



Mom Baby Contingent Worker

ORIENTATION, EDUCATION, AND COMPETENCY ASSESSMENT

Welcome, we are excited to have you come support our team. The following document lists self-learning and on-line activities to help prepare you for our hands-on training and transition to caring for patients in our patient care areas.

The learning materials are found on our website [Clinical Facility Temp Worker \(intermountainhealthcare.org\)](https://intermountainhealthcare.org/careers/nonintermountain-workforce/contingent-workforce/temporary-worker/contracted-labor/clinical-facility/) URL: <https://intermountainhealthcare.org/careers/nonintermountain-workforce/contingent-workforce/temporary-worker/contracted-labor/clinical-facility/>.

We recommend that you bookmark the website for reference during your stay. The website will have additional resources that you will find helpful during your stay in Utah if you are coming to us from outside the area.

Initial orientation day/ On-boarding class

- ☐ Complete hands-on skills and have instructors sign your competency assessment document.
- ☐ ID badge
 - Attending a central Contingent worker orientation class, pick up your badge before you leave.
 - Not attending a class, you will need to obtain your badge at your facility.
 - Badge access may take a day or two to be activated. If access is not working after two days, contact the local security department.
- ☐ Start the on-line modules. These need to be **completed within 2 weeks** of your start date or you will be pulled from the schedule. You will need to sign-yourself off on these modules on your competency assessment.
 - QR code will link you to the Non-Intermountain Clinical worker site.



Unit Orientation

- ☐ Have your "buddy" or charge nurse complete your [Department Orientation Tour \(DOT\)](#) when you arrive on the unit.
 - NOTE: You need to have a new DOT completed and signed every time you first arrive on any unit/facility.
- ☐ You will be scheduled for one orientation shift to shadow another caregiver/buddy. Your buddy must sign-off your competency assessment documentation.
 - Note: Make sure to bring your competency assessment document with you for your shifts during orientation.
- ☐ After your orientation shifts you will be receiving your schedules from your dedicated unit manager.
 - Note: For nursing only: If you do not have a dedicated unit, your schedule will come from rusty.carlson@imail.org.

NOTE: Return all paperwork within 2 weeks.

Contingent Workers return to intermountainCWM@rightsourcingusa.com

NURSA nurses should return to jen.chandio@imail.org

Find information on how to [Activate your Intermountain Account](#) on the Website using the above QR code.

- Initial where indicated.
 - Key to abbreviations in the table: CW =Contingent Worker and Ed/TL=Educator/Team Lead.

Name:

Primary Units

Buddy:

All educators/team leads must date and initial each item on the skills assessment and sign at bottom of form as Intermountain representative.

COURSE REFERENCE NUMBER	COURSE NAME	TIME	DATE	CW INITIALS	CC INITIALS	N/A
SELF GUIDED GENERAL “E-LEARNING” MODULES FOR REVIEW						
Contingent Worker to initial & date upon completion of e-learning. Manager/Educator/Designated Leader to mark any non-applicable modules.						
13785	Blood Product Administration	18 min				
Review for Hands-On	PT0051 Glucose Monitoring in Whole blood (Nova Stat strip Glucose Monitoring System) PT0051C1 – <i>Content Test to complete and bring to training</i>	15 min				
16329	N95 and PAPR for Bio Aerosol Protection	16 min				
PREREQUISITE	OSHA Medical Questionnaire_WithSubmit.pdf – complete in preparation for N95 and PAPR trainer – <i>Completed and submitted digitally on the website.</i>	5 min				
	Vocera User Training Videos Learn a name and a command Phone integration – calling an outside number Vocera Documents for Central Hospitals Vocera 3000 command pocket card Vocera 3000 reference card	3:26 min 1 min 5 min 5 min				
JOB AID	<ul style="list-style-type: none"> Using the Time Clock Punching on the Web UKG App Tip Sheet Checking my Schedule in the Mobile App 	10 min				
15874	EOS: New Fact Sheet	15 min				
190328	Risk Stratification and Management of Postpartum Hemorrhage	20 min				

SELF GUIDED GENERAL “E-LEARNING” MODULES TARGETING ELECTRONIC HEALTH RECORD (Cerner = iCentra) FOR REVIEW

Contingent Worker to initial & date upon completion of e-learning. Manager/Educator/Designated Leader to mark any non-applicable modules.

211053	iCentra for Acute Nursing: Care Compass	10 min				
211055	iCentra for Acute Nursing: Search for Pts	10 min				
211061	iCentra for Acute Nursing: Navigate in iView	10 min				
211063	iCentra for Acute Nursing: Medication Administration	10 min				
211065	iCentra for Acute Nursing: Manage Orders	10 min				
220388	iAware	5 min				

Total online learning time		3 hrs.				
PRACTICE RESOURCE: The contingent employees can access the Lippincott Advisor and Procedure resources by opening Lippincott Procedures at: https://procedures.lww.com/lnp/home.do , select login and then the self-enroll option (highlighted in red below). The self-enroll feature is good for 90 days.						
COURSE REFERENCE NUMBER	COURSE NAME	DATE	CW INITIALS	CC INITIALS	N/A	
IN PERSON HANDS ON TRAINING – FOUNDATIONAL EQUIPMENT						
4242	Communication Device -Vocera SPO (set-up for unit)	10 minutes				
3011	Defibrillator – Zoll R-Series quick review	15 minutes				
Lab	Glucometer - Nova StatStrip	20 minutes				
20792	N95 SPO – 3M mask types 8210, 1860, 1860S and reprocessing Please make sure to bring your completed OSAH Medical Questionnaire – 4 stations	15 minutes				
7042	PAPR (powered Air Purifying Respirator SPO - TR600 Versa-flo - 2 stations	15 minutes				
3250	Phototherapy Bed/Blanket	15 minutes				
3305	Measuring Irradiance Levels Using Bili Meter	10 minutes				
Other common equipment that will be used but not trained to due to previous experience and expertise. Each unit has a nurse educator to help with any additional training questions. During each shift you will also have a “buddy” assigned to help answer any questions regarding protocols, guidelines, and or procedures that may be different.						
<ul style="list-style-type: none"> • Patient Beds • Infusion Pump – CareFusion / Alaris pump • Medication dispensing machine – AcuDose • Infant Warmer (Panda, Ohio) • Breast Pump • Milk Warmer • Sequential Compression Devices • NeoPuff/NeoTee • Hemocue (if used on unit) • Blood Warmer / Rapid Infuser • PCA (if applicable) 						
TOUR FACILITY AND UNITS						
8709	Complete DOT (department orientation and tour) for each unit where you will be working.					
UNIT ORIENTATION / SKILL CONFIRMATION						
“BUDDY” ESSENTIAL NURSING SKILLS EVALUATION Observed skills in the clinical setting (peer-to-peer evaluation). Clinical Coach/Preceptor to initial & date upon contingent worker completion of skill.						
Unit Based	General admission process and expectations for both mom and baby including:					

	<ul style="list-style-type: none"> Admission in iCentra if maternal direct admit to MB Newborn Admission Admit teaching bundle 					
Unit Based	General transfer process from L&D and expectations <ul style="list-style-type: none"> Bedside report ID Band check / assessment Initiate postpartum orders and PSO Initiate newborn orders (if not done in L&D) Immunizations Columbia Suicide Screening Newborn security process (footprint, photo, etc) 					
Unit Based	Assessment: frequency and expectations for both mom and baby (refer to Lippincott and Powerplans) <ul style="list-style-type: none"> Post-delivery C/S Intrathecal narcotic Newborn Preeclampsia / severe HTN 					
Unit Based	Protocols for Neonatal Considerations <ul style="list-style-type: none"> Neonatal hypoglycemia Late preterm Early Onset Sepsis Subgaleal hemorrhage after forceps/vacuum Hyperbilirubinemia / Phototherapy CMV Testing if applicable 					
Unit Based	Documentation expectations for <ul style="list-style-type: none"> EPDS Screening Newborn Admission IPOC Care Compass Tasks iView, MAR, iAware iCentra postpartum teaching bundles Intake / Output (PPH, Magnesium Sulfate) PCA documentation (if applicable) Newborn Discharge Checklist 					
Unit Based	Lab Process: who draws it (lab tech versus RN), schedule/timing <ul style="list-style-type: none"> Maternal Hct Newborn screening / bili 					
Unit Based	Medication Administration <ul style="list-style-type: none"> Barcoding Pump association iAware Signing 					
Unit Based	Emergency Checklists (for OB Emergencies)					

Unit Based	OB Blood Administration Orders / Checklists					
Unit Based	Discharge Process <ul style="list-style-type: none"> • Discharge teaching bundles • Newborn screening (State requirements) • Hearing Screening • Bilirubin • CCHD • Newborn BP for Coarctation Screening • Car Seat Testing (if applicable) • Future bili order (if applicable) • Disengage and remove Totguard • Initiate Discharge Orders • Complete Care Compass Tasks and IPOC's • Remove thigh sticker • Close Pregnancy 					
Unit Based	Unit workflow <ul style="list-style-type: none"> • Lactation Consultation and schedule • Discharge times 					

Note: To be completed on the first day scheduled on the unit

I have completed all the above-listed items and have had the opportunity to ask questions and clarify my understanding. Any and all questions have been answered to my satisfaction. I understand the information presented in the above listed materials and understand that I am accountable for complying with these and with all Intermountain policies, procedures and guidelines. I will not perform any treatment or use any type of equipment with which I am unfamiliar or uncertain. If I need further assistance with performance of my job, I will request assistance from my manager(s), educator(s), or appointed ambassador.

Once completed send completed document to Margaret Stocking intermountaincwm@rightsourcingusa.com

NURSA nurses should return skills assessments and other orientation documents to jen.chandio@imail.org

Contingent Worker Signature: _____ Date: _____

Printed Name: _____ Initials: _____

Intermountain Representative Signature: _____ Date: _____

Printed Name: _____ Initials: _____

Intermountain Representative Signature: _____ Date: _____

Printed Name: _____ Initials: _____

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