Instructor Orientation Checklist

Instructor Name: __________________________________________________ Phone: __________________________

School _________________________________________________________Program: __________________________

Emergency Contact: ___________________________________ Phone _______________________________________

Unit/Area: _________________________________________ Clinical Dates: __________________________________

Complete page 1 of this Checklist prior starting your assignment at Aurora Sheboygan Memorial Medical Center (ASMMC).

Instructor to Complete

___ I have viewed and understand the on-line orientation module.
___ I have read the Undergraduate Student Nurse Policy 1014 and Nursing Accountabilities excerpt from the Hospital Nursing Clinical Documentation Policy 1008.
___ I have signed the Contract Staff/Student Confidentiality Statement.

Aurora Health Care’s Mission & Goals:

___ I have read and understand the Appearance Policy.
___ I have reviewed and understand the organization’s Vision, Mission & Values and Service Standards.

Patient Rights and Ethical Aspects of Care:

___ I have reviewed and understand the Patient Rights, Confidentiality, and HIPAA guidelines. I am aware of Aurora’s Confidentiality/Information Privacy and Patient Rights policies.
___ I understand Aurora’s commitment to fostering an environment of sensitivity and diversity.

Blood Borne Pathogens/Infection Prevention

___ I understand the importance of reducing the risks associated with bloodborne pathogens, using sharps safety devices and disposing of sharps properly.
___ I understand the importance of hand hygiene, standard precautions, and isolation procedures.
___ I have read and understand the information about tuberculosis.

Safety/Environment of Care/Incident Reporting at ASMMC:

___ I am aware of Aurora’s Safety policy.
___ I know the emergency phone number and how to contact Loss Prevention.
___ I understand the emergency alert codes. I will locate the emergency flipchart, evacuation route, and code cart (if applicable) on the units to which I am assigned.
___ I understand how to respond to a fire using the R.A.C.E. and P.A.S.S. response.
___ I understand how to report a concern about the safety of medical equipment.
___ I understand the incident reporting process and will contact the department manager for help, if needed, to complete an incident report.
___ I have reviewed and understand how to recycle and dispose of waste.
___ I have read the information about hazardous substances and understand the MSDS is available online.
___ I understand Aurora’s no smoking and no weapons policy.
___ I have reviewed the parking instructions.

_____________________________ __________________________
Instructor Signature Date

Revised 01/06/05; 6/12; 8/13; 5/14; 11/14; 6/16; 8/17
Orienter to Complete

**Identification**

- Instructor has school name badge. If not, contact Loss Prevention to obtain ID badge.
- Verify photo ID. If name badge does not contain a photo, instructor must carry photo identification.
- If special access is needed for Medication room, Behavioral Health Unit, Emergency Department or Radiology students, contact Loss Prevention for a student badge with access capability.

**Orientation to the facility and department:**

- Receive completed forms from orientee:
  - Contract Staff/Student Confidentiality Statement
  - Instructor Orientation Checklist
- Discuss and complete the Minimum Necessary Checklist
- Provide Quick Reference Guide.
- Discuss job responsibilities, expectations, and department/population specific considerations.
- Introduce to caregivers and a resource for leadership/administration issues.
- Tour unit/area. Locate emergency flipchart, fire extinguishers, evacuation routes, waste disposal, and crash cart (if applicable).
- Demonstrate use of Nurse Call system if applicable.
- Demonstrate use of telephone and paging systems
- Demonstrate how to access policy and procedure manuals and other resources.
- Review reporting of incidents, patient complaints or abuse/family violence.
- Discuss appearance/uniform requirements; name badge required when providing services.
- Discuss unit approaches to Aurora service standards (example: back to basics, rounding with a purpose, AIDET).
- Discuss unit approaches to patient safety (example: fall risk process, when may leave patients unattended).

**Instructors new to ASMMC and/or Aurora:**

- Smart Chart training
- Pyxis ES training
- Clinical time on nursing unit prior to start of clinical rotation
- Review Aurora RN Core Competency and unit-specific competency tools &answer questions related to content

**Additional Orientation:**

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Instructor Signature        Print Name        Date

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Orienter Signature        Role
(Educator, manager, preceptor)        Date

Send all completed student/instructor forms to Volunteer Services Office to file.