists and a regional MAGNET hospital Simulation Specialist, an action plan was developed. The action plan, based on best practice and exemplars, prompted investigation into development of an official simulation lab for use by all hospital staff members across the professional spectrum. This plan was quickly endorsed by senior leadership. Simultaneously, a program to onboard new nursing staff with various levels of experience was developed - Basic Integrated Nursing General Orientation (BINGO).

The BINGO program's evaluation data indicated participants' desired additional interactivity and simulation that outstripped the capabilities of the current mannequins and analogs. After a thorough review of literature and collection of best evidence based practices, a vendor was contacted that could offer a high fidelity mannequin. An onsite demonstration was conducted and the organization found this to be a highly desirable instruction and learning methodology. Through shared decision making between clinical nursing staff and senior leadership, a plan to obtain a high fidelity mannequin was submitted to Capital Planning Committee. The entire process from identification of the onboarding opportunity to the execution of a simulation lab utilizing a high fidelity mannequin occurred over nine months through this inter-professional collaboration.

Goals

- Increase use of interactive training
- Decrease orientation time for inpatient unit nurses
- Increase inter-professional collaboration
- Consistent training programs with succession planning
- Efficient use of Clinical Educator time
- Decrease class preparation time using a centralized training equipment storage

Process/Methods

May 2014 Original State

Each nursing unit working in silo's and duplicating efforts

Surgical Care Unit
Intensive Care & Progressive Care Units
Emergency Department
Medical Oncology Unit
Birth Center/Women's & Children Units
Operating Room/ Endoscopy/ Post Anesthesia Care Unit/ Ambulatory Care Unit

June 23, 2014

- BINGO creation with shared teaching
- Simulation Lab idea discussed by Clinical Educators
- Supporting evidence identified

July 7, 2014

- Simulation Lab proposal to facility leadership
- Room 565 becomes the Sim Lab

July 23, 2014

- BINGO inception with armless "Pat Moore" as the patient *(very low fidelity)*
- Paper evaluations of BINGO indicate need for more interactivity

August 2014

- Sim Lab use available to the organization

November 18, 2014

- Sim Lab policy & procedure developed
- Electronic evaluation for BINGO and Sim Lab initiated
- Sim Lab calendar developed to manage usage

Process/Methods cont.

December 11-12, 2014: Sim Lab Open House

- High fidelity mannequin present to demonstrate our future
- Electronic Sim Lab Request Form implemented

February 2015

- High Fidelity Mannequin ordered
- Routine supplies for new hire training obtained and stored in Sim Lab

May 2015

- High Fidelity Mannequin arrived
- Mock Code Cart setup

June 2015

- Basic training and use of High Fidelity Mannequin begun

July 8-9 2015

- Formal training on High Fidelity Mannequin
- Begin full use of mannequin during BINGO!!

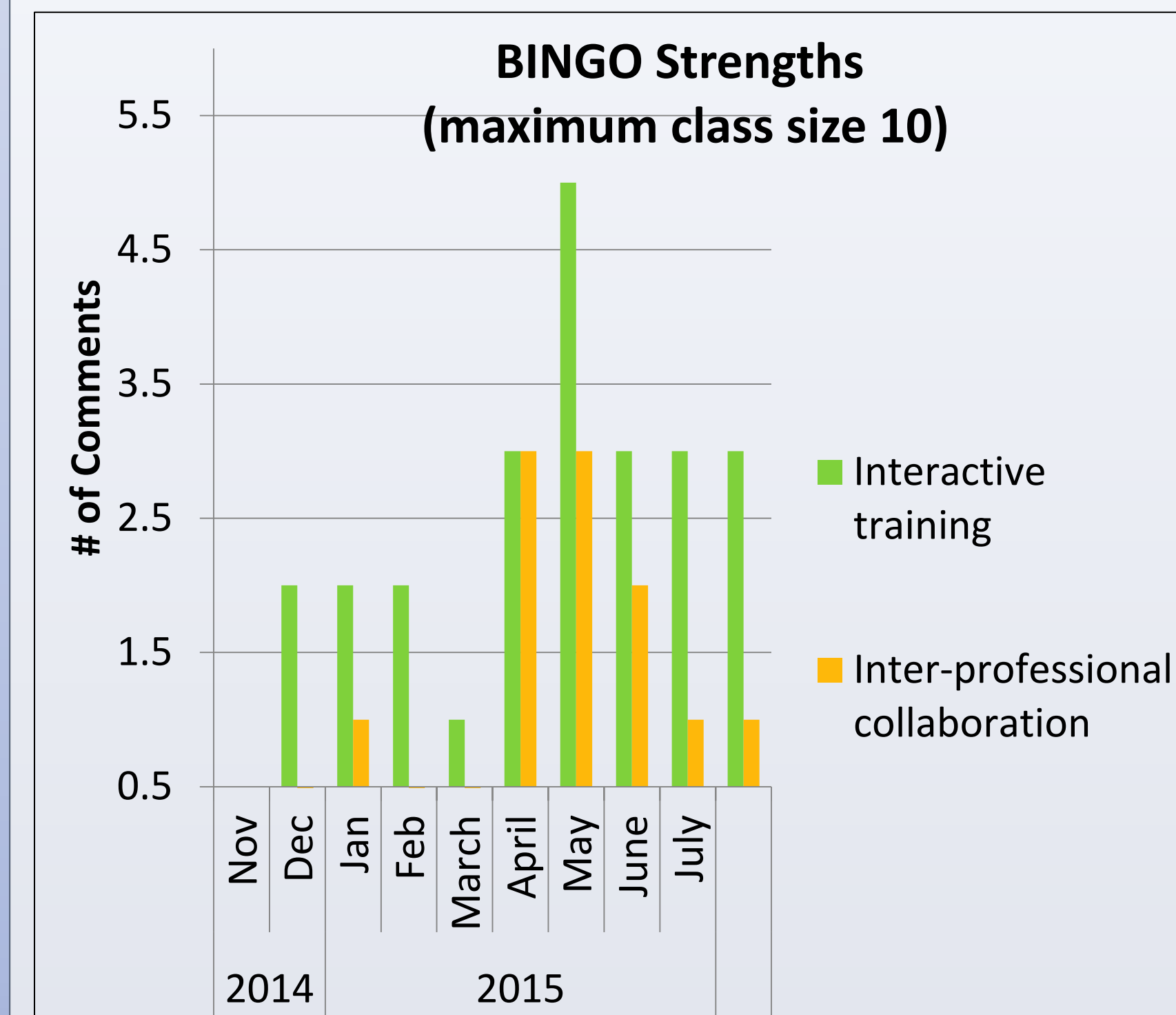**BINGO Participants with High Fidelity Mannequin**

"Not breathing! I hear good air exchange with BVM!"

"Strong left but weak right pedal pulse."
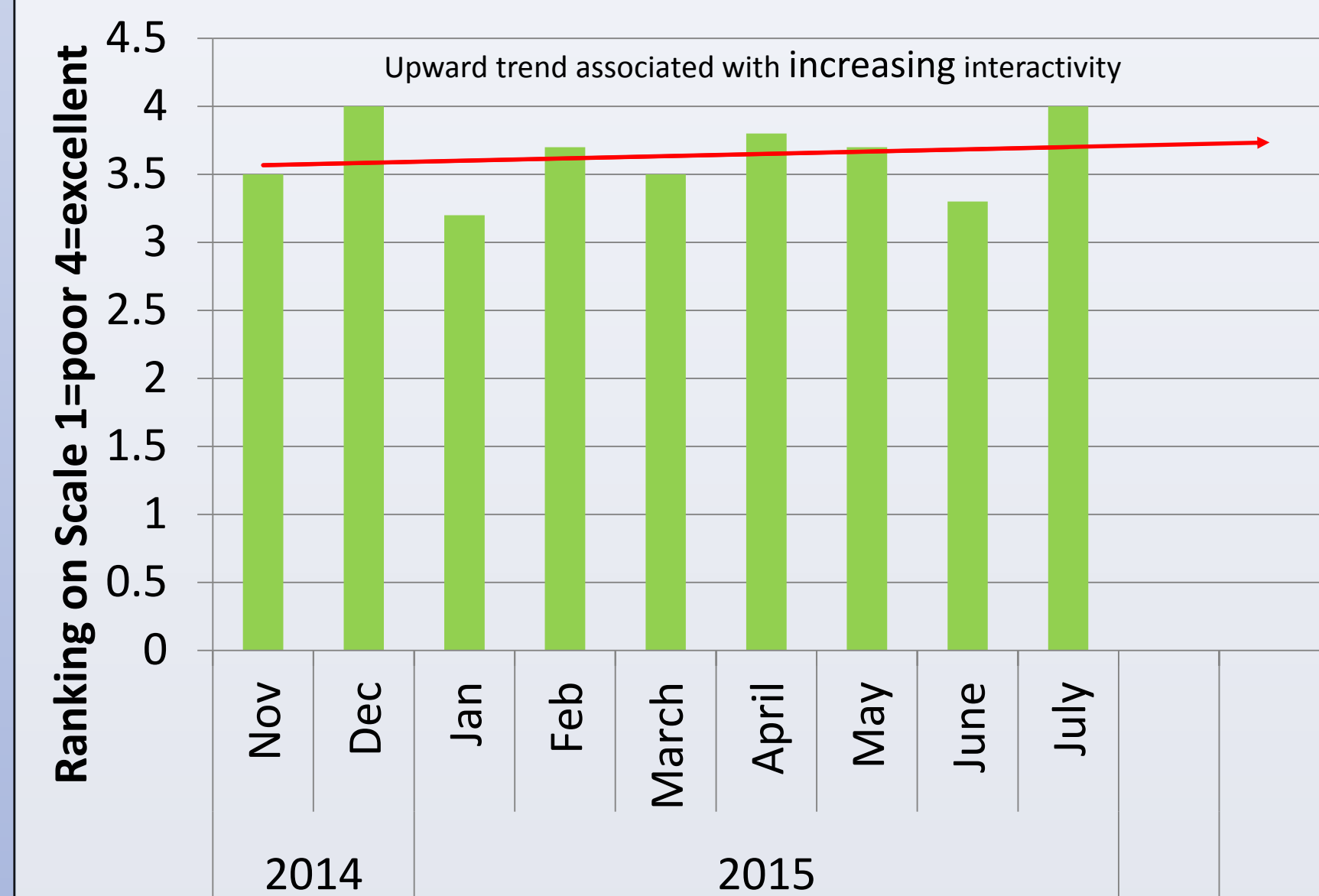
Empirical Outcomes

BINGO Strengths (maximum class size 10)

Legend: Interactive training; Inter-professional collaboration

(Bar chart with x-axis months Nov–July, 2014–2015; y-axis # of Comments 0.5–5.5)

Sim Lab Usage during 1st Year

Classes in Sim Lab	Audience	# of Classes
Restraints	Nursing/Security	32
Glucometers	Nursing	28
BINGO	Nursing	28
Fire Safety	Direct Care Providers	18
ACLS	Nursing/RT/etc.	15
Patient Safety Equip	MOU/ICU/PCU	1
Restraints	Nursing	4
Skills Days	SCU	14
Trach/PEG Care	PSIU	13
Ebola	Direct Care Providers	6
Skills Days	MOU	6
On Boarding A3	Nursing	4
Dysrhythmia Course	Nursing	3
Chemo Precautions	Nursing	3
PALS	Direct Care Providers	3
CBI & Ostomy Skills	Nursing	3
Patient Transporter Training	Nursing	2
Rounding	Nurse Leaders	2
Dementia Capable Care	Nursing	1
Palliative Care Skills Day	MOU/FCC	1
EMR Training	Nursing	1
Housekeeping Training	EVS	1
Computer Training	Nursing Travelers	1
Total # of classes in 1st year		**190**

Empirical Outcomes cont.

BINGO: Teaching Methods Appropriate

Upward trend associated with increasing interactivity

(Bar chart; y-axis Ranking on Scale 1=poor 4=excellent, 0–4.5; x-axis months Nov–July, 2014–2015)

Summary of BINGO Goals

- Increase use of interactive training - Achieved
- Decrease orientation time for inpatient unit nurses – In Progress
- Increase inter-professional collaboration - Achieved
- Consistent training programs with succession planning - Achieved
- Efficient use of Clinical Educator time - Achieved
- Decrease class preparation time using a centralized training equipment storage – Achieved
- Current results serve as baseline data by which future program improvements/changes can be monitored.

Future State:

- Expansion of the Sim Lab to include a male mannequin with more functionality
- Separate classroom space for didactic and debriefing

References

(2013). Standards of best practice: Simulation. *Clinical Simulation in Nursing*, 9(65), Sii-Siii.

Forneris, S. G., Crownover, J., Dorsey, L., Leahy, N., Maas, N., Wong, L., . . . Zavertnik, J. (2012). Supplemental materials for integrating QSEN and ACES: An NLN simulation leader initiative. *Nursing Education Perspectives*, 33(3), 1-47.

Hommes, T. (2014). Implementation of simulation to improve staff nurse education. *Journal for Nurses in Professional Development*, (March/April). doi: 10.1097/01.NND.0000433144.66804.4c

For additional information/questions, please contact us at (802) 747-3775