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Onboarding Residents in the VCU Obstetric Anesthesia Service

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Onboarding of anesthesia residents to the VCUHS Obstetric Anesthesia service

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VCUHealth™

Purpose and Background

Onboarding is commonly utilized in the corporate world. It is a process that begins before an employee starts a new position. During the process, the employee is welcomed to their new role, and provided tools and knowledge to be successfully assimilated into his or her position with a quicker ramp-up to productivity[1]. A structured onboarding process in post graduate training generally occurs before the start of residency[2]. Once residency is underway there is a wide variety of pre-rotation information that is passed on to the residents. There no published data on onboarding of anesthesia residents prior to the start of the obstetric anesthesia rotation. The obstetric anesthesia rotation offers a unique experience in that the team cares for both mother and fetus. It is not uncommon for a new resident to encounter a medically complex pregnant patient requiring an emergency cesarean delivery at the very start of their rotation. Due to the unpredictable nature of the labor and delivery unit, it requires preparation of the resident prior to beginning their obstetric anesthesia rotation. We developed an online obstetric anesthesia-based onboarding system available on https://rampages.us/obanes/[3].

Learner Objectives

1. Review of the importance of an onboarding system in post graduate training.
2. Understand the need for an improve obstetric anesthesia service onboarding system.
3. Discuss planned improvements and future direction for the obstetric anesthesia service onboarding process.

Ram Pages

Welcome to VCU's connected learning platform.

References

1.What Is Onboarding Exactly? PeopleAdmin. Website. http://www.peopleadmin.com/2013/01/what-is-onboarding-exactly/. Published January 2013. Accessed January 13, 2019.
2.Hébert, T et al. Onboarding for Pathology Residency Programs—The Montefiore Experience. DOI link: https://doi.org/10.1177/2374289516639979. Published August 2016. Accessed January 13, 2019.
3.Rampages. http://rampages.us

VCU Obstetric Anesthesia Service

VCU Obstetric Anesthesia Service

ABOUT

🔍 **High Risk Obstetric Folder**

GENERAL INFORMATION

RESIDENT INFORMATION ⌃

CHECKING IN: WELCOME TO THE OBSTETRIC ANESTHESIA ROTATION

Here you will find literature to assist with the management of high risk obstetric patients with maternal cardiac abnormalities and opioid use disorder.

VCU Obstetric Anesthesia Service

OB ANESTHESIA RESIDENT GUIDE

GOALS AND OBJECTIVES

CLINICAL ANESTHESIA 1 (CA1)

CLINICAL ANESTHESIA 2 & 3 (CA 2/3)

ROTATION DOCUMENTS

NRT AND MOCK ORAL SCHEDULE
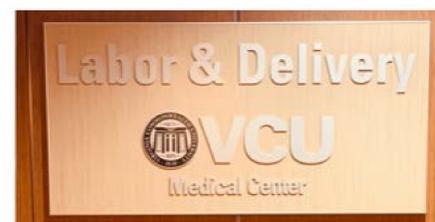
CHECKING OUT: END OF OBSTETRIC ANESTHESIA ROTATION

Resident Information

Here you will find various documents which will help walk you through what is expected/required during your month rotation on the obstetric anesthesia service. Enjoy!

Description of Innovative Practice

Secondary to multiple variables, whether scheduling, vacations, or other obligations, it has been difficult to secure a consistent pre-rotation orientation. Onboarding can standardize this process. We devised a means to create an online obstetric anesthesiology onboarding system using Virginia Commonwealth University's (VCU) online learning platform called Rampages. Rampages is a VCU product intended for academic purposes[3]. We converted all the emails and files into documents and uploaded the contents onto our customized website https://rampages.us/obanes/. The site is easily accessible from any mobile electronic device and/or desktop and currently require an invitation and secure login. The contents were categorized into 10 sections address with the focus on the resident information section (see images). The site is currently used by anesthesia trainees but can be expanded to others. Updates are simple and contents reflected in real time.

Results

Our website https://rampages.us/obanes was designed as an online onboarding system to allow anesthesia residents to feel prepared for patient care activities and didactics on the first day of the rotation. We aim to determine if an online onboarding system will improve anesthesia resident preparedness and decrease the need for emails and printed materials. Our preliminary findings indicate that switching from a printed to online site may have associated environmentally friendly and cost-effective benefits. The site offers a platform to post unlimited information. Residents will readily have access to all pertinent information. We are determining best data collection needed for future improvements. Our hope is to use our current site as a guide to development an online curriculum for resident training and plan to share the information with other subspecialties as this concept can be applied in many other areas of medicine.

Conclusion

The unpredictable nature of the labor and delivery unit requires preparation of anesthesia residents prior to the beginning of the obstetric anesthesia clinical rotation. An orientation to the obstetric anesthesia service allows the incoming anesthesia residents begin patient care duties on the first day of the rotation. To ensure that residents are ready for their new role of managing routine and high-risk obstetric patients, we provide the residents an opportunity to preview their clinical schedule, understand the goals and objectives of the obstetric anesthesia rotation, tour the clinical care unit, and resources to utilized throughout the duration of the rotation. Most of the communication occurred by email and printed formats that sometimes changed on a monthly basis. There were many challenges and disadvantages associated with distributing the information to the residents. There was no way to ensure that the residents all received an equivalent orientation. The new obstetric anesthesia service onboarding system allows consistency in the content shared. The information could be obtained and reviewed at the resident's leisure prior to the start of the rotation and no longer depend on emails or printed documents. It also minimizes the clinical time spent covering orientation material. We hope to improve our online website by including online lecture, videos, quizzes with self-assessments modules for education and training purposes.