PRECEPTOR RESPONSIBILITIES FOR NURSING ORIENTATION

Prior to the first day of employment, the Educator/Supervisor/Manager will assemble equipment for the Orientee to use in Nursing Orientation. (See below.) The Orientee will bring this equipment on home visits during Nursing Orientation with the Preceptor.

- Nursing Bag stocked with required equipment to take to Nursing Orientation.
- Lab Bag
- Name Tag
- Map(s) of the service area, as needed.

Throughout orientation, the Preceptor will guide the Orientee in the completion of sample documentation and forms. The Initial Clinical Skills Checklist is completed as the Orientee gains competence on the completion of documentation as well as skills. After the Orientee has had a 2-step skin test, meets the Preceptor, and after starting initial orientation by the Supervisor, the Orientee may ride with the Preceptor to observe/assist with home visits. During the course of the home visits, the Preceptor should focus on the assignments listed in Preceptor Responsibilities and give special detail to the steps of the visit.

- Review of medical record
- Verify visit by phone
- Gather supplies
- Patient and Nurse Care Coordinator/Nurse interaction
- Holistic assessment
- Physical assessment
- Work in the home environment
- Documentation completion

Week 1: Following completion of 2 step-skin test the Orientee may begin to ride with the Preceptor. (Routine visits, Supervisory visits). Skills check-offs.

By End of Week 2: (according to Orientee’s experience) may begin to visit by self on patients with skills that have been validated. Educator/Supervisor/Preceptor should always be available for assistance as well as to answer questions. Clinical skills are validated during the home visits using the Initial Clinical Skills Validation Checklist.

Week 4 Orientee will start completing OASIS.

Week 6: All clinical skills should be checked-off by end of week six.

Week 7-8 of Nursing Orientation, the Orientee may assume a caseload (to be determined by Supervisor). Nurse care coordination and management may be delayed at the discretion of the Supervisor if direct Supervision continues to be needed. Educator/Supervisor/Manager or Preceptor will continue to make home visits with the Orientee for any skills validation and care management/care coordination training as needed.
If the Orientee is not yet capable to manage their caseload, direct supervision of visits should continue. Unsuccessful completion of skills is documented in the comments section of the Initial Clinical Skills Validation Checklist. Performance deficits are discussed with the Home Health Supervisor and documented appropriately. The Preceptor will continue to guide the orientee in completion of all daily tasks.

All checklists are to be signed or initialed by the Educator/Supervisor/Manager or Preceptor and Orientee to signify competence and understanding of the skill or procedure. Successful completion of skills validation is followed by monthly Supervisory visits until the end of the probationary period. If the orientee has not successfully validated skills at the completion of week 6 of employment, an education plan will be developed as described in Section I, Chapter 1, in the Introduction under the heading Observation and Supervision.

**PRECEPTOR RESPONSIBILITIES**
Educator/Supervisor/Manager to assist as needed with any of the assignments.

**Week 1 and Week 2** of Nursing Orientation, the Preceptor will guide the Orientee in accomplishing the following assignments.

1. Explain procedure for obtaining office supplies, how office supplies are ordered, and the location of a supply list.
2. Discuss how to contact the office from the field.
3. Make home visits with the Orientee observing/assisting.
4. Explain the procedure for transportation of laboratory specimens and where lab specimens are taken for testing. Locate biohazardous waste disposal. Instruct Orientee on procedure for abnormal lab follow-up.
5. Guide the Orientee in completion of laboratory required paperwork for lab specimens. Explain how lab results are reported.
6. Begin basic skills check: Injections, catheter changes, venipuncture dressing changes, etc.
7. Assist in obtaining a list of community resources from MSS and/or Home Health Supervisor.
8. Complete supply sheet for medical supplies for a home health patient.
9. Access the Home Care Web page, VNAA Clinical Skills, and Clinical Procedures and Resources.
10. Assist in review of medical records. Locate open, reduced, and closed records (hard copy).

**Give Orientee Assignment below:**

1. Locate medical supply room and explain the procedure for obtaining supplies.
3. Complete a Home Health Encounter Form and Employee Daily Activity/Time Report and/or e-CATS.
4. Locate a laptop transfer area and find out the requirement for the frequency of transfers. Obtain a Laptop Users Guide.
5. Complete home health documentation.

**Week 3** the Preceptor will guide the Orientee in accomplishing the following assignments/homework.

1. Make supervised home visits, as needed.
2. Continue skills validation.
3. Complete home visit documentation.
4. Locate where blank home health forms are stored. (Admission Booklet and forms that may be needed when computers are down or laptop not available).

**Week 4**

1. Continue making home visits with Orientee as needed. By end of this week Orientee should have watched you do an Admission visit and then you should go with them to do an Admission visit where you observe and assist.
2. Continue skills check-off.
3. Documentation completion.
4. Show and educate Orientee on the shortest routes to patient’s homes.

**Week 5-8**

1. Home visits to include ROC, Recert, D/C and Transfer. (Preceptor may ride with Orientee to assist, as directed/needed.)
2. Continue Admission visits and skills check off. (Preceptor may assist as directed/needed.)
3. Continue home health documentation of visits, conference notes, case conferences, orders, and progress notes. (Preceptor may assist as directed/needed.)