

Tailoring a Systems Learning Curriculum for New Clinicians Across the Care Continuum

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Maximizing electronic systems learning within the course of a clinician's orientation is a challenge facing most healthcare organizations today. Nurses and other clinicians bring varying levels of experience in utilizing an EHR. Our organization identified several main challenges in our systems nursing education. First, it is difficult to engage learners with previous experience with an EHR and learners new to the EHR in the same classroom. Second, it is difficult to teach nurses new to our organization in the same classroom as nurses experienced in our organization but moving into new roles. Third, it is difficult to standardize and optimize education across practice settings. Finally, largely due to the above challenges, our traditional offering of two EHR classes during the employee's first week of orientation resulted in poor learner retention. Our team evaluated the current program and obtained feedback from attendees and stakeholders. The course was revamped, adopting adult learning principles. A curriculum was developed to include a "101" and "201" course. New nurses attend the "101" course during their first week of orientation. This course focuses on functionality of the system---the basics the learner needs to know for beginning navigation of the system across settings (Emergency Department, Ambulatory, Inpatient, and Post Anesthesia Unit). About one month later, the employee returns to a "201" class; the delay allows the learner to gain context and process knowledge. The department-specific "201" course offers deeper knowledge of the system as related the nursing process in the specific area. Nurses experienced in our organization who are moving into new roles attend the appropriate "201" course during their week of orientation to the role. Maximizing learning of the electronic system remains the number one goal for the program. While the program remains new, attendee feedback has been positive thus far. We have found, though, that restructuring has also allowed for streamlining of education. Efficient and effective use of resources is an important added benefit. This standardized curriculum also allows for extending an invitation to the "101" course to our multidisciplinary colleagues who are involved in patient care across care settings. The greatest challenge thus far is the scheduling of employees to return to the "201" course; however, this is being navigated with strong support from nursing leadership.