



After the Credentials - The Future of Technician Post- Graduate Education

Annika VanNoy, Ph.D.



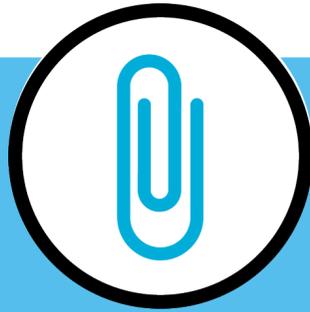
What's next?



After a rigorous technician credentialing program, what is next for your students?

How do we encourage them to continue to learn in a manner that suites them best and ensures that their new skills are rewarded financially?

The three pillars of learning success



Microlearning



Social Learning



**Skill
documentation**



Microlearning

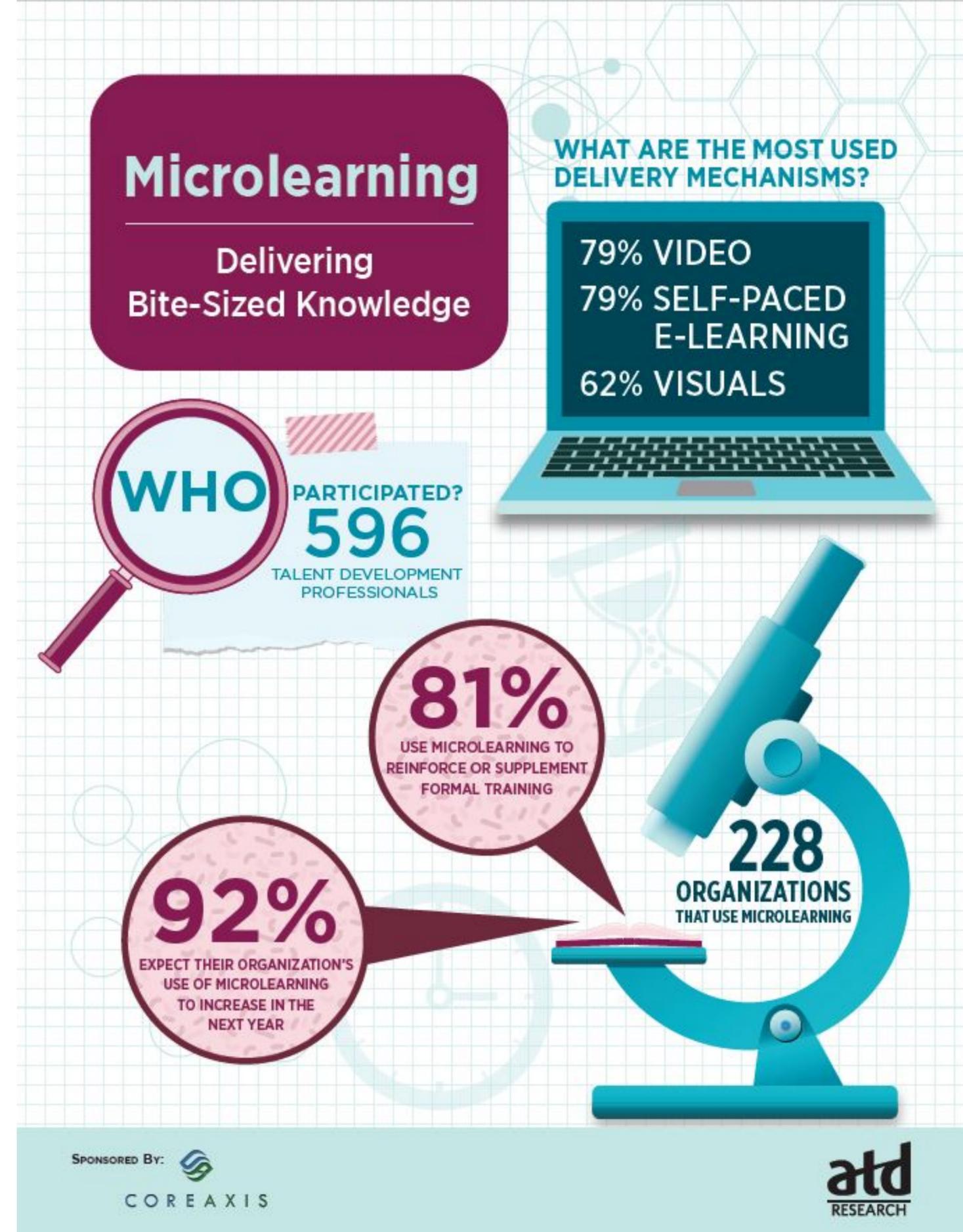


How to...

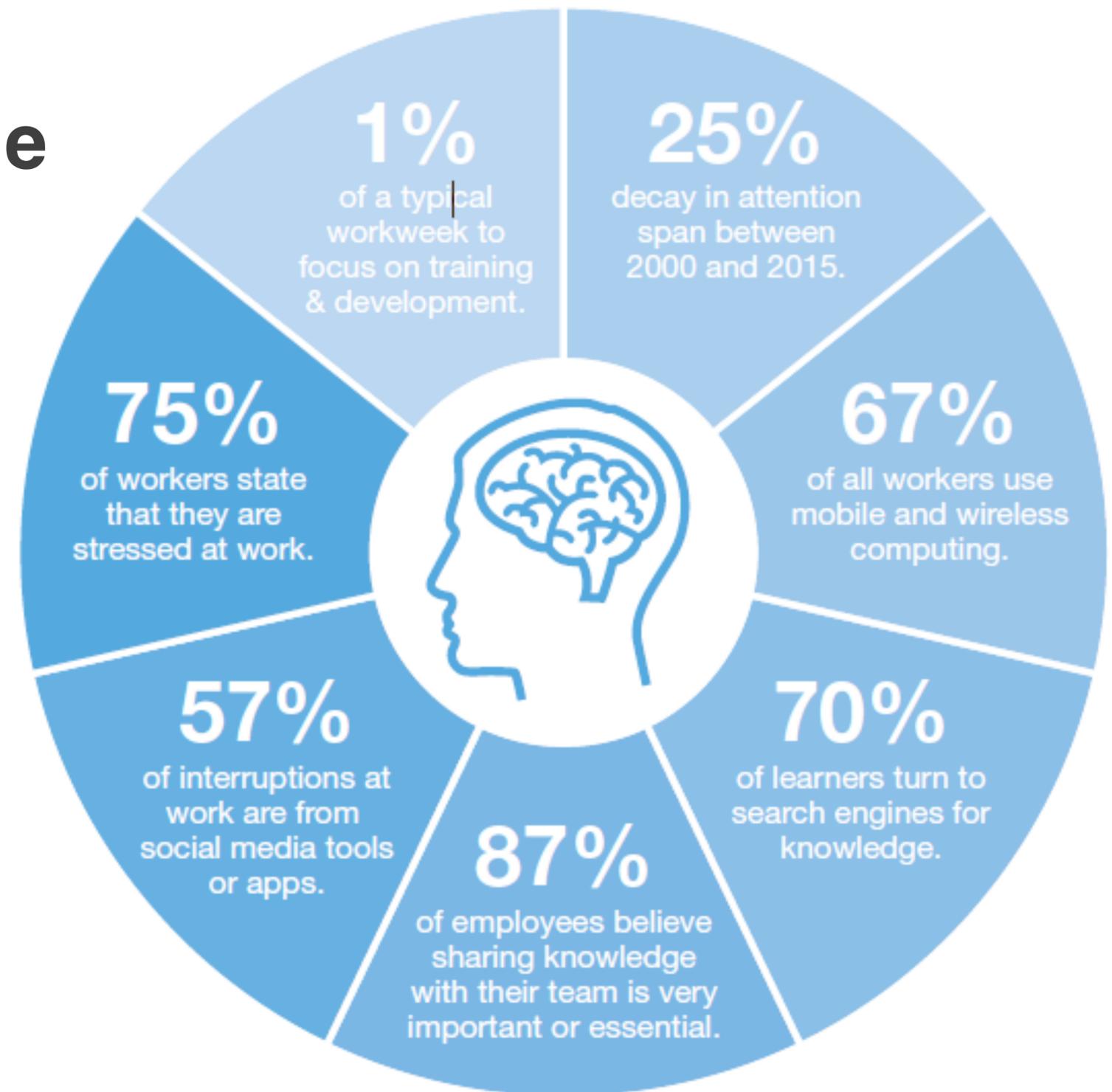
Make Banana Bread



Best practices in adult learning



Bersin's Modern Learner Profile





So...what is Microlearning?



Microlearning is a technique of delivering learning content in short, bite-sized bursts (from three to five minutes).

Neuroscientists have determined that we can only absorb four to five pieces of information into short-term memory at any given time, so by breaking it into short chunks, it's easier to understand and assimilate.

Source: Axonify



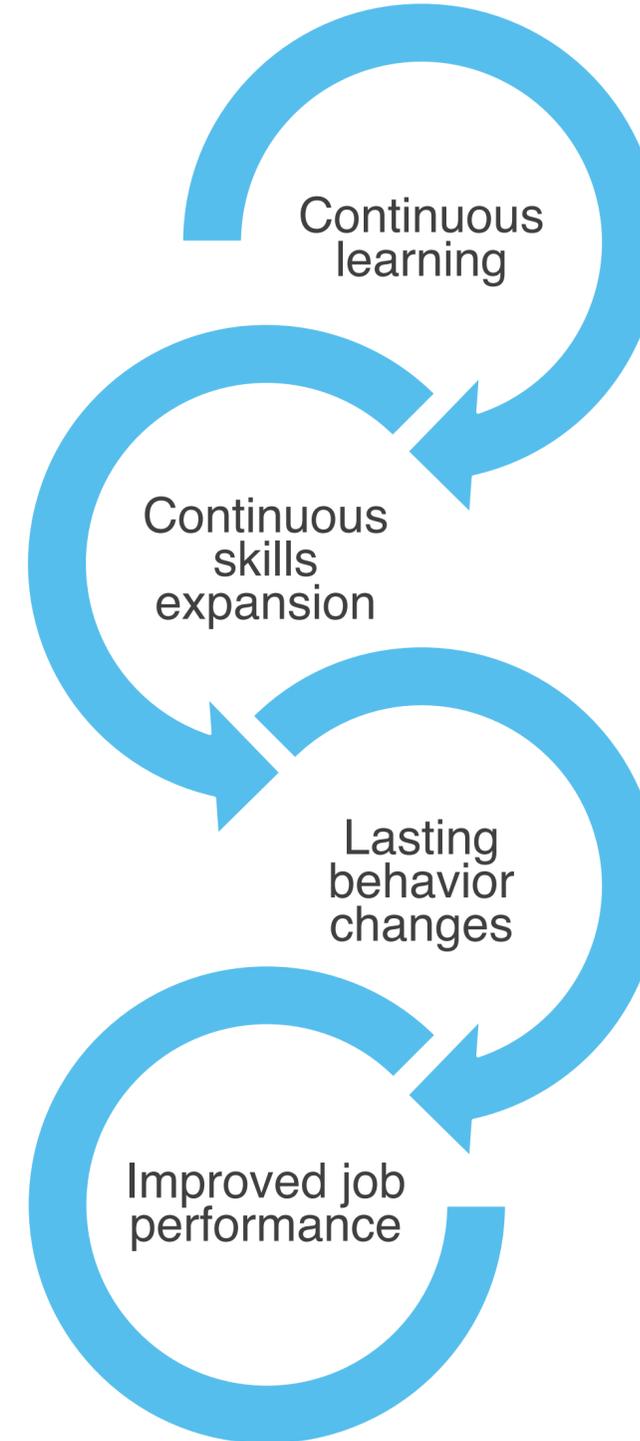
Microlearning Rules



- Provide personalized and adaptive learning experiences
- Offer gamification to engage employees in ongoing learning
- Include modern social elements for collaborative learning
- Be accessible from multiple devices, including mobile
- Allow employees to pull information when they need it

Learning at your fingertips!

Microlearning Effects



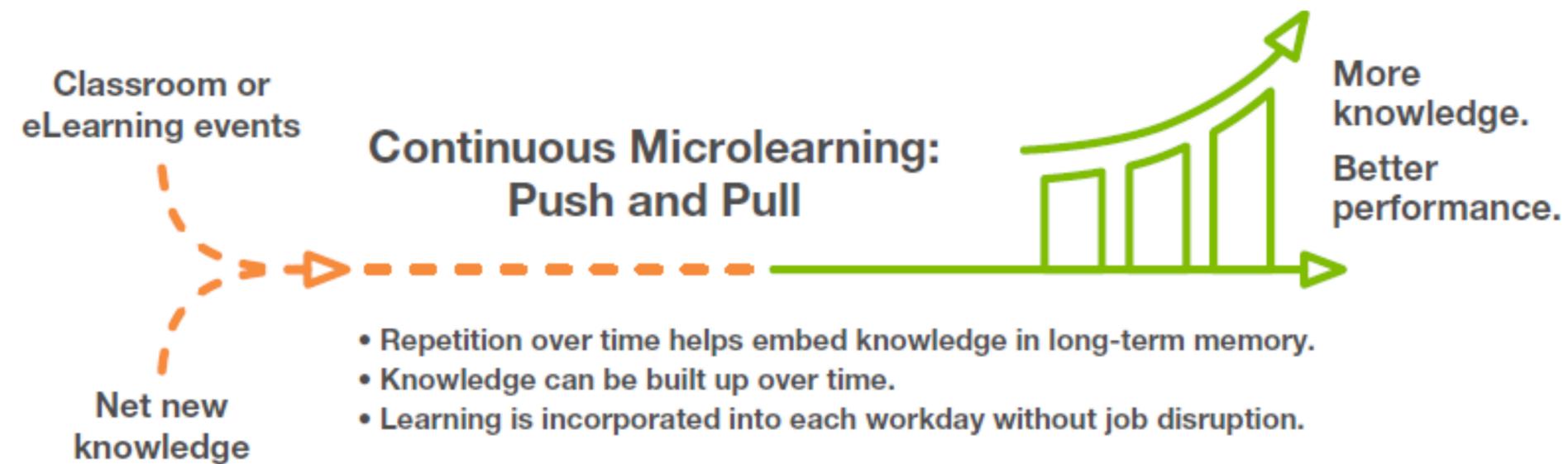


Why?



- 1) Meets the modern learners' needs
- 2) Caters to mobile environments
- 3) Less disruptive to busy schedules
- 4) Increased retention
- 5) Targeted at cognitive load capacities
- 6) Self-directed
- 7) Supports confidence-based learning

Microlearning Strategy

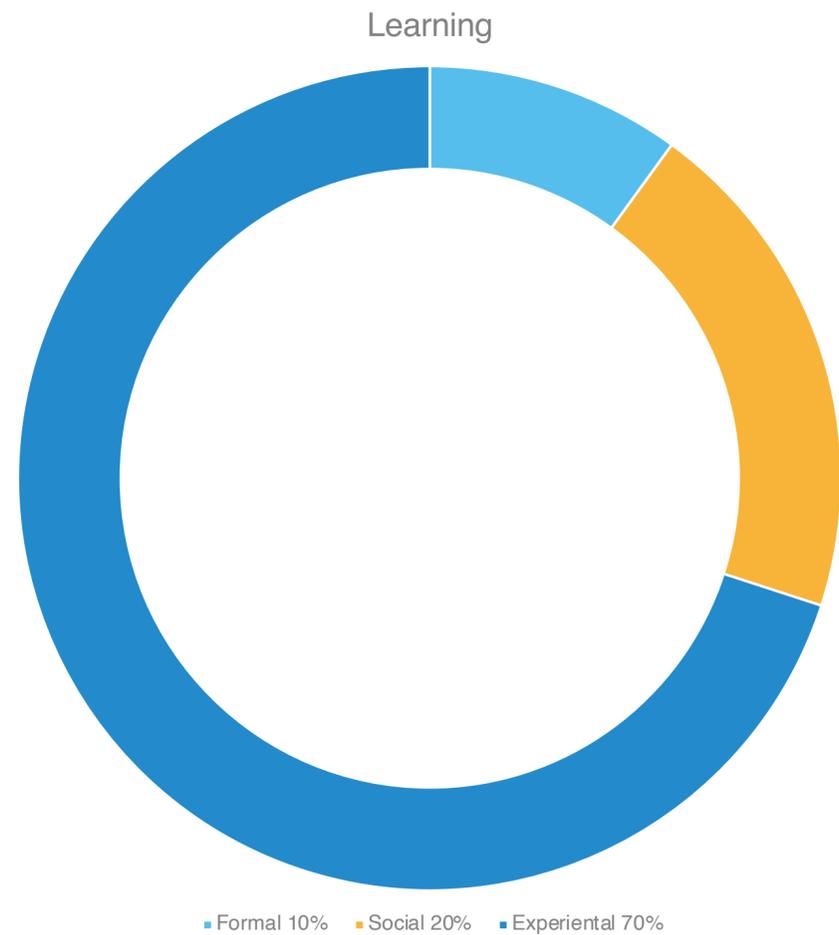




Social Learning



Learning Pillars



Formal

LMS
courses
classes

Social

Communities
Networks
Mentoring

Experiential

On the Job
experiences



Social Learning



Social Learning Theory (Albert Bandura), states that people learn from one each other, through observation, imitation, and modeling.

The theory is considered a bridge between behaviorist and cognitive **learning** theories because it encompasses attention, memory, and motivation.



Social Learning – why?



- **Quicker learning.** When employees are given the tools to rely on one another to get answers to day-to-day issues from day one on the job, they no longer have to wait for a scheduled training, which can occur at anytime. Because social learning is collaborative, happens in real-time, and has a direct relation to an employee's work, learning can happen anytime
- **Real time Q&A.** When a problem occurs in real time, an ideal scenario would provide an immediate answer. The ability to ask questions, follow examples, reproduce other's actions and test solutions, in real time, is extraordinarily valuable.
- With more screen time and less face time in their day-to-day lives, employees may be socialized to feel uncomfortable asking a direct, in-person question.



Social Learning – why?



- **Increased engagement.** When employees are able to take part of a discussion, at any level from a simple “like” of a comment to leading a discussion or even coaching others – the freedom to engage as they wish equals increased engagement.
- **Increased productivity.** Social learning provides for a network of mentors where information is easily created and distributed, where employees can become more informed, obtain more information and make better decisions through increased engagement with others.

Source: HospitalPortal

Social Learning

S **Samantha Beauchesne, DVM**
September 11 at 12:01 PM

Good afternoon! I have an 8 yr old, FS Pitt bull that has had chronic skin issues since March 2019. She was seen in March for a collarette on the medical thigh, no pustules and put on a topical spray at that time. In June 2019 she was seen again and the doctor noted erythema, peeling skin in both axillary and inguinal regions, as well as ventral base of tail and anus/perineum. She was placed on prednisone 15mg on a tapering dose and Cephalexin for 10 days. O returned in ... [See More](#)



2 Comments Seen by 185

Like Comment

Candace Sousa, DVM, DABVP, DACVD IMO it's time for a biopsy. I'm not surprised that after treating with a cephalosporin and fluoroquinolone that the Staphylococcus on the dog is now MRS. All Staph pyoderma is secondary to something and in this case, we don't know what it could be

David Liss, MS, RVT, VTS (ECC, SAIM), CVPM, PHR
September 24 at 8:33 AM · Add Topics

Here we go again! This time it's Trauma Tuesday!
5-year-old male neutered mixed breed dog presents for having been hit by a car. Upon presentation, you notice pale mucous membranes and a proptosed right eye. The other vitals are not surprisingly out of range, you notice increased respiratory rate and tachycardia..... [See More](#)

2 Comments Seen by 45

Like Comment

M **Morgan Osborn** Large Bore IVC (2 if able). Start O2. Check for further signs of head trauma +/- manitol. PAIN MEDS +/- Shock bolus warm IVF, depending on head trauma status. Radiographs of head, cervical, chest, plus any other areas that look damaged. Also talk to owner about CPR vs. DNR and be ready to role with crash cart.

Like · Reply · 2d

Laura Batoon Hypovolemic shock following a traumatic head injury. Size appropriate IV catheters. Check airway for blood or obstruction ...supply oxygen via mask or nasal canulas. Run CBC, Chemistry, pT/Ptt, Start a hyper-tonic saline and hetastarch fluid therapy ... [See More](#)

Like · Reply · 1d

Social Learning – we are in this together

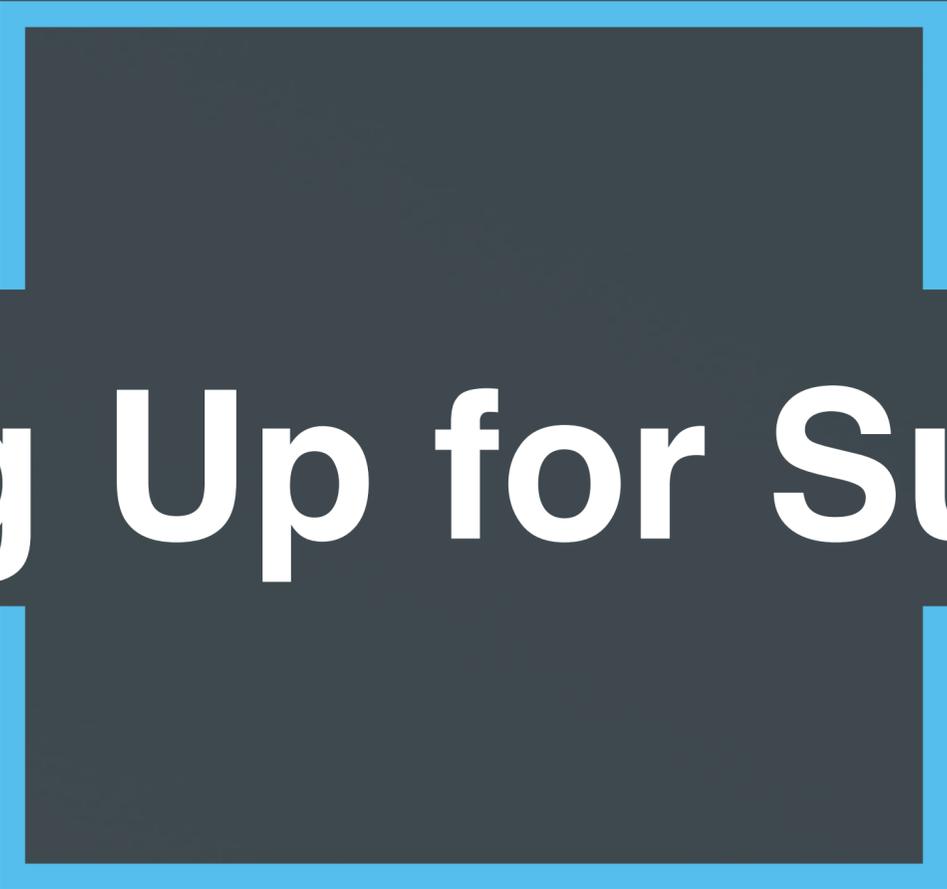




Skill documentation

Watch me do this!

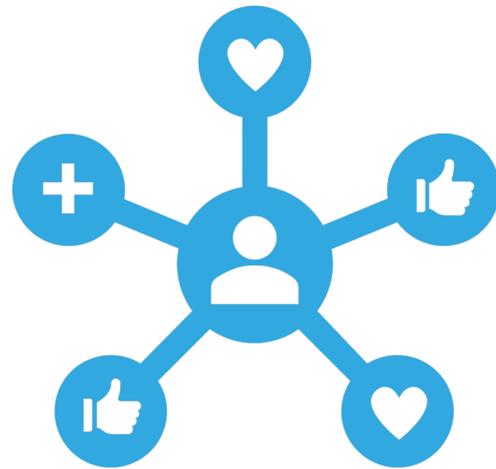




Setting Up for Success



Tools to Action





Tools to action

IGNITE VETERINARY SOLUTIONS

Technician Essential Skill: Blood Cross Match Checklist

Background:
Transfusion medicine demands that the veterinary technician administer type-specific blood products to recipients and ensure to the best of their ability that the transfusion will not elicit a reaction. One of the steps in this process is the blood crossmatch (BCM). This procedure involves actually mixing donor and recipient blood together to identify whether a reaction that may cause a reaction. Donor blood is mixed with recipient plasma, attempting to identify any antibodies in the recipient that may cause a reaction. Presence of agglutination or hemolysis indicate a positive crossmatch reaction and the product should not be transfused to that recipient.

Procedure:

- 1. Obtain EDTA blood from the recipient and a sample of blood from the donor.
- 2. Once blood has been obtained, place the donor and recipient samples into a small plain tube extending from the blood unit. Often donor blood is available attached to the unit you will be infusing in a plastic tube extending from the blood unit. Just clip off one of those tubes and empty.
- 3. Label each tube with a "D" for Donor and "R" for recipient and centrifuge.
- 4. Remove the plasma from the D and R tubes and place into a small plain tube.
- 5. Remove the plasma tubes for later use.

at aside the plasma tubes for later use.

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IGNITE

Study Guide

Peripheral IV Catheter Placement

Name _____ Date _____

Indications: Administration of medications, fluid therapy, and blood sample collection.

Contraindications: Shocked or painful in any or reduced skin, over or around vessels, on a surgery site, distal to a limb, or any other condition that may affect the catheter's function.

Key Considerations: Always observe the skin for signs of infection, hematoma, and phlebotomy dysfunction.

Catheter Selection:

- 20-gauge
- 22-gauge
- 24-gauge
- 26-gauge
- 28-gauge

Options:

- 18-gauge
- 20-gauge
- 22-gauge
- 24-gauge
- 26-gauge
- 28-gauge

Options:

- The largest appropriate size (gauge, diameter, or compressed patient's veins are often preferred).
- Length and entry site (distal or proximal).
- A catheter that is easy to handle (flexible length of the patient's limb, avoiding joint flexure points).
- A catheter that is easy to insert successfully on your first attempt.

Assessment

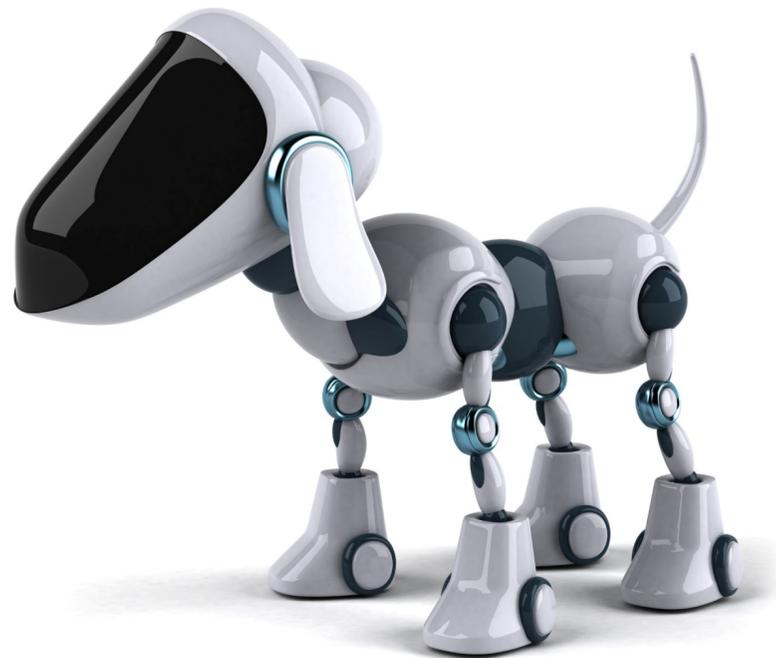
Peripheral IV Catheter Placement

Name _____ Date _____

Please answer the following questions:

1. Typically, how should you choose a point of insertion?
2. What indicates a successful entry into the vein?
3. Why is it important to hold onto and maintain the catheter's forward position upon vessel entry?
4. How should you ensure the catheter lumen is kept clean if the lumen lies outside the prepped area?
5. What should you document on the catheter bandage and in the patient record?
6. How often should catheters be assessed for patency and catheter site health?
7. What are signs indicating the catheter should be removed?
8. What catheter and IV line/connection maintenance issues should be watched for throughout the shift?

Opportunities



1. Job candidates present their validated skills lists at the time of interview
2. If working interviews are performed, technician or assistant demonstrates the requested skills from the list
3. Veterinarians and Practice Managers are confident of the abilities of the new hire and plan their shifts and pay accordingly
4. The practice continues to invest in the training of the new hire and other medical staff to fit the service mix of the particular hospital. Doctors allow their medical team to maximize their education and skills
5. Veterinarians are able to do more of the key duties that only they can do. They see higher revenue and more days of getting out on time
6. Doctors and medical staff have higher job satisfaction
7. Turnover of medical staff declines, and patient care and client delight goes up

Source: Dr. Jill Clark

Design Your Hospital Curriculum



NEW ACTIVITY ▾

 **Annika VanNoy, PhD** shared a post. 17 mins · Add Topics

Hi techs!

Please make sure to watch this video in preparation for our tech meeting!

<https://ignitevet.workplace.com/groups/209589746234588/permalink/734565>



53 Views

Kristi Fisher, CVT to Tech CE, Videos and Courses
February 17 at 4:20 PM

Canine Orthopedic Exam Restraint

 **Annika VanNoy, PhD**
1 hr · Add Topics

STAFF MEETING tomorrow!
Please make sure to be on time and ready to learn 😊

2 Comments · Seen by 2

Like · Comment

 **Gabrielle Braun** What time does it start?
Like · Reply · 9m

 **Annika VanNoy, PhD** 12pm!
Like · Reply · 1m

Write a reply...

Write a comment...

 **Annika VanNoy, PhD** shared a post. Just now · Add Topics

CSRs!

Here is the link to the CSR certification - let's try to get through module 1 by our next CSR meeting!

<https://ignitevet.workplace.com/groups/597430950612903/permalink/598640857158579/>

 **Abigail Harry** edited a doc. November 20, 2019 · certificate course, training



CSR Training Catalog

A Note Before You Start:

It's imperative that you sign into the course using the same email address that you use to log into IGNITE. Score 70% + on a course to print a certificate for your manager and track progress. Take the final exam to earn your certification.

[See More](#)



The 4 Pillars of **IGNITE**

01

MICROLEARNING

Short (<2 minute) videos

02

ROLE SPECIFIC SOCIAL LEARNING

Separate communities for
CSRs, Technicians, Doctors,
Managers, and Owners

03

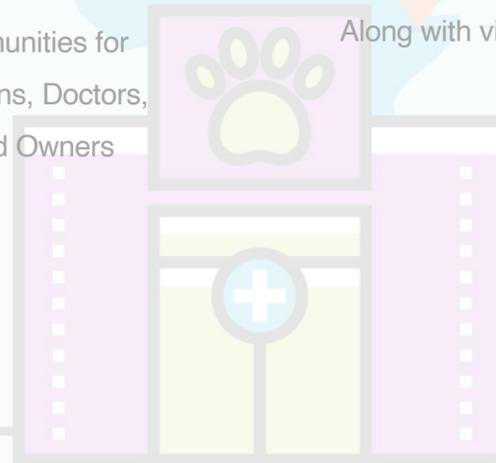
TRADITIONAL COURSES

Along with virtual boot camps

04

RESOURCES

Documents, forms, templates,
and checklists to keep you from
reinventing the wheel



Sources

- **Want to be a Great Leader? Add Microlearning – ATD 2018**
- **Applying Social Learning Theory using Intranet tools in a Hospital Workplace – HospitalPortal 2019**
- **What Is Social Learning? 6 Essential Elements Of A Successful Social Learning Strategy – Elearning Industry 2019**
- **Social Learning Theory (Albert Bandura) – InstructionalDesign.org 2018**
- **Microlearning: Small Bites, Big Impact. – Axonify 2017**
- **Can Skills Lists Save Our Veterinary Technicians and Assistants? – Jill Clark, DVM 2020**



THANK YOU



Annika VanNoy, PhD

ignitevet.com