






Responder Info	Responses	Attachment(s)*
<p>Quality, Safety & Patient/Family Experience Centre for Addiction and Mental Health T: 416.535.8501 ext. 30597 E: marika.bishop@camh.ca</p>	<p>2. Please refer to Appendix A for a list of mandatory clinical learning and the frequency of certification required, should such be organizationally required.</p> <p>3. We have governing authorities (Clinical Care Committee, Policy Subcommittee, Operations Committee, Medical Advisory Committee, Pharmacy & Therapeutics Committee) that make such decisions informed by program areas.</p>	
<p>Grace Sutherland  Almonte General Hospital/Fairview Manor Informatics Coordinator/Clinical Educator</p>	<p>I have attached my spreadsheet indicating our proposed changes to mandatory education.</p> <p>We are just in the process of signing up with a new LMS system</p>	 AGH_FVM_Educatio nSchedule.xlsx
<p>Kelly Verhoeve RN BScN Manager Professional Development Professional Practice Facilitator & Accreditation Coordinator Woodstock Hospital 519-421-4211 Ext 2481 kverhoeve@wgh.on.ca</p>	<p>Attached you will find our training record and organizational policy.</p> <p>The mandatory items are guided by best practices, accreditation standards, specialty specific requirements (AORN standards or NENA best practices etc.) and the educators/professional Practice along with the Clinical Directors set the requirements.</p> <p>Orientation pathways are completed on the unit with the mentor but the modules and additional hands-on education are done by my education team. The person responsible for orientation arranges presenters for the in class sessions (we added an extra week of orientation to our program each month to be able to accommodate physical distancing and numbers needed to onboard). The new hires are also launched LMS modules on the specific topics like CIWA and the orientation pathways are completed on the unit they were hired for and supported by their mentor. If a new hire is for a specialty area like Mat Child, CCU or ED They get the general Nursing orientation and additional unit specific education by the educator for those areas (usually a couple days) to cover specialty equipment and modalities only they use</p> <p>Each educator of the specialties is responsible for the oversight of changes or new materials for learning modules and global education modules (e.g. suicide prevention or behavior safety alert) are done by the entire team (everyone has input)</p> <p>All materials are reviewed every 3 years but if there are changes to practices based on new research etc then we update as needed so could be done every year. The staff development department is the oversight. We are the ones tracking completion. If staff don't complete learning within 60 days they are sent a warning (and their Director is copied) that they need to complete and if after that time they still haven't completed they are sent a warning letter that their name is going to be submitted to HR and they will become inactive (cant receive shifts) until complete.</p> <p>Other departments such as Occ Health or Infection Control submit requests for learning modules to be developed and provide us with content. We launch the LMS and track</p>	 Training Requirements & Res  Clinical Education and Training Recorc

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	<p>accordingly. We normally do what is called an amazing Race annual education fair that is mandatory for all staff to attend in person but this year had to do virtual so launched some new and improved LMS modules for global education</p>	
<p>Holly AI Professional Practice and Education Coordinator South Bruce Grey Health Centre 21 McGivern Street, PO Box 1300, Walkerton, ON N0G 2V0 T 519.370.2400 x2414 www.sbghc.on.ca</p>	<p>we too just implemented a new LMS platform across our 4 sites but will share what we have done so far and look forward to your summary. We recently implemented LearnDash.</p> <p>We are slowly getting clinical training in the system in and assigned as you will see in the screenshot attached. We have been utilizing the platform for major policy updates (creating a learning module), new equipment, and organizational initiatives.</p> <p>We have taken the stance that anything assigned in the LMS is mandatory/required training. Staff will receive email reminders when 2 weeks and 4 weeks have elapsed from the time of assignment and the course is not completed. When a user has not completed a module within 6 weeks this information is sent to the staff member’s Manager for follow-up. If the course remains incomplete the staff member risks being removed from their work schedule until they complete their training.</p> <p>The plan is that a summary of course completions will also be reviewed and used at performance appraisal time.</p>	
<p>Corinne Savignac, R.N., BScN, Nurse Clinician General Internal Medicine 705-523-7100 Extension 3315 Health Sciences North Horizon Santé-Nord 41 Ramsey Lake Road Sudbury, Ontario P3E 5J1 E-mail: csavignac@hsnsudbury.ca</p>	<p>We usually look at if something is an accreditation ROP or obviously a ministry of labour mandate than it is definitely considered mandatory. Medical directives of course are mandatory. Otherwise, we have a discussion amongst the nurse clinician group and decide what it is that we want to establish as mandatory.</p> <p>we don’t really have a magic list as everything is broken into categories.</p> <p>Any program can decide fi the want to make something mandatory for their department or a specific unit (this would be a discussion generally amongst the program team – director, managers and nurse clinicians) – there really is not hard and fast rule and as things change, so does the mandatory status change.</p>	
<p>Alainna Radcliffe Learning Management Systems Coordinator Organizational Development Brant Community Healthcare System Telephone: (519)-751-5544 ext. 4252 e-mail: alainna.radcliffe@bchsys.org</p>	<p>Completion is always tracked/recorded but “Mandatory” courses are always reviewed by the content expert and shared with executive who decide that it is “Mandatory”.</p> <p>2. a list/screen shot of your current list of mandatory clinical learning – see attached.</p> <p>3. who decides what is/is not “required” at the corporate level vs. departmental/program vs. within certain disciplines? – Again, content expert shares the e-learning module with management who then decides. Exec is also asked if needed.</p>	

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<p>Alexander Khan, BCAP™, RCC™ Manager, Talent Strategy (Recruitment & Organization Development) Human Resources M: 647-641-5816 T: 905-472-7580 E-mail: alkhan@msh.on.ca</p>	<p>Attached is the mandatory list of courses we require staff to complete on our Learning Management System. Content owners determine the audience and frequency of completion required for each eLearning module.</p>	<p> 2020 LIME Corporate eLearning</p>
<p>Ash Aylwin, CHE, MHS (Health Admin), RN CNCC(C) Professional Practice Leader, Nursing Department of Professional Practice, Education, & Risk Rm. 4927, Mackenzie Health, 10 Trench Street, Richmond Hill, ON L4C 4Z3 T: (905) 883-1212 ext. 7251 // Ash.Aylwin@MackenzieHealth.ca</p>	<p>At Mackenzie Health all staff attend: 1 Day Corporate Orientation 1-2 Days Epic EMR training, by role/specialty/program 1-3 Days Interprofessional Orientation Day 1 = All Care Adjacent Roles, Day 2= All RHCP, Day 3 = nurses</p> <p>See attached Mandatory learning.</p> <p>In the table below * = covered in Epic Training at hire, + = covered in IPO at hire</p>	

Course	Mackenzie	CAMH	Almonte	Woodstock	THP	Brant	Markham Stouffville
Accessibility AODA -IASR -Human rights code	Once	Annual	Annual		Annual Annual		Annual Annual Annual
Respectful workplace Code of Conduct	Once				Annual		Annual
AIDET			Annual				
Inclusion & Diversity	Once						
Codes/Emergency Preparedness	Annual	Annual	Annual	Annual red + green	Annual +CodeRed		Annual + Brown
Downtime		Annual					
PHI Security/Info Sec Privacy	Annual	Annual Annual			Annual		Annual x2 Annual
OHS / safety policies -Sharps -WHMIS -Slips/Trips/Falls -Back Care/ergo -Handbook/overview	Once Annual Once	Annual Annual	Once Annual Annual	Annual	Annual Annual Annual		Annual Annual Annual Annual
Workplace Violence -Personal Alarms	Once	Annual once	Annual	Annual	Annual		
IPAC Precautions Hand Hygiene	Once	Annual clinical/ Once other	Annual	Annual	Annual		Annual + Controls course for management
Advancing Safety Ed -Incident Reporting	Once				Annual	Once	
Environmental Aware					Annual		
Blood Administration	Biannual		Annual		Annual	Annual	
Medication Reconciliation	*		Annual				
Omnicell ADU	+	Once					
EMR	*					Once	

Order Entry	EMR training					Once	
Admission/Discharge	*					Once	
POCT (glucometers) / Cobas Academy	Annual		Annual				
Medication Workflows	*		Annual			Once	
-Med Safety				Annual			
-High alert meds			Annual			Annual	
TOA (+/- SBAR)	+		Annual	Annual		Once	
Pumps Course	Biannual		Annual				
STAND						Once	
IV/CVAD insertion	+					Once	
Patient ID (ROP)	+			Annual		Annual	
Pressure injury prev ⁿ	+			Annual			
Medical Directives	Once						
VTE Prevention	Once						

Corporate Orientation	1 day	2 days	Once				
Clinical Orientation	1-3 days	3 days		once			
N95 Mask Fit	Biannual	biannual		biannual			
Special Certifications: -TIDES/Crisis Interv. -Client Rights -Suicide Risk -BLS -Clinical Certificate (ACLS/Laser/CTAS) -Manager's Certificate -Risk Assessments	in-house	Biannual biannual biannual Once		Biannual not paid As needed Annual			