

3 Month Transition Program

UMC Employee transitioning to GN/RN

	3 rd Mor	nth Agenda	Mentor Initials
Orientation:			
Is your orientation complete? Are you carrying an independent assignment / load?			
Have you used any of the tools you learned in the GN residency program?			
Did you have your 90 – da			
Did you receive your TSA (Tax Sheltered Annuity) information in the mail from HR?			IR?
Explain the importance of	retirement plan	ning. (2% match)	
Graduate Nurse Adjustn	nent / Reality S	hock / EAP	
How is your stress level?	-		
Are you enjoying your role	•		
Do you feel like you are contributing to the team? Do you feel comfortable/confident?			ent?
		error? If so, how did you feel about it?	
What did you learn from the experience? Would you have done anything differently?			ly?
Do you know how to repor	rt a medication	error?	
Committee Involvement:			
Do you have any nursing topics in which you are passionate about? Assess for potential			ential
committee involvement. (4 Collaboratives available-EC, Pedi, M/S and Critical Care)			'are)
Have you been asked to participate in a committee? Is this a goal for you?			
What are some committee	s or projects tha	t you might enjoy participating?	
Unit Based Councils and	Shared Gover	nance:	
Are you aware of who is o	n your Unit Bas	sed Council (UBC) or who choses your U	JBC?
The Nursing Career Lad	der: {Policy Na	A 124.0 (RN) and 124.1 (LVN)}	
Have you started working	on it? (GN resid	lency program reviews it)	
You will need to have 12 months UMC tenure and you can reapply every 12 months.			hs.
The forms for the Nursing Career Ladder can be found on-line via the UMC intranet as			
well as the www.umchealt	hsystem.com w	ebsite	
Texas BON (Board of Nu	ırsing) <u>www.b</u>	on.texas.gov	
When do you renew? Do y	ou know how to	o renew or change your address/name?	
Free CNE's are available l	nere at UMC. 20	CNE's required with 2 nd renewal and	
Jurisprudence / Ethics and	Geriatric CE re	quirements also	
Are you familiar with the	Nursing Referer	nce Center?	
PROGRAM END EVAL	UATION: (<u>Re</u>	quirement to ensure confidentiality)	
The mentee will complete	the survey and	place in an envelope for the mentor to tu	rn into
Nurse Recruitment (the M	ENTEE must	SEAL the envelope & the MENTEE m	iust
SIGN the seal). Evaluation	ns are only acce	epted if mentee signed the seal.	
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Mentee Printed Name	Date	Mentor Printed Name	Date
Mentee Signature	Date	Mentor Signature	Date