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| **Purpose:** Megan Hellrung Level III Credentialing | **Facilitator:** MH | **Sponsor:** LZ |
| **Date:** 12/30/14 | **Scribe:** MH | **Timekeeper:** MH |
| **Staff Present:** Monica Brock (MB), Lynette Zavodny (LZ), Megan Hellrung (MH) | **Location: Monica’s Office** | **Time:**  1400-1500 |

| **Topic** | **Action or**  **Talk Item** | **GPS**  **Component** | **Magnet**  **Component** | **Discussion Leader** | **Time** |
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| MH goal to designing and facilitate an OR specific preceptor course. | Discussion:   * Specialized care setting with unique responsibilities/accountability * Goal to recognize specific training/resources to support OR staff more effectively then UCH Basic Preceptor course | 1,2,3,5,7 | 1,2,3,4,5 | MH | 1400-1415 |
| Use of current framework established from UCH platform- Would like to utilize the same components including the 2. 5 hour online portion. | Discussion:   * Review of blended model including online Mosby’s/Elsevier modules and interactive classroom time | 1,2,3,5,7 | 1,2,3,4,5 | MH/LZ | 1415-1423 |
| Best way to assign staff to this online course?  Who is designated to complete this?  What is the time frame usually given for them to complete it?  Proof of completion/certificate learners need to bring to class? | Discussion:   * Multiple staff capable of making assignments- Educator/Preceptor Program Coordinator * Timeframe to complete modules is 2 weeks prior to course * Conflict: ST’s limited access to computer/modules throughout duration of shift. Discussed early assignment of modules to prevent incompletions * Preceptor Program Coordinator to review completion of modules for each learner prior to releasing survey for certification | 1,2,3,5 | 1,2,3,4,5 | MH | 1423-1430 |
| Ability to review the scenarios currently used?  What were challenges and successes, advice, in setting up the scenarios to match the components of the course? | Discussion:   * Review of scenarios posted on HUB. Review content and formatting to mirror OR specific scenarios after * Team of authors to complete scenarios. Reviewed together to assure content addressed | 1,2,3,5 | 1,2,3,4,5 | MH/LZ | 1430-1447 |
| Current evaluation tool?  Ability to model after it? | Discussion:   * Post-course survey monkey questionnaire to review effectiveness of course * Possibility create second survey for personal data collection r/t credentialing | 3,5 | 2,3,4,5 | LZ | 1447-1454 |
| Use of Benners currently throughout curriculum? | Discussion:   * Addressed in Basic Preceptor Tool forms. * Reviewed literature review r/t preceptorship in the OR thoroughly addresses incorporation of Benner’s in preceptorship programs/practice | 1,2,3,5,6 | 2,3,4,5 | MH | 1454-1457 |
| Possible utilize you as professional resource/stakeholder and reviewer of content? | Discussion:   * MB happy to help review content of OR Specific Preceptor Course as well as review portfolio | 2 | 1,3 | MH | 1457-1500 |

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| **UCHealth Global Path to Success** | | | | | | |
| **1. Quality and Patient Experience** | **2. Engaged Workforce** | **3. Growth** | **4. Clinical & Non-Clinical Integration** | **5. Deliver Superior Value** | **6. Academic Enterprise** | **7. Mission, Vision and Brand Awareness** |
| Ensure universal, distinctive standard of quality and patient experience. | Attract, retain and excite a unified and engaged workforce. | Enhance reach and relevance through growth. | Integrate clinically and non-clinically across our system. | Deliver superior value to remain an option for most payor plans. | Maintain, enhance and leverage the academic enterprise. | Enhance messaging around the mission, vision and brand |

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| **Magnet Model Components** | | | | |
| **1. Transformational Leadership** | **2. Structural Empowerment** | **3. Exemplary Professional Practice** | **4. New Knowledge, Innovations & Improvements** | **5. Empirical Outcomes** |
| Leadership that results in extraordinary outcomes by empowering, influencing, and motivating others. | Strategies used to support shared leadership decision-making, life-long learning and professional development. | Interprofessional collaboration to ensure patient safety resulting in high-quality outcomes. | Integration of evidence-based practice and research into practice. New ways of achieving high-quality, effective and efficient care through innovation. | Measurable outcomes related to the impact of structure and process on patients, staff, and the organization. |