

Question:	Facility:	Response:
1. Which Educational institution do you work with for sponsoring new staff to complete their critical care certification program?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	We don't have a sponsorship program in place. We have used Georgian College (given they are our neighbours) but they are no longer offering.
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	WE WORK WITH GEORGE BROWN, MICHENER, AND RECENTLY CENTENNIAL COLLEGE
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	We do not have a specific educational institution that we work with for sponsoring new staff at this time. The vast majority of the staff we hire already possess a critical care certificate or are working on completion. We allow staff to find a program that works for them and their schedule/learning needs and will reimburse them on an individual basis. We do not have an in-house critical care program – we offer Critical Care Orientation to all new staff hired into a critical care area and that is a high-level overview and spans 1.5-2 days.
	Sarah Alisch, Southlake Regional Health Centre	We run our own Southlake in house critical care sponsorship course taught by a corporate nurse educator. It's 10 weeks and very similar in ways to the course/content offered by George Brown/Michener. The advantage is staff like not having to go downtown for a course or travel but the downfall is that staff don't get an official certificate in critical care. I forget the full history of this course but staff (including ONA) support this approach for Southlake. We were recently paired with Centennial for the condensed critical care course (virtual) and it was thought that this content/offering wasn't as strong as our own in house offering.
2. Do you have Shadow shifts for non critical care staff as a way of introducing them to critical care ?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	Not at this time, we have done this during Covid and it has proven helpful.
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	WE DO NOT HAVE A FORMAL PROCESS HOWEVER DO SUPPORT STAFF WHO SELF IDENTIFY TO COME TO AREAS AND SEE THE WORK
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	If requested by staff it is something we would offer, but it is not promoted.
	Sarah Alisch, Southlake Regional Health Centre	Yes we have shadow shifts for non critical care staff as a way of introducing them to critical care. We've recently expanded this to pay staff for their time and the shadow opportunity and we are looking at ways to expand this to external nurses/staff. We find that our CCOT (critical care outreach nurses) and our clinical preceptors (NGG funded staff) are good recruits for critical care and can help encourage/identify staff who could have potential in critical care.
3. Do you have critical care internship program within your hospital?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	We applied for funding with this most recent request for funding with the CC Nursing Education Fund
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	Yes
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	No, we do not.
	Sarah Alisch, Southlake Regional Health Centre	Yes
4. Do you have self scheduling for the critical care team ?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	No
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	No
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	No, we do not.
	Sarah Alisch, Southlake Regional Health Centre	No, our critical care staff are on the standard nursing schedule that all nurses at Southlake are on.
5. Do you utilize non critical care nurses in your regular staffing pool in ICU?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	We have a specific Critical Care float pool that services both ICU and CCU. We do have some of our general float pool nurses trained in ICU for the lower acuity patients if needed.

	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	No
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	We try not to. We will pull staff from our step-down unit to care for Level 2 patients in our ICU if needed.
	Sarah Alisch, Southlake Regional Health Centre	No
6. Do you have additional Educators/ facilitators to support junior staff in ICU?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	We have an educator for ICU that is shared with Medical Imaging and we have Clinical Skills Preceptors (4 FTE) who service the entire health care centre for hands on skills.
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	No
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	No additional educators/facilitators in addition to the educator specific to ICU.
	Sarah Alisch, Southlake Regional Health Centre	We have nurse educators in the critical care areas but they support all staff. We have recruited 2 recently retired critical care nurses in the clinical preceptor role (NGG ministry funding) to help support new staff in the ICU. We are having them specifically focus on our staff coming right out of the critical care sponsorship, but also junior nurses in the critical care areas.
7. Do your preceptors have no or less patient assignment?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	Same assignment as they would have without a mentee (max 2:1)
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	No
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	Not formally. Ideally try to pair new nurses that are new to critical care with a patient who matches their current skill level and expertise
	Sarah Alisch, Southlake Regional Health Centre	No, unfortunately due to staffing they don't often get a protected assignment. It is an issue for us. We are trying to use the clinical preceptors and the corporate nurse educator to help with this workload.
8. Do you pay premium pay to your casual and part time staff to encourage picking up shifts?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	Nothing above the Collective Agreement
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	OTHER THAN OT NO
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	We currently are not offering any premium pay outside of the ONA contract.
	Sarah Alisch, Southlake Regional Health Centre	No but corporately we offer double time when there is certain criteria at play in terms of critical staffing needs. There was a corporate approach to this in alignment with other hospitals as per the OHA.
9. Any thing else that you would like to share to help us with our critical care staffing management?		
	Sarah Morris, Operations Director Professional Practice, IPAC & Allied Health Services, Royal Victoria	We have been fortunate with our Critical Care Units- they aren't our recruitment pressure point. We do utilize the Ministry initiative for CC training funds and have an extensive orientation both didactic and hands on for all new critical care staff.
	Tracie Scott, Director Interprofessional Practice and Education, Oak Valley Health	CC SEEMS TO BE A CONSTANT RECRUITMENT PROCESS THAT IS ONGOING. WE SPONSOR TO TAKE THE CC PROGRAM ON AN ONGOING BASIS EACH YEAR TO SUPPORT RECRUITMENT
	Daniel Hanciu, Royal Victoria Corporate Clinical Educator	Recruitment and retention in critical care is challenging. I would suggest, any support you can provide to staff for their education would be great.
	Sarah Alisch, Southlake Regional Health Centre	We have not traditionally had New Graduate Nurses in the critical care areas at Southlake but we are looking at this now. We have also had a lot of focus on RPNs who have had experience and are doing student nursing placements for their RN degree be considered for our in house critical care sponsorship. We use a lot of agency nurses currently to help staff our critical care areas and so we've put effort into more additional education for our agency nurses more than ever to help upskill them and get them more training and preparation (this has helped to make them more functional/safe for practice and it has helped somewhat relieve the burden of high volumes of agency nurses at times).