



PATIENT SECURITY SYSTEM PRE-TRAINING WORKSHEET

HOSPITAL NAME: _____

PRIMARY TRAINING COORDINATOR:

Name _____

Title: _____

Phone # _____ Email Address: _____

INSTALLATION DATE: _____

TRAINING DATES: _____

SYSTEM GO LIVE DATE: _____

INTRODUCTION:

Thank you for purchasing a Stanley Healthcare Patient Security System. This worksheet was created primarily to assist the hospital in successfully training staff members to both implement and manage your new system. IMS believes that proper staff training is the key to the successful implementation of a patient security system. Good training is only possible with good preparation. Our goal is to train your staff how to correctly interact with the system. Please take time to complete all parts of this worksheet to help ensure that your training will be both beneficial and well attended.

STEP #1: DETERMINE WHEN TRAINING AND SYSTEM GO-LIVE WILL TAKE PLACE

The most important part to a successful training is scheduling. IMS has installed over 250 new systems over the past 15 years. Without a doubt, we can confidently say that the very best time for training to occur is during the days right before the system Go Live. The system is a security system above anything else, and it demands that the people using it understand how it operates. The absolute best way to ensure that this knowledge is not only obtained, but more importantly retained, is to conduct training in a way that what is taught in the classroom can be immediately reinforced with application. This is not only beneficial to your staff, but also ensures a long lasting successful operation of the system. Please work with your local IMS Sales Representative and IMS Trainer to determine training dates and a system Go Live date. These dates are almost always dependent on your system installation date.

STEP #2: IDENTIFY YOUR EXPECTATIONS FOR TRAINING

It is important to consider what approach you will take towards training. If all staff is not required to be there or if you try to pull them off shift, it will affect the numbers available for training. With this in mind, is training:

- Mandatory for All
- Completely Optional
- Optional but Highly Suggested
- Only available if/when staff is working

STEP #3: IDENTIFY WHO NEEDS TO BE TRAINED

Everyone who will interact with the system should receive the training they need to be successful. A maximum number of properly trained people at Go Live will produce the best outcome for staff confidence, patient security and customer satisfaction. Please indicate below how many of each type of staff will need to be trained:

_____ Nurses _____ Nurse Managers _____ Therapists _____ Nursing Assistants
_____ Security _____ Biomedical Staff _____ Facilities _____ Unit Clerks
_____ Other _____ _____ Other _____

STEP #4: IDENTIFY WHAT TYPE OF TRAINING IS NEEDED

Typically, you should take a look at the number of people who need to be trained, along with the type of training needed, and then put together an appropriate training schedule. Having already identified who needs to be trained, now consider what type of training they need. Not every user is the same. Please look at the three types of training listed below, and indicate how many people will need each type of training.

USER TRAINING (1 hour) = _____

CONTENT: System Overview; Tag application; PC training; Basic Alarm Review

TYPICAL ATTENDEES: Typical Nurse; Security; HUC; Technician; Biomed; etc.

OVERVIEW: This training is our most common and fits most staff members. It is intended to give the general user all the fundamentals needed to run the system on a day to day basis.

SUPER USER TRAINING (1.25 hours) = _____

CONTENT: System Overview; Tag application; Advanced PC training; Advanced Alarm Review

TYPICAL ATTENDEES: Charge Nurses; Night Managers; Staff Leaders

OVERVIEW: This training has as its core the User Training, but adds more to it. Super Users are those who help manage; those who catch on quickly; and often those who can teach others. We recommend having at least a couple per shift.

CLINICAL ADMINISTRATOR TRAINING (.75 hour) = _____

CONTENT: System Implementation; Responsibilities; Troubleshooting; JCAHO Prep; Manage Alarms

TYPICAL ATTENDEES: Clinical Administrators Only (*Prerequisite for this course = Super User Training)

OVERVIEW: This training is for the Clinical Administrator. Depending on the size of your facility, this is typically one or at the most two people. The class assumes that the participants have completed Super User training prior to attending. It assumes a good fundamental understanding of the System.

STEP #5: CREATE A TRAINING SCHEDULE

Now that you know who needs to be trained, and what types of training each person needs, you can work with your IMS Trainer to create a training schedule that works best for both the hospital and your trainer. As a rule of thumb, we offer six (6) hours of training per day, with adequate breaks between each class to reset and for meals. Class types can be mixed during the day, and our trainers will do their best to be available for shift changes. Generally speaking, the expectation is for ten (10) to twelve (12) people to attend each class. This allows for approximately 65-75 people to be trained each day. All training schedules must be approved by an IMS Trainer before posting for sign up. As you put together the training schedule, please consider the following:

- The “Clinical Administrator” training should be held as one of the first classes on the first day of training.
 - Because this class requires the attendees to have completed “Super User Training,” plan a block of two or two and a half hours for the “Clinical Administrator” class.
- When are the best times to train your staff? Are there certain times during the day that are busier than others?
- How will the night staff be trained? Will they respond better at the beginning or end of their shift?
- How long will it take your staff to get to the training room?
- Take into account the different classes you need and how long is needed for each – you may only need one Super User class which means it may need to be scheduled at a time available for all those who need it.
- The majority of staff training typically takes place on Tuesdays and Wednesdays. Monday evenings may be available depending on the trainer’s travel itinerary. System Go Live is commonly scheduled for Wednesday or Thursday.
- Your trainer will need time between each class to “re-set” the training computers, and get ready for the next class. Typically, at least 15 – 20 minutes is adequate.

STEP #6: IDENTIFY WHERE THE TRAINING WILL TAKE PLACE

Where will the training classes take place? Now that you have your training schedule completed, you can schedule the needed room(s) for the appropriate times. A hospital training room is most desirable as it is a great educational setting and gets nurses off the floor so they can concentrate on the training. A conference room or meeting room can also be used.

- There should always be room for a computer and video projector (used by the trainer), as well as a place to display a PowerPoint presentation (blank wall or screen).
- At least eight (8) to ten (10) computers (depending on the size of your hospital and your classes) are also needed to allow staff to interact with the Training Software.
- The room needs to be reserved ahead of time and be available in time for set-up (at least one (1) hour prior to the first scheduled class each day) and tear down.
- Your trainer will also need to have full access to the room(s) while on site, as well as access to each training computer (including user permissions and passwords) to start and set up and the Training Software which is to be installed and tested by the hospital IT department.

Training will take place at: _____

IT Contact: _____

Phone# _____ Email: _____

STEP #7: CREATE AND POST A TRAINING SIGN-UP SHEET

The best way to make sure both your staff and your trainer are aware and ready for training is to provide a sign-up sheet. Once you and your IMS Trainer have established the training dates, create a sign-up sheet for staff member to use.

- Post your sign-up sheet in a very accessible place where everyone can see.
- Make sure your staff has ample time to plan for the classes and that everyone signs up.
- Provide lines for sign-up indicating how many can sign-up for each class to keep classes balanced.
- Provide clear information on the location of the training, including a small map if the room is hard to find.
- Please make copies of these completed sheets, prior to the first day of training, and provide them to your trainer to help him know when everyone is present for the class.

STEP #8: SET YOUR POLICIES AND PROCEDURES

Your new Patient Security System is only one part of a complete hospital patient protection system. The system should be considered only as an adjunct to good hospital policies and procedures, staff training, and patient education - not as a sole security solution.

It is imperative that a final copy of your Policy and Procedures for using your Patient Security System be completed prior to your first training date. This will not only help prepare your IMS trainer to specifically train the staff on the hospital’s procedures for use of the system, but more importantly it will ensure that your staff knows exactly how the system fits into their daily clinical procedures.

Please take a few minutes to review and answer the following questions. The answers to these questions will provide information to help you develop your hospital’s Patient Security System Policy and Procedures. They will also be used by your system trainer to help make the training very specific to the hospital. Your IMS Sales Representative and/or IMS Trainer can assist you in completing this task as needed.

1. What is the name of the hospital’s elopement code(s)?

2. What are the parameters for tagging patients (age, weight, status, etc.)?

3. Where will the tags and bands be stored?

Tags: _____ Bands: _____

4. Who will apply the tags (L&D only, RN only, all nurses)?

5. Who will confirm the Auto Admission and add the patient description (the nurse who applied the tag, the unit secretary, both, etc.)?

6. Where will the tags be applied (In the patient room)?

7. Will the tag number be documented in the medical record? If so, how and where?

8. What is the policy on periodic tag fit/tightness checks (i.e., every assessment, once per shift, etc.)?

9. How often will the tagged patient census be checked to match the patient admission census? Who will be responsible for doing the check?

10. What type parent/family education is provided on initial tagging and periodic tag fit checks?

11. What is the tag Discharge procedure? (i.e. Tagged patients who are about to be discharged should be brought to a Patient Security System computer on the way out of the department for discharge and removal of the tag – should be the last thing done before leaving)

12. What is the tag cleaning procedure (who, where, when)?

13. Who will have permission to clear alarms (all nurses, Charge Nurses, Security, etc.)?

14. What is the Security Department's involvement in alarm response?

STEP #9: PREPARE FOR TRAINING

As the day for training approaches, please consider the following:

- Make sure all staff members are clearly informed that training is going to occur – make sure they are clear on the times, the place, and the expectations for attending.
- Encourage staff to be on time for their classes.
- Make sure sign-up sheets are completed and ready to give to the trainer on the first day of training. If some of the classes have only one or two signed up, work to move them to other classes.
- Have someone ready to meet the trainer to affirm the room is open and ready to go.
- Have any Hospital required sign-in sheets ready for your trainer.
- Have a plan ready to maximize participation in classes (such as certain users will train those who miss).
- Please try to avoid having staff bring children with them to the training sessions.

FREQUENTLY ASKED QUESTIONS ABOUT TRAINING & GO LIVE

1. Does training need to take place immediately prior to turning the system on (Go Live)?

It always makes for a better system launch if staff training is scheduled immediately preceding Go Live. Obviously, it is easier for staff to retain information about the new system if they learn it today and use it tomorrow. It is our strongest recommendation that you do all you can to schedule training as close to Go Live as possible.

2. What does “Go Live” mean?

“Go Live” simply refers to the day your new system becomes operational. Patients are tagged, users are logged into the system, and hospital starts actively managing the system on their own. Typically, a representative from IMS is present to assist in this process.

3. What is a system “cut-over”?

A system “cut over” means that you had an existing system, prior to purchasing your new Patient Security System. For safety reasons, two different systems in the same area should never be operational at the same time. During a Go Live that requires a system “cut-over,” the old system is first turned off, and the old tags removed followed by turning the new system on. Because both systems may have shared interfaces at the exits, you may see IMS Technicians, access control vendors and/or elevator vendors along with extra Security staff as one system is switched to the other. Often, you will have Exit alarming with the new system, but may not be able to lock an Exit or stop an elevator until the two systems are completely switched.

4. Does every staff member need to be trained on the Patient Security System?

Our goal is always to train as many people as possible. However, realistically, we understand that it is usually impossible to get every single staff person who will interact with the patient security system to attend a full training session with the IMS Trainer. Sickness, vacations, abnormal schedules, etc., will interfere. However, experience has shown repeatedly that when leadership stresses an expectation that staff will attend formal training and makes provision for them to attend (scheduling, childcare, paid time, etc.) attendance increases and, as a result, there is a much smoother launch for the system.

5. Can we do staff training for the patient security system without training computers?

Training computers are critical for our hands-on approach to educating your staff. We will supply the hospital with a copy of our Training Software which mimics a real system. This software gives staff members a safe atmosphere to practice their skills, especially clearing alarms. If needed, we may try to get creative by using computers on wheels, laptops, etc. Even one or two computers is better than nothing. If a session is overbooked, two staff members can share a computer.

6. Can we hold the system training in a different building?

Occasionally, the perfect training room is located in a different building, or even off site. Leadership needs to consider the tradeoffs of using a remote room. If training is held in a remote location, consider printing directions or maps for each attendee, arranging schedules to allow for travel time. Even transportation can become an issue, depending on the location.

7. Do I need to clean the tags before they are used?

Prior to Go Live, you should disinfect your new tags before applying them to your patients. Tags will arrive at your site individually wrapped but are not sterilized at the factory.

8. Will someone from IMS be present when we turn our patient security system on (Go Live)?

Typically, an IMS Trainer or Sales Representative will be onsite during Go Live. Others who may be onsite for Go Live include IMS Technicians and your local IMS Sales Representative.

9. Will IMS Trainers assist staff in putting security tags on patients during Go Live?

Although an IMS Trainer and/or local IMS Sales Representative will be onsite during Go Live, they will not apply tags to the patients. They will serve as a resource for your staff by observing and advising as your staff begins applying tags.