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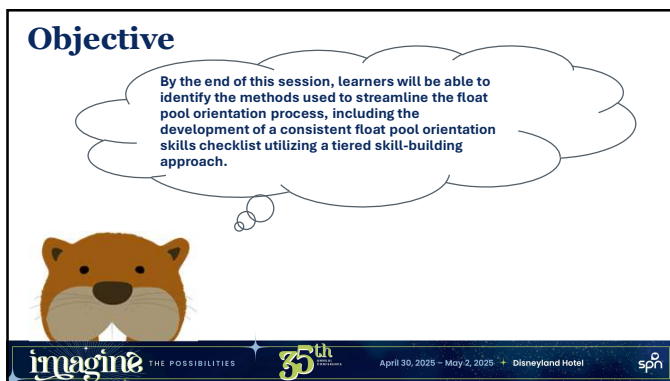
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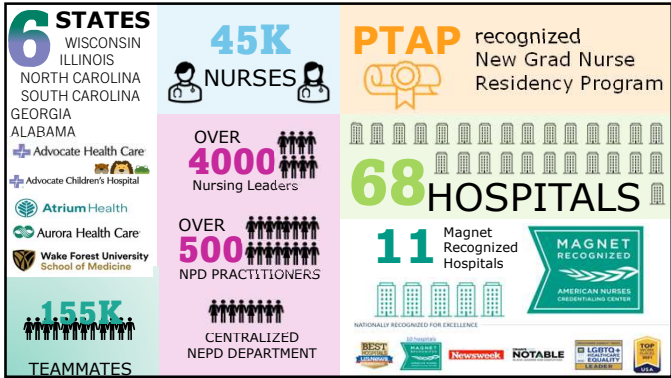
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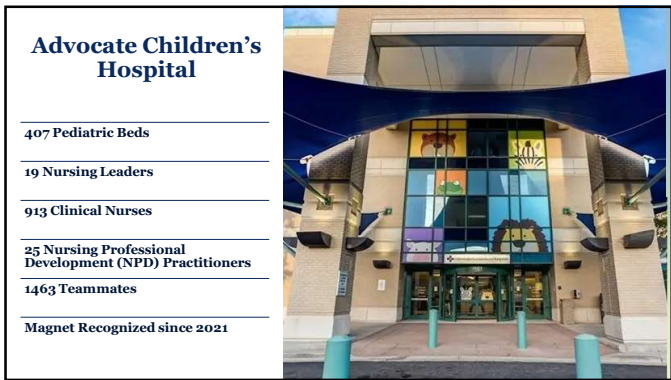
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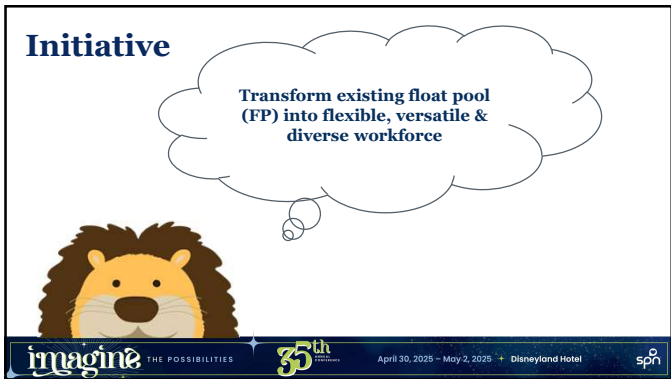
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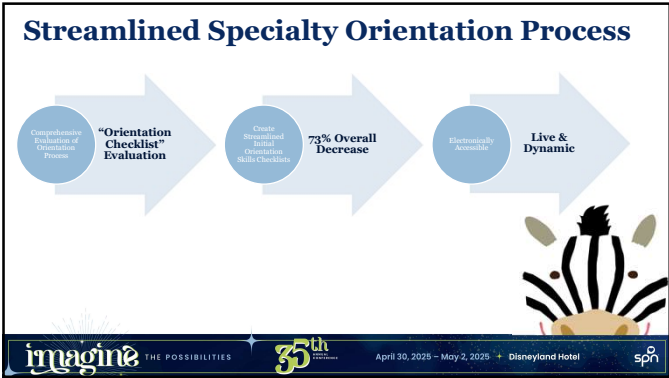
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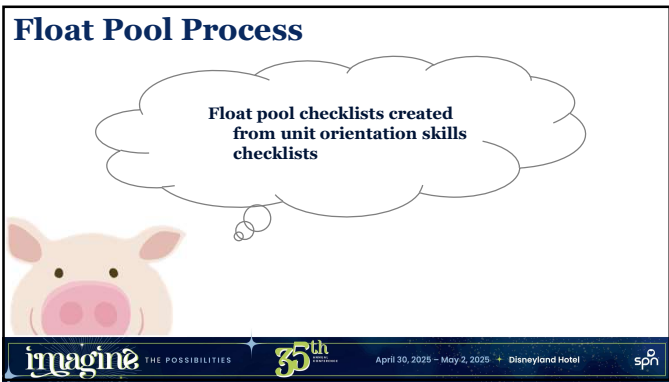
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### Example Skills Checklist

General Pediatrics	Critical Care	ED
Assessment /Reassessment <ul style="list-style-type: none"><li>• Demonstrates knowledge of growth and development across the continuum</li><li>• Demonstrates and documents a complete head to toe assessment</li><li>• Demonstrates assessment for the presence of correct patient banding and signage</li><li>• Demonstrates communication of assessment to medical team, colleagues, and family as appropriate</li></ul>	Assessment /Reassessment <ul style="list-style-type: none"><li>• Demonstrates knowledge of growth and development across the continuum</li><li>• Demonstrates and documents a complete head to toe assessment</li><li>• Demonstrates assessment for the presence of correct patient banding and signage</li><li>• Demonstrates communication of assessment to medical team, colleagues, and family as appropriate</li></ul>	Assessment /Reassessment <ul style="list-style-type: none"><li>• Discuss developmental, growth, and social milestones</li><li>• Demonstrates vital signs and physical assessment</li><li>• Demonstrates communication of assessment to medical team, colleagues, and family as appropriate</li><li>• Demonstrates Pediatric Assessment Triangle (PAT)</li><li>• Performs assessments documentation aligned with patient boarding guideline</li><li>• Performs re-assessment following interventions or changes in patient condition</li></ul>

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# Preceptor Selection

PRECEPTOR FEEDBACK

“I don’t know them” (the nurse)

“What skills do they need”

“Why am I orienting a FP nurse”?

“Why doesn’t FP do this”?


ORIENTEE FEEDBACK


“I feel stuck”

“I get the same patients”


“I’m not learning anything”

“The preceptor doesn’t trust me”

THE POSSIBILITIES



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# Phased Orientation Guides


\* This is not an extensive list of orientation requirements. Please refer to the pediatric skills checklist and preceptor guideline for additional post related diagnosis and detailed list of what the orientee should demonstrate for a particular skill.

Tier	Emphasis/Focus	Assignment Recommendations	Expectation of Orientee	Expectation of Preceptor
1	<b>Safety, Pathophysiology, and Assessments</b>	<ul style="list-style-type: none"><li>Focus on stable patient assignments</li><li>Take 1-2 patient assignments<ul style="list-style-type: none"><li>May increase per preceptor discretion</li></ul></li></ul>	<ul style="list-style-type: none"><li>Understand unit/communication workflow (PerfectServe)</li><li>Identify/locate safety and emergency equipment</li><li>Complete tasks independently</li><li>Bedside safety checks (bag/mask, suction)</li><li>Independently give bedside handoff</li><li>Participates during multidisciplinary rounds</li></ul>	<ul style="list-style-type: none"><li>Explain the Chain of Command</li><li>Navigate and locate resources</li><li>Explain CHEADS and sepsis screening</li><li>Discuss/explain prioritization of care</li><li>Location of crash carts, emergency equipment</li><li>Review charting, note writing, safety events</li></ul>
Agreement the orientee has fulfilled the above expectations and is ready to move to the next tier.				
2	<b>Critical Thinking</b>	<ul style="list-style-type: none"><li>Full patient assignment</li><li>Admissions, transfers, discharges</li></ul>	<ul style="list-style-type: none"><li>Perform and organize patient care independently</li><li>Critical thinking skills consistently exhibited for patient care</li><li>Provide patient/family teaching</li></ul>	<ul style="list-style-type: none"><li>Ask critical thinking questions</li><li>Discuss RRT and code process</li><li>Discuss transitions of care (Swoop)<ul style="list-style-type: none"><li>Admission/transfer criteria</li></ul></li><li>Discuss task delegation</li><li>Discuss unit specific protocols</li></ul>
Agreement the orientee has fulfilled the above expectations and is ready to move to the next tier.				
3	<b>Autonomy</b>	<ul style="list-style-type: none"><li>Full patient assignment</li><li>Admissions, transfers, and discharges</li></ul>	<ul style="list-style-type: none"><li>Independently planning and caring for a full patient assignment</li><li>Maintain appropriate communication with interdisciplinary team</li><li>Primary nurse in all aspects of patient care, procedures, etc.</li></ul>	<ul style="list-style-type: none"><li>Emphasize delegation</li><li>Resource for orientee</li><li>Emphasize safety, critical thinking, communication</li></ul>
Agreement the orientee has fulfilled the above expectations and is ready to be off orientation.				

THE POSSIBILITIES



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# Results

Streamlined Tiered Orientation


14-20 weeks to 4-6 weeks (+28-30%)


39 to 62 Nurses/6mos (+63%)

Versatility (+73%)


62 Nurses 5 Specialties

10 Bi-Campus Units

THE POSSIBILITIES



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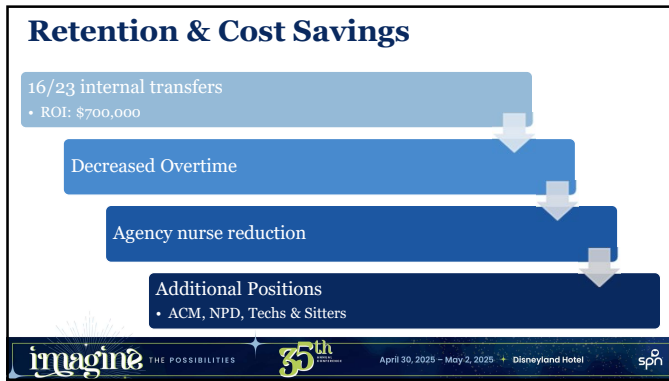
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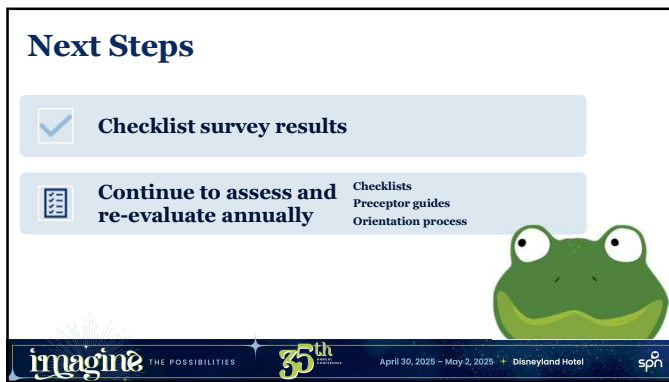
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References

Ahmed, F.R., Timmins, F., Dias, J.M., Al-Yateem, N., Gamil, R., Subu, M.S., . . . AbuRuz, M.E. (2023). Floating to intensive care units: Nurses' messages for instant action to promote patient safety. *Nursing Critical Care*, 28, 902-912. doi:10.1111/nicc.12907

Chilson, S., Cheralis, C., Jones, J., & Goforth, C. (2024). Rapid nurse training to meet surge capacity: An integrative review. *Critical Care Nurses*, 44(3), 19-27. <https://doi.org/10.4037/ccn2024824>

Dziuba-Ellis, J. (2006). Float pools and resource teams: A review of the literature. *Journal of Nursing Care Quality*, 21(4), 352-359. doi: 10.1097/00001786-200610000-00013

Fagefors, C., Lantz, B., Rosen, P., & Siljemyr, L. (2024). Staff pooling in healthcare systems – results from a mixed-methods study. *Health Systems*, 13(1), 31-47. <https://doi.org/10.1089/20476965.2022.2108729>

Joswiak, M.E. (2018). Transforming orientation through a tiered skills acquisition model. *Journal for Nurses in Professional Development*, 34(3), 118-122. doi: 10.1097/NND.0000000000000439

Kaw, N., Murray, J., Lopez, A.J., & Mamdani, M.M. (2019). Nursing resource team capacity planning using forecasting and optimization methods: A case study. *Journal of Nursing Management*, 28, 229-238. doi:10.1111/jonm.12905

McDonald, R.M., Brooks, K.A., Cline, D., Sylla, B., Tolden, T.M., Whitche, C., & Gordan, H. (2019). Nursing resource pool residency program: Implications for practice. *Nursing Management*, 50(1), 42-50. doi: 10.1097/01.NUMA.0000547835.95083.a0

Weerd, C.V., Peck, J.A., & Porter, T. (2023). Travel nurses and patient outcomes: A systematic review. *Health Care Management Review*, 48(4), 352-362. doi:10.1097/HMR.0000000000000383

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