

Name of Hospital
PERIOPERATIVE SERVICES, OR
PERFORMANCE STANDARDS ORIENTATION TOOL (PSOT) - RN

This Performance Standards Orientation Tool is designed for use in orienting all RNs to the Operating Room. Content is consistent with the unit performance standards for RN staff. It is completed by both the new staff member and the Clinical Nurse Educator (CNE)/Unit Preceptor (UP). At the end of the orientation period, there will be an evaluation conference with the orientee, Nurse Manager, and Clinical Nurse Educator/Unit Preceptor.

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<i>I. NURSING PROCESS - ASSESSMENT</i>				
A. Performs initial assessment on all patients in the anesthesia holding area. Assessment is based on validation of the procedural consent, patient identification, and chart review for accuracy and completeness (anesthesia pre-op evaluation, history and physical, pertinent lab data, etc . . .).				
B. Documents assessment data on the appropriate portions of the intraoperative nurses notes: 1. patient Id verified 2. history and physical on chart 3. operative (procedural) consent verified 4. notation of any allergies 5. pre-op checklist 6. patient LOC/emotional status	1. 2. 3. 4. 5. 6.			

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>C. Repeats assessment and documents findings at appropriate times throughout procedure. (i.e. skin condition after positioning, skin condition before/after grounding pad placement and removal, patient status prior to transfer to PACU or other area).</p>				
II. NURSING PROCESS - CARE PLANNING/IMPLEMENTING				
<p>A. Develops a plan of care for the patient based on the patient's chief complaint, the physician orders, and generic/unit specific Clinical Practice Guidelines and procedures.</p>				
<p>B. Professionally modifies/updates all Clinical Practice Guidelines and procedures based upon:</p> <ol style="list-style-type: none"> 1. Patient contraindication 2. Altered physiologic/psychologic need 3. Ineffectiveness 	<ol style="list-style-type: none"> 1. 2. 3. 			
<p>C. Remains aware of medical plan and all physician orders in order to coordinate medical/nursing plans of care.</p>				
<p>D. Collaborates with other services in meeting identified needs via verbal/written communication (i.e. clergy, cardiopulmonary, dietary, OT/PT, ET services).</p>				
<p>E. Refers to Generic/Unit Specific Clinical Practice Guidelines frequently to ascertain that all care required is being given.</p>				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>F. Engages in discharge planning by adhering to unit routines of:</p> <ol style="list-style-type: none"> 1. collaborating with physicians regarding discharge 2. maintaining awareness of information relative to discharge decisions based upon patient's chief complaint, assessment and response to interventions. 	<ol style="list-style-type: none"> 1. 2. 			
III. NURSING PROCESS - EVALUATION				
<p>A. Demonstrates ongoing evaluation of effectiveness of care as indicated by the patient's progress/condition and appropriate alteration of care per unit standards.</p>				
<p>B. Judges the effectiveness of current Clinical Practice Guidelines based upon the patient's progress/condition change.</p>				
<p>C. Judges the effectiveness of intraoperative safety interventions in relation to patient positioning, grounding pad placement, skin prep, pre-procedural equipment checks, and sponge, sharps, and instrument counts as applicable to procedure.</p>				
<p>D. Evaluates patient response to all procedures carried out, both physical and psychological.</p>				
<p>E. Documents all evaluations based upon the change or effectiveness of Plan of Care.</p>				
IV. TECHNICAL SKILLS				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>A. Demonstrates ability to carry out the following nursing skills as defined by the Department of Nursing (DON) generic standards: outlined in the following Procedures:</p> <ul style="list-style-type: none"> 1. CPR 2. Heimlich Maneuver 3. Blood and Blood Products Administration 4. Start and D/C Peripheral IV 	<ul style="list-style-type: none"> 1. 2. 3. 4. 			
<p>B. Demonstrates ability to carry out the following nursing skills specific to the Department of Surgical Services.</p> <ul style="list-style-type: none"> 1. Skin/Integumentary System <ul style="list-style-type: none"> a. skin shave and prep b. proper placement of grounding pad c. proper positioning in relation to planned procedure and patient safety 	<ul style="list-style-type: none"> a. b. c. 			
<ul style="list-style-type: none"> 2. Respiratory System <ul style="list-style-type: none"> a. Basic airway management b. Assists anesthesia with advanced airway management 	<ul style="list-style-type: none"> a. b. 			

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>3. Cardiovascular System</p> <p>a. Monitors and interprets Lead II cardiac rhythm</p> <p>b. Maintains cardiopulmonary resuscitation training</p> <p>c. Application of sequential compression device for decreased risk of TED.</p>	<p>a.</p> <p>b.</p> <p>c.</p>			
<p>4. Neurological System</p>				
<p>5. Gastrointestinal System</p>				
<p>6. Genitourinary/Gynecological Systems</p> <p>a. Performs urinary catheterization as ordered.</p> <p>b. Prepares and provides GU/GYN medications as ordered.</p>	<p>a.</p> <p>b.</p>			

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>C. Demonstrates ability to assist physicians with the following measures:</p> <ol style="list-style-type: none"> 1. Induction of general anesthesia 2. esophageal/nasopharyngeal intubation 3. intravenous access (peripheral, central line, a-line, etc...) 4. administration of regional anesthesia 5. administration of local anesthesia 6. administration of retrobulbar block 7. application of wound dressings/casts 	<ol style="list-style-type: none"> 1. 2. 3. 4. 5. 6. 7. 			
<p>D. Demonstrates ability to use equipment according to nursing procedures.</p>	<p>(Validated by Perioperative Equipment Competency Tool)</p>			
V. PATIENT EDUCATION				
<p>A. Identifies patient/SO learning needs based upon the patient's chief complaint, primary and secondary assessments, treatment received, medical diagnosis, and medical discharge instructions.</p>				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
B. After identifying learning needs and validating same, implements appropriate discharge instruction as defined by the patient's discharge diagnosis, medical aftercare instructions, work/school status reports, and medication prescriptions.				
C. Documents teaching based upon the patient's signature on the Logicare Discharge Instruction Form.				

VI. DOCUMENTATION

A. Utilizes the following DON and unit tools according to established guidelines: <ol style="list-style-type: none"> 1. OSH Perioperative Documentation 2. OSH Conscious Sedation Documentation 3. Employee Occurrence Report 4. Release of Body 5. Certificate of Death 6. Code Blue resuscitation form 7. Chain of Evidence to accompany laboratory requests 8. Agreement for Blood Transfusion 9. PI forms 10. Adverse Drug Reaction Form 11. Pre-Operative Checklist 12. Smoking Violation Form 	<ol style="list-style-type: none"> 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 			
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X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
B. Demonstrates ability in perioperative nurses notes toward total "evaluation" focus with emphasis on "SITA" (stable, improving, moving toward outcomes, absence of complications/or "UDAP" (unstable, deteriorating, moving away from outcomes, presence of outcomes).				
C. Uses only hospital approved abbreviations.				
D. Writes legibly at all times.				
E. Follows all DON generic requirements for documentation as defined in Generic Structure Standards including, but not limited to the following issues: 1. Signatures/titles 2. No blanks 3. Appropriate Error Correction 4. Black ink only 5. Patient name and medical record number on all sheets (with pages numbered).	1. 2. 3. 4. 5.			
F. Correctly completes chart forms for diagnosis work: 1. lab, pathology 2. x-ray 3. electrodiagnostics	1. 2. 3.			

VII. PATIENT RIGHTS/LEGAL/ETHICAL ISSUES

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
A. Adheres to system requirements in the following areas of structure: 1. patient confidentiality 2. Media (news/radio/TV) requests 3. staff as legal witness 4. patient bill of rights 5. patient access to chart 6. child/vulnerable adult abuse/neglect	1. 2. 3. 4. 5. 6.			
B. Functions to protect patient privacy (physical and psychological)				
C. Functions to meet patient's right to be informed.				
D. Functions to protect patient's valuables per hospital policy.				
VIII. SAFETY				
A. Demonstrates appropriate use of Quality Care Control (QCC) and Employee Occurrence Report (EOR).				
B. Wears employee identification badge while on duty.				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>C. Demonstrates adherence to unit/hospital safety standards related to:</p> <ul style="list-style-type: none"> 1. infection control 2. restraints 3. fire reporting/ drill activities 4. disaster reporting/drills 5. electrical safety policies 6. transport safety policies 7. risk prevention (dependent patients) 8. traffic control 9. equipment maintenance 10. count policies (sponge, sharps, instruments) 11. smoking 12. Hazardous waste 13. product safety 14. Radiation safety 15. Infant security 	<ul style="list-style-type: none"> 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 			
IX. EMERGENCY SITUATIONS				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>A. Demonstrates effective response to the following unit/patient crisis situations:</p> <ul style="list-style-type: none"> 1. hypovolemic shock 2. cardiac and/or respiratory arrest 3. anaphylactic reaction 4. adverse reaction to blood, blood products 5. laryngospasm 6. malignant hyperthermia 	<ul style="list-style-type: none"> 1. 2. 3. 4. 5. 6. 			
<p>B. Documents events and patient's response to interventions.</p>				

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PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>A. Demonstrates awareness of location of, and working knowledge of unit level structure standards/policies for operation of this nursing unit in the following areas:</p> <ol style="list-style-type: none"> 1. Description of unit 2. Purpose of nursing unit 3. Objectives of nursing unit 4. Administration/organization of nursing unit, including the organizational chart/narrative, verbiage re medical/nursing responsibilities. 5. Hours of unit operation 6. Utilization of nursing unit, including: admission, duration of stay, discharge criteria/planning. 7. Governing rules of unit, including all safety/environmental issues. 8. Staffing policies, including: <ol style="list-style-type: none"> a. Quantity requirements b. Levels of Workers c. Preparation requirements d. credentialing requirements 9. Nursing responsibilities that are allowed/supported to be carried out on unit. 	<ol style="list-style-type: none"> 1. 2. 3. 4. 5. 6. 7. 8. 9. 			

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
<p>B. Demonstrates awareness/location of, and working knowledge of DON Structure Standards/policies for operation of the DON as outlined in DON Generic Standards Manual.</p>				
<p>C. Demonstrates ability to locate and use the unit and DON Standards Manuals.</p>				
<p>D. Demonstrates ability to locate/use other reference manuals/books on the nursing unit, i.e.:</p> <ol style="list-style-type: none"> 1. personnel manual 2. dietary manual 3. lab manual 4. pharmacy manual 5. ancillary services manual 6. unit library 7. DON/hospital library 				
<p>E. Demonstrates ability to carry out essential generic and unit specific Clinical Practice Guidelines.</p>				
<p>F. Demonstrates the ability to care for patients during the preoperative, intraoperative, and postoperative phases.</p>				
<p>G. Demonstrates ability to interpret adult and pediatric lab values and report abnormalities.</p>				
<p>H. Demonstrates ability to carry out medical orders as directed after clearly considering implications of appropriateness for patient, relationship to current therapy, and integration with nursing standards.</p>				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
I. Utilizes knowledge of human growth and development to plan and provide age-appropriate patient care for those patient populations on this unit.	(Validated by Age-Specific Care Competency Tool).			
XI. PROFESSIONALISM/SELF-VALIDATION				
A. Demonstrates punctuality to work and required meetings. (Excessive tardiness is defined as seven (7) or more tardies per year.)				
B. Maintains good attendance record. Adheres to call-in policy defined by DON Structure Standards. (Excessive absenteeism is defined as six (6) or more absence periods per year.)				
C. Adheres to DON dress code and standards for proper OR attire.				
D. Aware of personal limitations and open to constructive criticism. Constantly seeks to improve. Maintains positive attitude.				
E. Recognizes the abilities and potentialities of all personnel and assists each individual in the attainment of optimum performance.				
F. Responds to patient requests with promptness and empathy.				
G. Clarifies questionable patient care practices and takes appropriate action through chain of command.				
H. Consults and collaborates with other clinical disciplines/services in planning and providing patient care.				
I. Participates on one DON committee or provides input via unit group activity.				
J. Industrious, well organized, able to remain calm under pressure.				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
I. Acts as a preceptor and facilitates orientation of new staff members and students.				
J. Attends all annual mandatory sessions: 1. CPR review (every 2 years) 2. Annual Update (includes EOC, IC, Back facts, Confidentiality, Mock Blue/Code Blue/Defibrillation review, Corporate Compliance)				
XIII. GOALS/ANNUAL OBJECTIVES				
A. Participates in the development of unit goals/objectives annually.				
B. Actively commits to goal accomplishment.				
C. Accepts assignment for projects to achieve goals/ objectives.				
XIV. STANDARDS DEVELOPMENT/QUALITY MANAGEMENT				
A. Actively uses structure/process standards of unit/DON for sound decision making, planning/delivering patient care. Holds self and co-workers accountable to standards.				
B. Critiques standards, identifies new areas for standards development, and participates in annual review.				
C. Incorporates standards into daily patient care.				
D. Participates in unit and hospital-wide performance improvement activities.				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
E. Identifies and analyzes patient care and environmental problems and actively participates in problem resolution with the nurse manager and peers.				
F. Actively participates in peer review.				
G. Displays sound judgment and problem solving skills.				
XV. DELEGATION/COORDINATION/COMMUNICATION/ORGANIZATION/PRIORITY SETTING				
A. Utilizes the delivery of care methodology defined in unit structure.				
B. Demonstrates strong leadership skills. Inspires confidence and teamwork.				
C. Supervises staff in a fair and consistent manner. Holds staff accountable for work that is delegated.				
D. Assigns staff based on patient needs and staff competency.				
E. Utilizes a multidisciplinary approach in coordinating patient care.				
F. Collaborates on patient care. Communicates patient condition, response to interventions, and mediates communication between physician, patient/family and other disciplines.				
G. Demonstrates initiative in managing resources cost effectively.				
H. Demonstrates reliability in the conscientious and complete manner in which work is performed. Completes assigned projects. Demonstrates thoroughness and accuracy.				
I. Demonstrates ability to express ideas clearly - verbally and in writing.				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
J. Attends 80% of unit staff meetings (PRN staff 25%); reads minutes when not able to attend. Actively participates in discussion for problem ID/resolution. Tracts attendance on individual education record.				
K. Reads information posted on unit bulletin boards and in memo books. Validates by dating and initialing. Communicates with other staff and NM via personal mailboxes.				
L. Communicates, coordinates and promotes cooperation with a positive, caring attitude.				
M. Reports on assigned patients upon transfer to other care areas (Endo, PACU, OPSU).				
N. Effectively communicates with other units/departments and outside agencies to coordinate activities and promote cooperation for the enhancement of patient care.				
O. Regularly investigates and resolves complaints of patients, visitors, and physicians through personal action and/or referral to higher authority.				
P. Acts as a liaison between members of the health care team; promotes open, positive communication.				
Q. Communication is professional, concise and accurate.				
XVI. WORKING RELATIONSHIPS/LINES OF AUTHORITY				
A. Formulates/maintains effective working relationships with professional staff, co-workers, physicians, and NMT members.				
B. Develops working relationships that are characterized by mutual support, open communication, trust and respect.				

X. KNOWLEDGE BASE

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C. Keeps personal biases and private life separate from work issues.				
D. Confronts co-workers privately on a one-to-one basis with issues of concerns. Reports irreconcilable differences among co-workers to NM for intervention.				
XVII. STAFFING/FLEXIBILITY				
A. Maintains awareness of posted time schedules and creates personal mechanism to remain up-to-date with changes.				
B. Makes schedule requests on the appropriate form within the allotted timeframe.				
C. Once schedule is posted, employee is responsible for: 1. providing appropriate replacement for personal requests without creating overtime 2. completing of Change/Request form 3. obtaining NM/NS approval.	1. 2. 3.			
D. Accepts reassignment to other units as requested following standards regarding temporary reassignment.				
E. Maintains awareness of unit staff policies including usual pattern and necessary adjustment mechanisms.				
XVIII. RESEARCH				
A. Reviews the nursing literature and current research. Utilizes findings in clinical practice to improve the quality of patient care.				
B. Utilizes research data in writing/updating DON and unit specific standard.				

X. KNOWLEDGE BASE

PERFORMANCE STANDARD	COMMENTS	DATE ACHIEVED	ORIENT INITIAL	CNE/ UP INITIAL
C. Actively identifies issues in clinical areas for potential education/research activity.				
D. Discusses clinical research ideas with CNS/CNE/NM/peers.				

Orientee

Clinical Nurse Educator/Unit Preceptor

Nurse Manager/Director