POLICY ON TRAINING PROGRAM OF NURSE TRAINEES

POLICY NO: NSO-001

DIVISION: NURSING SERVICE DIVISION

POLICY REVIEW DATE: July 12, 2016

Reviewed by:	Reviewed by:
Angeline L. Brillante, RN, MAN	Arleen G. Herrera, RN, MAN
Assistant Chief Nurse	OIC- Nursing Division
Reviewed by:	Approved by:
Lea Grace M. Vasquez,MD	Ephraim Neal C. Orteza, MD,MHA
OIC- Chief of Clinics	Hospital Director

OBJECTIVES:

This training program offers the newly graduate nurse (board certified) to widen their clinical experience through actual experiences to the different clinical areas with supervision by an official nurse educator.

COVERAGE:

This shall cover Nursing staff with supervisory levels.

RESPONSIBILITIES:

- I. It shall be the responsibility of the Chief Nurse to oversee the implementation of this policy; to command order and obedience by trainees.
- II. Responsibility of trainees to maintain a 100% attendance during the required training period, to comply and abide with all the rules and regulations set by this hospital.

POLICY:

- I. This policy shall ensure that all trainees to comply with the requirements set for certificate awarding.
- II. This policy shall regulate the movements of such trainees so as not to jeopardize the health condition of patients and the entire service as a whole.

PROCEDURE:

- I. Trainees are accepted only after the completion of the requirements of the Nursing service with the recommendation from the City Hall approved by the Hospital Director who shall in turn forward it to the Chief Nurse for evaluation.
- II. Qualified applicants must complete the following requirements prior to scheduling for written examination:
 - 1. Personal Data Sheet (PDS) with 2x2 pictures
 - 2. Application letter
 - 3. Board rating (photocopy)
 - 4. Transcript of record (photocopy)
 - 5. Diploma (photocopy)
 - 6. IV Therapy card (photocopy)
 - 7. Seminars/trainings attended (photocopy)
 - 8. PNA membership
 - 9. BLS certificate training
- III. He/ she must pass the qualifying examination (written and oral) with a score of 85%.
- IV. Trainees shall furnish this office a waiver of non-expectation for a job position after training.
- V. They shall be expected to actively participate in all in-service training programs and nothing beyond the allowed practices of this Division.
- VI. They shall be recommended if qualified to a vacant position. He/she must have undergone three (3) months training and exposure in all clinical areas, with a very satisfactory performance rating and must pass the pre-qualifying examination and interview.
- VII. They shall work under the direct supervision/ monitoring of an official staff of this institution.
- VIII. Grading system shall be followed to ensure training is comprehensive prior to issuance of certificate.
- IX. No certificate of training will be issued for those who have not completed the required number of hours.

APPENDIX:

Official Undertaking for Nurse Trainee

DATE OF IMPLEMENTATION:

This policy has been implemented since 1986, revised 2006 and reviewed 2016. This policy will continue to be implemented as rewritten.

SCHEDULE FOR POLICY REVIEW:

This policy shall be revised every three (3) years or as deemed necessary.

OSPITAL NG PARAÑAQUE 0440 Quirino Ave. Bgy. La Huerta, Parañaque City

OFFICIAL UNDERTAKING

from the division of	i the Hospital
It shall be expected of you to meet and comply with the general standard not limited to the following:	ds set by this institution but
1.) Performance Rating ≥8.0-9.5 (Very Satisfactory) upon completion of	training;
2.) Acceptable attendance record;3.) Strict compliance with the hospital policies and rules of the Section directly under;	/Division to which you are
4.) Maintain a harmonious relationship with peers and other health worker5.) Recognize hospital authority and the right of the patients;	rs of this institution;
6.) Subscribe to the norms of conduct of a good public servant and exempered of your profession.	plify high ethical behaviour
You shall be obliged to report for work with a minimum hours a course of your entire training period.	week or hrs. in the
You are deemed and considered a trainee solely for the purpose of your gain actual experience. As such, the Management is under no obligation to hir termination of the training period. However, the Management shall be certification of completed training as to credit number of hours for whatever In the event of grave misconduct and/or errors resulting from negligence, the prerogative to immediately terminate your training and oblige you to pay the No certification shall be issued to this effect.	e you as an employee upon obliged to issue a valid legal purpose it may serve. Management shall have the
Name as	nd Signature of Trainee
Witness:	Date and Time
Name and Signature (Division Head)	Date and Time

DR.EPHRAIM NEAL C. ORTEZA

Hospital Director

POLICY ON AREA ROTATIONAL PLAN

POLICY NO: NSO-002

DIVISION: NURSING SERVICE DIVISION

POLICY REVIEW DATE: July 12, 2016

Reviewed by:	Reviewed by:
Angeline L. Brillante, RN, MAN	Arleen G. Herrera, RN, MAN
Assistant Chief Nurse	OIC- Nursing Division
Reviewed by:	Approved by:
Lea Grace M. Vasquez,MD	Ephraim Neal C. Orteza, MD,MHA
OIC- Chief of Clinics	Hospital Director

OBJECTIVES:

This policy shall develop and hone skills and knowledge about the nature of work of those in this Division.

COVERAGE:

This shall cover Nursing Division in its entirety.

RESPONSIBILITIES:

- I. It shall be the responsibility of the **Head of the Division** to oversee the implementation of this policy and to monitor its effectiveness corollary to the needs and trends in the management of this division; and to conduct periodic performance evaluation on those at the supervisory levels.
- II. It shall be the responsibility of the **Nurse Supervisors** to act as go between in times when conflicts arises emanating from resistance to abide among his/her subordinates; to report relevant issues to the Division Head from time to time as needed.
- III. It shall be the responsibility of **All Staff** under this division to abide with the guidelines incorporated into this policy with a good grasp and comprehension of the essentials and motives of such movements in the working plan.

POLICY:

- I. This policy shall ensure that the conduct of motion for rotation of staff shall be orderly and discipline guided.
- II. This policy shall enforce compliance by all with the guidelines incorporated into it to ensure the deliverance of quality nursing care and management.

PROCEDURE:

- I. Rotation shall be as follows:
 - **Head Nurse** if need the arises
 - Staff Nurse and Nursing Attendant every six (6) months or if the need arises
- II. Rotation shall be based on the performance evaluation of personnel as submitted by the designated rater to Chief Nurse
- III. Rotation shall be done anytime if with manpower shortage of one area due to EL, SL and resignation of staff.
- IV. Rotation may not proceed for all at the same time as those who would be responsible to orient and train the new rotators.

DATE OF IMPLEMENTATION:

This policy has been implemented since 1986, revised 2006 and reviewed 2016. This policy will continue to be implemented as rewritten.

SCHEDULE FOR POLICY REVIEW:

This policy shall be revised every three (3) years or as deemed necessary.

POLICY ON ON-CALL SCHEME (NURSE RELIEVER)

POLICY NO: NSO-003

DIVISION: NURSING SERVICE DIVISION

POLICY REVIEW DATE: July 12, 2016

Reviewed by:
Arleen G. Herrera, RN, MAN
OIC- Nursing Division
Approved by:
Ephraim Neal C. Orteza, MD,MHA
Hospital Director

OBJECTIVES:

- I. To resolve "pull-out" from other clinical areas as well as extension of duty.
- II. To cover manpower shortage in case of absences.

COVERAGE:

This shall cover Nurses in all clinical areas.

RESPONSIBILITIES:

- I. It shall be the responsibility of the office of the Nursing Service Division to monitor the effectiveness of the policy.
- II. It shall be the responsibility of the Supervisor on duty to inform the on call duty ahead of time.
- III. It shall be the responsibility of the On-call staff to make him/her available on scheduled dates.

POLICY:

- I. Under any circumstances that a staff nurse shall be absent, he/she shall inform the NSO two (2) hours prior to give time for the Nurse Supervisor to make arrangement. Failure to notify NSO on the specified time will mean absent without pay.
- II. All ON CALL staff must be available at all times in case services shall be required.
- III. ON CALL duty in each area shall be rotated among staff.

PROCEDURE:

- I. Schedule submitted shall bear the name of the staff and days of ON CALL.
- II. ON CALL staff shall be notified in cases of absences in their respective areas.
- III. Replacement of extra off for staff that went on duty will be arranged in the next cycle of schedule.

APPENDIX:

On call slip form

DATE OF IMPLEMENTATION:

This policy has been implemented since 1986, revised 2006 and reviewed 2016. This policy will continue to be implemented as rewritten.

SCHEDULE FOR POLICY REVIEW:

This policy shall be revised every three (3) years or as deemed necessary.

ON CALL SLIP FORM

	Nursing Service Division ON CALL SLIP	
Name:		
Shift:		
Date:		
Nursing Supervisor		Staff ON- CALL

POLICY ON FLEXI-TIME SCHEDULE

POLICY NO: NSO-004

DIVISION: NURSING SERVICE DIVISION

POLICY REVIEW DATE: July 12, 2016

Reviewed by:	Reviewed by:
Angeline L. Brillante, RN, MAN	Arleen G. Herrera, RN, MAN
Assistant Chief Nurse	OIC- Nursing Division
Reviewed by:	Approved by:
Lea Grace M. Vasquez,MD	Ephraim Neal C. Orteza, MD,MHA
OIC- Chief of Clinics	Hospital Director

OBJECTIVES:

To improve the staff attendance and minimize absences

COVERAGE:

This shall cover all Nursing Service Division Personnel

RESPONSIBILITIES:

- I. It shall be the responsibility of the Chief Nurse and Supervisors to monitor implementation of this policy.
- II. It shall be the responsibility of the Chief Nurse and Supervisors to approve requested off duties and avail of Flexi-time schedules without prejudice to performance of staff but to the best interest of the service.
- III. It shall be the responsibility of the Nursing staff to abide with the procedures incorporated to this policy.

POLICY:

- I. This policy shall enforce the orderliness in the processing of request off and in availing of the Flexi-time schedule.
- II. This policy shall ensure that once such is availed both parties shall abide with the rules incorporated into it.
- III. This policy shall enforce that the required number of working days in a month shall be satisfied as ruling by the Civil Service commission

PROCEDURE:

- I. It shall be the responsibility of the Head Nurse of each area to prepare the schedule for the nursing staff for final approval of the Hospital Director.
- II. Deadline for submission of written requests for consecutive OFF duties shall be every 5th and 20th of each month and upon the approval of the Head Nurse.
- III. Request for exchange of duty maybe granted by the Nurse Supervisor if with valid reason only; documentation of signature by both parties shall be done. Failure to report by one (1) party, both will be marked as absent.
- IV. Any changes on the approved schedule by the Hospital Director, notification slip must be accomplished and signed by both parties to be submitted to the Hospital Director for approval.
- V. Flexi-time schedule are as follows:

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9 days duty = 12 hours- 6 days/ \$5days

10 days duty = 12 hours- 6 days | \$5days

= 8 hours - 1 day

11 days = 12 hours- 6 days \$\]

= 8 hours - 2 days | \$\$\]
15 days

12 days = 12 hours- 8 days/ 15 days
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8 hours would mean 3 shifts/day 12 hours would mean 2 shifts/day

APPENDIX:

None

DATE OF IMPLEMENTATION:

This policy has been implemented since 1994, revised 2006 and reviewed 2016. This policy will continue to be implemented as rewritten.

SCHEDULE FOR POLICY REVIEW:

This policy shall be revised every three (3) years or as deemed necessary.