

VIHA IN HOUSE PERIOPERATIVE NURSING PROGRAM

PROGRAMME DE FORMATION SUR PLACE DE SOINS PÉRIOPÉRATOIRES DE LA VANCOUVER ISLAND HEALTH AUTHORITY (VIHA)

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RÉSUMÉ

La Vancouver Island Health Authority (VIHA), en collaboration avec la University of Victoria (UVIC), offre aux étudiants de quatrième année du programme de baccalauréat en soins infirmiers un programme servant d'introduction aux soins périopératoires. L'objectif de ce programme est d'aider à recruter des infirmières et infirmiers autorisés de salle d'opération. Le programme a un effet positif sur le recrutement et la fidélisation des infirmières et infirmiers diplômés de UVIC. L'importance du programme se voit encore plus clairement en se rappelant qu'une grande portion des infirmières et infirmiers périopératoires actuels prendra la retraite dans les prochaines quelques années.

En raison des coûts élevés de la formation en soins infirmiers et l'investissement financier important qu'ont déjà fait les étudiants, le programme de soins périopératoires est offert sans frais car il peut faire partie, pour les candidats acceptés, du cours de soins infirmiers de UVIC.

L'objectif est d'encourager la participation en réduisant le fardeau financier, le stress et l'anxiété du nouveau diplômé qui veut se spécialiser. Du côté de l'étudiant, celui-ci s'engage à travailler pour la VIHA pendant un minimum d'une année, engagement qui vient appuyer les efforts de fidélisation de l'hôpital.

Ce programme fournit aux étudiants en soins infirmiers admissibles de l'expérience importante en soins périopératoires. Pendant une période de 3 mois les étudiants reçoivent une formation théorique compréhensive en salle de classe ainsi que de l'expérience pratique grâce au programme de préceptorat. Le personnel connaît les avantages des relations interpersonnelles avec les étudiants ainsi que ceux du développement professionnel. Tout en ajoutant aux connaissances et aux habiletés en soins périopératoires des étudiants, ce programme vise également piquer leur intérêt dans le domaine dans le but d'assurer la croissance de la profession des soins périopératoires à Victoria.

VANCOUVER ISLAND HEALTH AUTHORITY (VIHA) IN HOUSE PERIOPERATIVE NURSING PROGRAM

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ABSTRACT

The Vancouver Island Health Authority (VIHA) in liaison with the University of Victoria (UVIC) offers an introduction to Perioperative Nursing Program to 4th Year undergraduate nursing students. The aim of this program is to help recruit Registered Nurses to the Operating Room. It has been advantageous to the recruitment and retention of nurses graduating from UVIC. Its importance is increased by the fact that a significant quantity of Victoria's perioperative nurses will be retiring in the next few years.

Due to the high cost of nursing education and

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VIHA (cont.)

the financial investment that has already been committed by nursing students, the Perioperative nursing program is free to the student as the program can be included, for the successful candidate, as part of the UVIC nursing course. The intention is to encourage participation by reducing the financial burden, stress, and anxiety for the new graduate who intends to specialize. In return, the student is required to work in the VIHA for a minimum of one year, thus supporting the retention efforts of the hospital.

For eligible nursing students, this program provides access to extensive perioperative nursing experience. Over the course of 3 months they are exposed to extensive theory in a classroom setting as well as clinical practice through a preceptorship program. The mentoring relationships that develop between perioperative nurses and students lead to meaningful relationships and professional growth for staff. The perioperative focus of the program improves the knowledge and skill set of nursing students. The intent is to increase nursing student's interest in pursuing a career as a perioperative nurse and to help ensure continued growth of the perioperative nursing profession in Victoria.

Recruiting Bachelor of Science in Nursing (BSN) students and experienced Registered Nurses (RN) into the perioperative setting is essential if RN's are to continue to have a strong professional presence.¹

WHERE HAVE ALL THE OR NURSES GONE?

Nursing education curriculum, culture, and philosophy have changed radically over the years as the nursing profession has grown to meet the demands of the 21st century. In the past, the nursing student's experience in the operating room (OR) was the result of practical training, focused on aseptic technique, scrubbing, gowning and gloving and basic instrumentation. Today, nursing schools have moved from the hospital to the college, or university, setting where students prepare, with a different focus, for hospital experiences. Hospital based nursing programs included

several weeks of training in various specialized areas. Training has moved away from the medical model to a more generalist preparation. As a result, clinical experiences in specialty areas within nursing have been reduced.²

Current nursing curriculum is preparing the practitioner to be a generalist rather than a specialist. The OR experience in most nursing programs is either non-existent or limited to brief observations or patient follow-throughs where the student spends one day with a surgical patient, observing the patient's preoperative, intraoperative and postoperative experience. Many educational institutions operate under the perception that OR nursing is a technical trade not a professional specialty to pursue.¹ The perioperative nurse's focus is on the physiologic, psychological, sociocultural and spiritual needs of the patient and family. The OR is mechanically driven with highly technical equipment. Each surgical specialty carries its own challenges with specialized equipment and technology. The nurse's role goes beyond the delivery of a technical skill or task. The perioperative nurse must design, coordinate, evaluate and deliver care to meet the identified needs of each patient during the preoperative, intraoperative and postoperative phase. Perioperative nurses provide care designed to meet these individualized needs through the use of the nursing process.

Post-graduate programs are available for many nursing specialties. Their criteria are strict and



L to R: Instructor (Fern Christensen) teaching drape techniques to nursing students Carla Rizzuti, Nadine Pallister, Catherine Hunter, and Dawn Maroney



Courtesy VIHA Multimedia

L to R: Preceptor, Susan Rambout, with Student Carla Rizzuti

they can be expensive to take and difficult to get in to. The VIHA program offers a cost-effective, more accessible, alternative for those wishing to specialize in perioperative nursing.

THE INCEPTION OF THE VIHA PERIOPERATIVE NURSING PROGRAM

Back in 2000, hospitals began to recognize that there was, and could continue to be, a serious shortage of experienced perioperative registered nurses in Victoria and across the country. Hospitals began to look to new, creative responses to the nursing shortage and to try new ways and innovative methods to educate, train, and recruit perioperative nurses.

In response to the nursing shortage crisis, the Healthcare Labour Adjustment Agency (HLAA) offered to fund educational courses to those healthcare areas with the greatest need. The OR ranked second only to the Emergency Room (ER) and both areas took precedence in the development of training and recruitment programs.

The HLAA provided educational material, to support the development of an OR course, including:

- *Introduction To Perioperative Nursing Curriculum Guide* prepared by Bonnie Lantz, Past President of Registered Nursing Association of British Columbia (RNABC)
- *Two text books: Barry and Kohn's Operating Room Technique* and Alexander's *Care of the Patient in Surgery*

- Association of Perioperative Registered Nurses (AORN), Videos *Perioperative Nursing 101 program*

The Royal Jubilee Hospital (RJH) and the Victoria General Hospital (VGH) collaborated in the development of the VIHA Perioperative Nursing Program. The HLAA Perioperative Nursing Program Curriculum was used as the basis of this program with the addition of:

- VIHA's vision, mission and objectives
- Operating Room Nurses Association of Canada (ORNAC) Recommended Standards, Guidelines, and Position Statements for Perioperative Registered Nursing Practice (2003)
- VIHA policies and procedure manuals

After in-house (VIHA) applicants for the ER program were identified nurses from all hospital clinical areas were able to apply for the OR in house program. The OR Program was not posted until the ER program was filled. Nurses who applied for the ER program and were not selected could apply for the OR program if they desired. Eight RNs were selected, using seniority-based criteria, for the program. The nurses received their full wages during the twelve weeks of training.

WAS IT EFFECTIVE?

The removal of nurses from understaffed hospital areas to fill the in-house programs put more pressure on the remaining nurses throughout the hospital. The fact that the ER and OR nursing courses were offered at the same time and that acceptance had been based on applicant seniority was a great strain on the wards. Having these courses run at the same time depleted both human resources and the wealth of knowledge held by senior staff nurses.

During the first two weeks of the theory/classroom days one nurse dropped out of the program. Three of the seven nurses returned to their previous jobs within the first year. At the time of writing, four nurses from this program were still working within VIHA OR's.

It was observed that the experienced ward nurse had a difficult time adjusting to the return to a novice role in nursing. This illustrates suggested behaviour related to adult learning theory.³

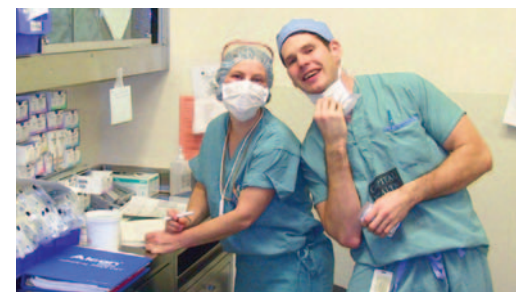
In addition, students had not been required to commit themselves to the OR after the completion of the course. As a result, the program involved a large investment by the hospital with a fifty percent retention rate after one year.

COLLABORATION WITH UVIC SCHOOL OF NURSING

In January 2002 a trial with UVIC was approved and the faculty selected two students (taking final fourth year courses N475 & N491, *Consolidated Practice Experience* and *Nursing Practice Transitions*). These courses provide the opportunities for the nursing students to draw together all previous learning – in theory and clinical – and to focus on practice. The courses are offered from January to April over 12 weeks of full time study and experience.

The UVIC faculty determined that it was possible for students to meet the requirements for N475 and N491 while taking the OR in house program. The OR in house program requirements were over and above their UVIC course-load. The OR program replaced ward time and, in addition, the students finished the three months with a certificate in Perioperative nursing.

The UVIC students were joined by three VIHA employees (two of whom were recent UVIC nursing graduates).



Courtesy VIHA Multimedia

L to R: Preceptor, John Baker, with student Catherine Hunger



Courtesy VIHA Multimedia

L to R: Student, Nadine Pallister, with surgeon, Dr. David Naysmith, and Preceptor, Joanne Thackray

The results from this second group were significantly different from the first group. Four of the participants – the nurses who were recent UVIC graduates and the two individuals who were accepted while in school – are, at the time of writing, still working in the OR. The more senior VIHA employee returned to previous nursing employment and did not pursue a career in the OR.

Since 2002, the VIHA in-house perioperative nursing program has been offered every year, from January to April, for UVIC students. The popularity has grown as the success of the graduates has been realized. Current programs are seeing ten to twenty applicants per year. Enrolment, despite strict criteria, remains at eight to ten students every year. UVIC carefully evaluates the student's ability to be "practice ready" and assess the student's emotional and physical ability to complete UVIC's final semester while taking on the extra workload of an OR in-house program.

COURSE OUTLINE

The program is twelve weeks in length and is facilitated by two OR Clinical Nurse Educators. The students begin with two weeks of classroom work, focused on basic theory pertaining to the scrub and the circulating nursing roles.

The classroom work is also amalgamated with the clinical component during the remaining 10 weeks. The focus during this time is on the nursing process, domains of nursing practice,

related competencies and quality indicators. Theory studies are organized around the phases of the OR environment – Pre-operative, Intra-operative and Post-operative phases.

Students are required to write three papers reflecting their knowledge of the Anaesthesia Role, Circulating Nurse Role, and Scrub Nurse Role. Eleven quizzes and one final exam are written.

*“Practice is the best instruction of them all.”
— Aristotle.*

During the clinical component the students, with their preceptor, decide what cases they will be involved in based on the students’ agreed-upon learning needs. Students are evaluated, at midterm and again at program completion, through the use of a skills checklist and a clinical performance review (based on ORNAC standards of practice). Throughout the program the goal is to tie theory to practice through a focus on areas such as advocacy for patient and family and teamwork within the OR community.

The students apply the theory and skills that have been learned in the classroom to the practice setting. In the last few weeks of the course they learn through practice as a supernumerary member of the OR team.

The clinical expectation of the program is that each student will have exposure to a range of specialties including: General Surgery, Urology,



Courtesy VIHA Multimedia

On left, student, Susan Rambout, scrubbed in with Preceptor (behind the student) in the OR (on right are the surgeon and physician assistant)

Orthopaedics, Ear Nose & Throat (ENT), Vascular, Obstetrics, Gynaecology, Neurosurgery and Plastics.

THE STRENGTH OF PRECEPTORSHIP:

“The greatest good you can do for another is not just share your riches, but reveal to them their own.” — Benjamin Disraeli

The VIHA perioperative nursing program is built upon the strength of preceptor, or mentor, involvement. The program’s success is a direct result of the relationship that develops between the preceptor and the student. The preceptor opportunity is offered on a volunteer basis to full time operating room registered nurses, who have a minimum of three years experience in the operating room.

Recruitment of preceptors can be challenging and requires creative motivating strategies that will attract, and retain, staff members to the role.⁴

Preceptorship, while challenging, can enhance the quality of work life. It is a conscious giving of self that requires a commitment of emotion, time, and energy with very little in the way of support from the hospital. It also leads to meaningful relationships and professional growth.

Preceptorship strengthens the nursing profession by increasing the opportunities available to evolving nurse leaders while helping develop competence, confidence and satisfaction in the work place.⁵ Without a sufficient supply of nurses who are willing to serve as preceptors there will not be enough nursing graduates available to offset staffing shortages now or in the future.⁶

THE FUTURE

The perioperative registered nurse may become extinct if they are not being prepared to replace the generation that is currently retiring. The average age of an RN in Canada in 2003 was 44.5 years, an increase of 1.7 years from 1999. The average age increased, in every jurisdiction, between 1999 and 2003. There were more RNs aged 55–59 years in the workforce in 2003 than RNs aged 30–34 years. More than one-sixth (17.7%) of the



Courtesy VIHA Multimedia

L to R: Student, Chrystal Reuther, flying solo with Plastic Surgeon Dr. Jason Gray.

RN workforce in Canada was aged 55 years or older in 2003.⁹ By 2011, the largest group of employed nurses will be in their mid to late fifties and exiting the nursing profession, for retirement, at a fast pace.⁶ Research also indicates that an increasing proportion of registered nurses are retiring early, many by age 56. If RNs were to retire at 55, Canada would be expected to lose 64,248 RNs by 2006, a figure equivalent to more than one-quarter (28%) of the 2001 RN workforce. This projected loss is more than double the expected loss based on a retirement at age 65. Under this scenario, RN losses were most severe in British Columbia (32%) and least severe in Atlantic Canada (22%). Quebec, which ranked first for retirement at age 65, falls to fifth for retirement at age 55.⁸ The predicted nursing shortage is also associated with the exodus of Canadian nurses to other countries, the population increase of 20% by 2011, and an increasingly aging population that will have increased health care requirements.⁷

CONCLUSION

If nursing students are not exposed to perioperative nursing content they will graduate unaware of the specialty practice opportunities that perioperative nursing offers.¹ Aging nurses will soon reach the typical retirement age of 65 years. Research indicates that an increasing proportion of registered nurses are retiring early, many by age 56 and will impact the OR nursing workforce in the next several years. In the VIHA operating rooms there is nursing staff

stability, likely in thanks to the in-house program. The operating rooms are beginning to be staff with a new generation of nurses that are well educated, specialized, dedicated and eager to take on the future role of the registered nurse in the operating room.

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