Training and Development Methods for SPHM Facility Coordinators (FC)
Marie M. Martin, Ph.D.
Timothy Buchanan, RN-BC, MSN, CSPHP
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The Problem:
How do you get someone new up to speed leading a SPHM program?
• Who else in the facility knows how to do the job?
• Who can evaluate and coach FC’s performance?
• How does the FC learn what is important and when?
• Who can help with problem solving and advice?
• Who can determine whether the FC is competent to train others?
• Is your mentor doing it right?

VA SPHM Facility Coordinator Training History
• 2008-2011 Rollout:
  • Funded national training for Facility Coordinators
  • Monthly national calls
  • Required Action Items, quarterly and annually
  • Initial resources and Facility Coordinator Guide on CD
• Ergonomics Guidebook, SPHM annex
  • Updated in 2015 to stand-alone SPHM Guidebook
  • Bariatric SPHM Guidebook added
  • Available at http://tampavaref.org/safe-patient-handling/implementation-tools.htm
VA SPHM Facility Coordinator
Training History
• Technical Advisory Groups: Special topics & projects
• Facility Coordinator Development Materials
  • Training needs assessment
  • Folders of resources for self-guided learning
• Coordinator training in person
  • VA-run conferences every ~2 years
  • Encouragement to attend outside training
• Network training plans
  • Unit Peer Leader/Supervisor training from traveling FCs
  • SPHM FC calls, collaboration, meetings, site visits

VA SPHM Common Difficulties
• Exit survey findings
• Questions in calls repeat:
  • How to do ergonomic assessments
  • How to purchase equipment/supplies
  • How to do Unit Peer Leader training
• Mentor tracking and quality control:

Recent Improvements
• Mentor relationship tracking and support
  • Mentoring TAG: milestone document, responsibilities, links
  • National and network responsibilities
• 1-day virtual classes multiple times per year
• National funding for network-coordinated UPL/FC training
• Scheduled, focused monthly training in new FC calls
• Solutions from directive:
  • Criteria for program
    • Minimum 1 FTE unless national program grants a waiver
    • FC must have sufficient training & experience
    • Network role in annual evaluation
SPHM FC Mentor Expectations

• Develop goals with mentee
• Regular consistent mentor/mentee meetings
• Quarterly evaluations for assessing efficacy of mentor/mentee partnership
• Length of relationship should be flexible/adaptable

SPHM FC 1-Year Expectation Checklist

• Used to establish pathway for building relationships, networking, and processes essential for SPHM role expansion and program development
### Ongoing Development for SPHM Facility Coordinators

- **Working groups**
  - Special projects
  - Training events
  - Document development

- **Mentoring and Teaching**
  - Unit Peer Leaders and Staff
  - Fellow Facility Coordinators
  - Local schools

- **Certification**

- **Leadership Groups**

### VISN 15 FC Best Practices

- VISN wide UPL and Manager training- CEUs, standardized curriculum using FCs and vendors as SME’s (VA Safety Office Grant)

- Site Assistance Visit (VISN funded) conducted in tandem by VISN SPHM POC-Assessing facility SPHM program compliance-SPHM Subcommittee monitors ongoing compliance and Action Plans

- Standardized Equipment Procurement at VISN Level-Bed BPA, Ceiling Lift Sole Source-Transitioning to BPA
VISN 15 FC GOVERNANCE STRUCTURE

• Reporting Structure-SPHM subcommittee reports up through VISN Patient Safety Committee-reports to VISN QPIB/Executive Leadership Team
• Conduct annual combined and break out face-to-face Strategic Planning Conferences for Patient Safety Managers and SPHM FCs networking (VISN supported/funded)

Examples from Other Places:

• Network Meeting Events
• Lead Mentor/Facility Coordinator traveling with Network Safety for site visits and program evaluation/mentorship
• Mentor relationships between similar sites that are far apart
• Onsite ergonomic evaluations co-led by mentor and mentee, for a large new site with very little preexisting program

How do you apply this in a smaller system?

• Mentor from another site, and visit each other
• Structured guidance with opportunity for feedback
• 2 key questions:
  • What don’t they know?
  • What’s important first?
• Learning needs assessment:
  • Personal: What’s the new person’s background?
  • Facility: New or preexisting program?
Finding Mentors and Relationships Outside Your Organization

• Local community / region
  - Health care systems
  - Schools
• Relationships with more experienced facilities
  - Professional organizations
• Inclusion of SPHM curriculum-i.e. Therapy, Nursing (articles, textbooks, higher education)

Let us hear from you!

What are you struggling with?

What have you done to orient new SPHM coordinators?

Resources:

• VHA Directive 1611, Safe Patient Handling and Mobility
• SPHM Implementation Tools via TAMPAVAREF
  - Safe Patient Handling and Mobility Guidebook
  - Bariatric Safe Patient Handling and Mobility Guidebook
• VA SPHM public web page (outdated directive link)