

# Transforming Nurse Induction Training for Hospital-at-Home Service

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## Aim

This project aims to:

- Reduce induction training duration for Hospital-at-Home nurses from 3 months to 6 weeks.
- Achieve 100% pass rate by the end of the induction period, ensuring that nurses can function independently and safely.

## Background

The ageing population and the rapid expansion of the Hospital-at-Home (HaH) model of care presents a critical need for effective nurse training. In early 2024, Khoo Teck Puat Hospital experienced a severe bed shortage, necessitating a swift scaling up of HaH services. Despite recruiting new staff, upskilling nurses in home-based care remained challenging. Traditional induction processes take 3 - 6 months, with an approximate 10% dropout or failure rate among trainees, indicating a need for a more efficient and effective training solution.

## Team Members

Name	Designation	Department
Ong Shu Fen	NC / APN	APN & Specialty Nurses
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## Interventions / Implementation

### Key strategies

1. Develop a targeted 1-day foundational training workshop for HaH Nursing
2. Create an Entrustable Professional Activity (EPA) assessment tool tailored for the HaH setting.
3. Assign an Advance Practice Nurse (APN) for training leadership and support.

### Training Structure:

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|--|---|--|---|--|
| <ul style="list-style-type: none"> <li>• 1-day workshop by HaH APN <ul style="list-style-type: none"> <li>○ Succinct and specific approaches to common conditions in HaH</li> <li>○ History taking/ Physical Examination</li> <li>○ Includes case studies/simulation practice</li> </ul> </li> <li>• Trainer involvement from different specialties (urology, GS, renal etc.)</li> </ul> | ➔ | <p>On the job training with senior HaH nurses <b>6 to 8 weeks</b> (traditionally requires 3 to 6 months)</p> | ➔ | <p>Clinical assessments guided by EPA tool, developed specifically for HaH</p> |
|--|---|--|---|--|

## Onward 2026

By enhancing nurse training efficiency specifically for the HaH program, the project directly aligns with Strategic Priority 3 by supporting the successful expansion of acute care services at home.

The project demonstrated adaptability in training processes by shortening nurse induction from three months to six weeks. In so doing, it boosted onboarding efficiency and created an agile workforce to meet patient care demands. Advanced Practice Nurses provided strong support, ensuring staff well-being. A 100% assessment pass rate upheld quality and safety, while the scalable training model strengthened the hospital's resilience, preparing it for evolving patient needs and care models.

## Results & Outcomes

- 100% participants passed the EPA assessment
- Training durations shortened to 6 - 8 weeks



### Qualitative feedback from HaH nurses:

Foundational training workshop was key for learning.

"APN training to be done at beginning of probation" – N11

"An APN supports nurses clinical growth" – N10

Emphasized importance of APN's guidance in daily nursing work and in training.

"APNs provide better guidance to nurses on the ground in view of nursing background. Able to relate with ground nurses & directly/indirectly develop others" – N13

"Appreciate the training provided and having someone to check in when in doubt." – N6

Desire for ongoing support post-probation

"More involvement on the ground, reachable when we need clarification, discuss together during visit and get more insight from the medical perspective especially physical assessment." – N2

## Conclusion

- This project underscores the pivotal role of the APN in the HaH program, demonstrating their contributions not only in clinical settings but also in nursing education.
- Contextualized training strategies enhance the efficiency and effectiveness of the HaH training process.
- Subsequently, it is crucial to offer opportunities for continuous learning and development for HaH nurses, along with ongoing support in their daily responsibilities following the probation period.
- The implemented training strategies can be adapted for future needs, enhancing the hospital's operational resilience and responsiveness to changes in patient demographics or care models.