

“the Faculty Model gave me a warm and friendly introduction to nursing practice and the patient care systems here at the Brigham, it made me feel good about the place”

**CS - 10A**

“the Faculty Model actually shortened my orientation, it was great, thanks”

**KB -7A**

“I was really ready to be on my own earlier because of the Faculty Model, but I was a ‘chicken’ so I stayed the whole time, but you guys did a SUPER JOB, thank you”

**CC - 15A/B**

“I came off orientation in 2 weeks after the Faculty Model, I could have had more time but I really felt I didn’t need it, My preceptor LOVE’S the Faculty Model!!”

**AS - 6A**

“The staff on the Faculty Model Pod were AWESOME”

**RB- 14A**



The faculty model was implemented as a mechanism to orient experienced staff to BWH systems to assure the Standard of Care, Mission and Philosophy. The overall program is designed to promote ‘team building’, ‘facilitate clinical judgement’ and apply ‘collective wisdom’ to individual patient care delivery by every nurse.

## Design

FACULTY MODEL – The Faculty Model Clinical Educator Role (5 nurses : to 1 instructor) with new ‘experienced nurses’ week #2 of RN Orientation - the program will interface with the current nurse orientation program, unit clinical educator and the use of new nurses preceptor.

• **Week one** – one day hospital = HR, 4 days = Staff Dev. Nursing

• **Week two** – FACULTY MODEL – Monday – Friday 7a-3:30pm on 14th floor Pod A

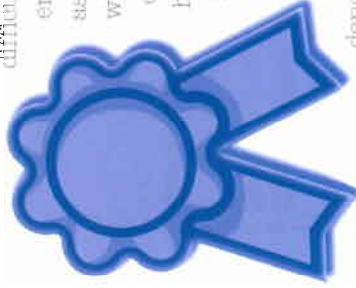
## Goal

[Automatizing the universal hospital systems (by exposure and over-learning techniques) that are standard in all units, ie – BICS OE – TELEMEERY (some aspects) - ADT= admission/discharge/transfer (some aspects ie completing page 2, use of care notes) – DOCUMENTATION (restraints, transfusions and use of SOAP notes -OMNICELL– (routine use, editing, wasting and returning meds) Text paging and Please send requests]

At the end of the Med/Surg Faculty Model week – the nurses meet with their service line clinical educators and review the PBDS (Performance Based Development System – used by the nursing education department to plan for an individualized orientation), make an action plan, receive their schedule and when available they will meet ahead of time with their unit specific preceptor.

• **Week three** – with specific unit preceptor for ‘patient population unit specific’ competencies.

“In a very large healthcare facility like the Brigham & Women’s Hospital, it is difficult to meet everyone’s orientation needs. Methods to assure not only compliance with standards but also the comfortable transition to hospital wide systems for newly hired nurses are a priority. The Faculty Model Program seems to benefit and instill confidence in those individuals who take part. The faculty who apply the actual teaching also state that they receive a positive affect in the process. Additionally, socialization and its recognized importance to successful integration is supported by this program. Providing the participants with hospital wide skills and systems adjustment to their specific medical and surgical unit-assigned.”



**Griffin, Hanley & Saniuk, 2002, Journal of Nursing Staff Development**



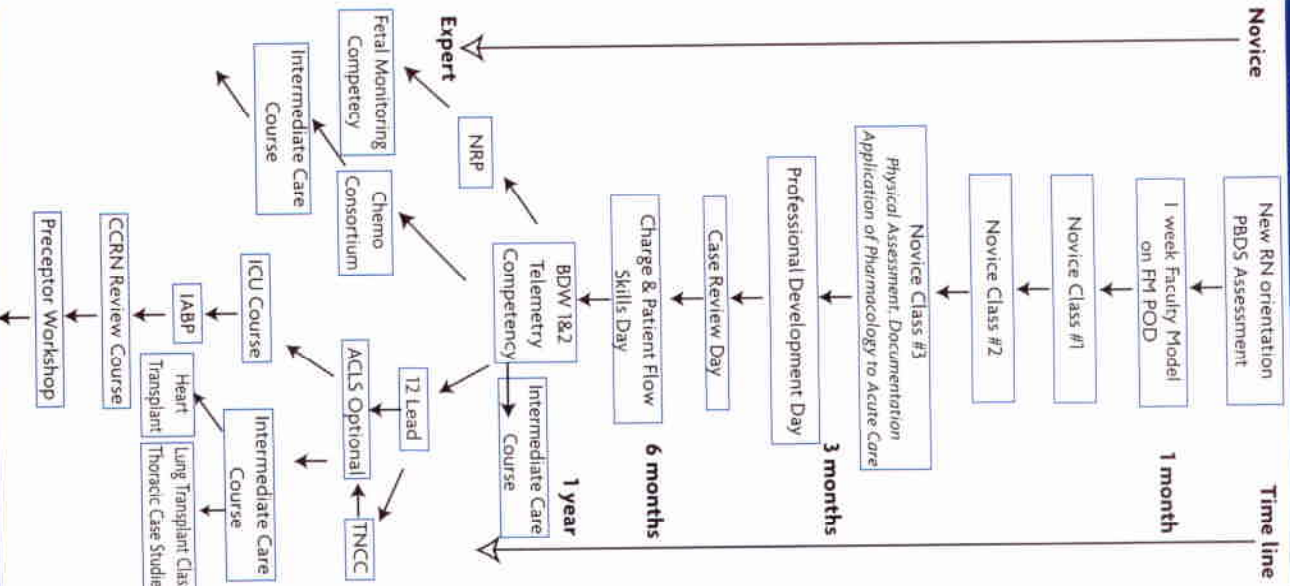
BRIGHAM AND WOMEN’S HOSPITAL





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## NURSING DEVELOPMENT PROGRAM



Become a Clinical Colleague



## FACULTY MODEL PROGRAM

Newly Hired Experienced Medical  
Surgical Nurses



**"The Faculty Model Program is part of the BWH's innovative new nurse integration initiative.**

It extends the initial orientation by 'one week'. During these five days a faculty monitored actual clinical practice situation is orchestrated in a designated patient care area. This affords the newly hired experienced nurse an opportunity to learn the universal automated, computerized patient care systems and practice standards before they move onto their 'home unit' for a traditional 'precepted orientation'."

Martha Griffin RN CS PhD,  
Program Coordinator  
Nursing Professional Development Department