

Standard SQE.01.06

The hospital provides orientation for all staff.

Intent of SQE.01.06

Orientation to the hospital allows staff members to understand how their specific roles will contribute to the organization. New staff members must understand how their specific role and responsibilities contribute to the hospital's mission. Orientation is accomplished through the following:

- General orientation to the hospital
- Specific orientation to the staff member's role and job responsibilities
- Key safety information related to the staff member's role

The staff member's completed orientation is documented in their personnel record. The orientation includes key safety content according to the staff member's role and as determined by the hospital. Examples of key safety content that may be a part of orientation include the following:

- Reporting of medical errors
- Infection prevention and control practices
- Hospital policies on telephone medication orders
- Hospital safety codes and emergency procedures

Contract staff, volunteers, students, and trainees are also oriented to the hospital and their specific assignments or responsibilities, such as patient safety and infection prevention and control.

Measurable Elements of SQE.01.06

1. The hospital completes orientation before staff provide care, treatment, and services. (*See also* GHI.02.00, ME 4)
2. The hospital orients staff on the following according to their job description:
 - High-risk quality and safety issues (for example, reporting of medical errors, infection prevention and control practices, the hospital's policies on telephone medication orders)
 - The hospital, the department, and/or unit to which they are assigned
 - Their specific job responsibilities and any specific assignments
 - Relevant hospitalwide and department- and/or unit-specific policies and procedures
 - Patient rights, including ethical aspects of care, treatment, or services and the process used to address ethical issues based on their job duties and responsibilities (*See also* PCC.01.01, ME 2)
3. Other clinical staff who accompany the medical staff and provide care, treatment, and services are oriented to the hospital.
4. Students, trainees, and volunteers are oriented to the hospital and assigned responsibilities.
5. Completion of orientation and a description of the objectives is documented for all staff in their personnel record.

Standard SQE.01.07

Staff participate in education and training.

Intent of SQE.01.07

Staff must participate in education and training to maintain acceptable staff performance, to learn new skills, and to be trained on new medical equipment, technology, and procedures. The hospital provides resources such as facilities, educators, and time for ongoing in-service and other education. The training and education provided by the hospital must be relevant to each staff member as well as to the continuing advancement of the hospital in meeting patient needs. For example, medical staff members may receive education on infection

prevention and control, advances in medical practice, culture of safety, or new medical equipment. Each staff member's training and educational achievements are documented in their personnel record.

The hospital collects data from several sources to understand ongoing education needs, including the following examples:

- Results of quality and safety measurement activities
- Monitoring data from the facility management program
- Introduction of new medical equipment
- Skill and knowledge areas identified through job performance review
- New clinical procedures
- Strategic plans to provide new services

The hospital has a process to collect and integrate data from various sources to plan staff training and education programs. The hospital determines which staff are required to obtain continuing education to maintain their credentials and how the education of these staff will be monitored and documented. Hospital leaders support ongoing staff education by providing equipment, time, and other necessary resources for education and training programs. Current scientific information, such as evidence-based guidelines and practices, is used to support the education and training programs. The education and training can take place in a centralized location, various smaller learning and skill development locations throughout the facility, or through online training portals. Educational opportunities can be offered using various methods and at various times and settings, to minimize the disruption to staff scheduling and any potential affects this may have on patient care.

Measurable Elements of SQE.01.07

1. Staff participate in ongoing education and training to maintain or increase their competency, and as needed. (*See also* AOP.05.02, ME 2)
2. Hospital staff are provided ongoing education and training.
3. The hospital uses various sources of data and information, including the results of quality and safety measurement activities, to identify staff education needs. (*See also* GLD.07.01, ME 3)
4. Staff education programs are developed and provided based on these data and information.
5. The education is relevant to each staff member's ability to meet patient needs and/or continuing education requirements.
6. The hospital provides adequate time and resources for all staff to participate in relevant education and training opportunities.
7. Completion of training and education is documented for all staff in their personnel record.

Standard SQE.01.08

Staff are competent in resuscitative techniques appropriate to their role in the hospital.

Intent of SQE.01.08

All staff who provide patient care, treatment, and services, including medical staff, and nonclinical staff whom the hospital identifies, are trained in basic resuscitative techniques. The hospital identifies the level of training (basic or advanced life support), appropriate to their roles in the hospital, for all clinical staff who provide patient care. For example, the hospital may determine that all clinical staff who provide care in specific departments, such as the emergency department or intensive care unit, or all staff who administer or monitor procedural sedation, are required to be trained in advanced life support. The appropriate level of training is repeated based on the requirements and/or time frames identified by a recognized resuscitation training program, or every two years if a recognized training program is not used. Recognized training programs such as the American Red Cross and the American Heart Association are programs that offer medical emergency preparedness globally. As an alternative to offering a recognized training program, the hospital can choose to develop its own training program as long as the program is based on the requirements and/or time frames