



Perley Health's Implementation Guide Nurses Supporting Nurses

A Practical Guide to Building an
Orientation Peer Support Program



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Contact Information

This guide is available free for download on the Perley Health website at PerleyHealth.ca/orientation-peer-support-program.

For more information on this document, please consult the Centre of Excellence website at PerleyHealth.ca/centreofexcellence.

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Declaration Statement

The work outlined in this document details the development of an orientation peer support program as part of an enhanced nursing orientation at Perley Health and was done in partnership with the Registered Nurses Association of Ontario (RNAO) through Best Practice Spotlight Organization Canada.

This project was funded in part by the Nurse Innovators Award through the Registered Nurses Foundation of Ontario (RNFOO).



RNAO
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EXEMPLAIRES



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Assumptions and Scope

This field guide assumes readers have foundational knowledge in nursing education, leadership, and change management principles.

Users are encouraged to adapt this resource to align with their local context, policies, and workforce needs.

This project was informed by the Model for Improvement as described in Health Quality Ontario's Quality Improvement Guide and the Knowledge-to-Action Framework and Social Movement Action Framework outlined in the RNAO's Leading Change Toolkit. The project team also utilized nursing mentorship and adult learning principles as outlined in the literature.

See below for more details:

- Health Quality Ontario. (2012). *Quality Improvement Guide*:
<https://www.hqontario.ca/portals/0/documents/qi/qi-quality-improve-guide-2012-en.pdf>
- Registered Nurses Association of Ontario (2024). *Leading Change Toolkit*:
<https://rnao.ca/bpg/leading-change-toolkit>

Toolkit Resources

Throughout this guide, supplementary toolkit resources are referenced to support implementation of the Nursing Orientation Peer Support Program. These resources include practical tools, templates, and materials that can be used to support planning, implementation, and ongoing evaluation of the program. Many of them can also be adapted to meet the needs of individual homes.

Toolkit resources are highlighted in “Toolkit” sections of this guide, along with the appropriate links.

Toolkit resources can also be found at PerleyHealth.ca/orientation-peer-support-program.

Nurses Supporting Nurses

Letter from the Vice President of Nursing



It is with great pleasure that Perley Health announces the release of our implementation guide: ***Nurses Supporting Nurses: A Practical Guide to Building an Orientation Peer Support Program***. Your interest in this resource reflects a shared commitment to strengthening the nursing workforce in long-term care and creating supportive environments where nurses can thrive from the very beginning of their journey.

A strong orientation and peer support program can be transformative for nurses entering or transitioning within long-term care. The early experiences of new team members significantly influence confidence, competence, retention, and overall well-being. When nurses feel supported, connected, and equipped for success, the positive impact extends beyond the individual clinician to residents, families, teams, and the home as a whole.

There are many ways to build an effective orientation peer support program. Through this field guide, we aim to share insights from our quality improvement and evaluation journey to help others develop programs more efficiently and sustainably. Our experience highlights practical approaches that were tailored to address common challenges in long-term care, particularly those experienced by nurses at the point of care.

This field guide contains ideas, lessons learned, and practical resources developed throughout the implementation and evaluation of the program. Findings from the formal evaluation demonstrated meaningful improvements in areas such as nurse confidence, perceived support, engagement, and overall orientation experience. This document includes:

- Key components of an effective orientation peer support program
- Building an evaluation strategy and understanding program impact
- Practical tools, education resources, and templates to support implementation

We hope these resources provide valuable guidance as you build supportive learning environments that empower nurses and strengthen care delivery across long-term care settings.

A handwritten signature in black ink that reads "R. de Kemp".

Rachel de Kemp, RN, BScN, MHA
Vice-President, Nursing

Was this field guide useful?

Tell us what you think by scanning the QR Code.

You can always email us at centreofexcellence@perleyhealth.ca

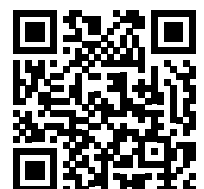


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Background

The current climate of long-term care (LTC) is adapting and changing. Residents are living longer with increasingly complex medical, cognitive, and behavioural needs, while many LTC homes continue to face staffing shortages, high staff turnover, limited resources, and ongoing pressures following the COVID-19 pandemic ^(1,2). At the same time, new nurses often enter LTC with limited preparation for the unique demands of the sector. From the beginning of their careers, LTC nurses are expected to manage complex clinical care, supervise interdisciplinary teams, respond to emergencies, and make important leadership decisions ^(2,3).

These challenges place significant pressure on the nursing workforce and contribute to burnout. Burnout is more than simply feeling tired, it is a state of physical and emotional exhaustion caused by prolonged workplace stress that can reduce job satisfaction, confidence, and professional effectiveness ⁽⁴⁾. In LTC, burnout affects not only the nurses but also the quality-of-care residents receive. Studies have shown that higher levels of nurse burnout are associated with poorer resident outcomes, lower quality of care, and increased resident safety concerns ^(2,5). Burnout can also contribute to higher staff turnover, more sick leave, increased reliance on agency staff, and greater financial pressures for LTC homes ⁽⁹⁾.

Additionally, nursing workforces in Canada are evolving, with International Educated Nurses (IENs) making up around 12% of the workforce in 2024 ⁽¹⁰⁾. While bringing a wealth of expertise and stability to Canadian healthcare sectors, including LTC, IENs are also facing their own unique experiences that contribute to turnover. On top of legislative contributors, such as confusing pathways to Canadian nursing credentials and access to safe housing and childcare, IENs have reported challenges related to adapting to Canadian standards of care, terminologies, evolving technologies, and protocols, ultimately threatening their retention ⁽¹¹⁾.

For leaders in LTC, supporting new nurses is essential for maintaining a stable workforce, promoting high-quality resident care, and building a positive workplace culture.

One promising approach is providing structured peer support as nurses navigate a new work environment and its culture. While traditional mentorship programs have been shown to improve confidence, reduce burnout, strengthen professional development, and improve retention among nurses ^(3, 6, 7, 8), not every home has the resources or need for a formal mentorship program. Orientation peer support programs build on many of the same mentorship principles by connecting new nurses with experienced colleagues who can provide practical guidance, encouragement, and support during the transition into LTC practice.

These relationships benefit everyone involved. New nurses gain confidence, practical knowledge, and a trusted source of support as they adapt to their new role ^(8,9). Experienced nurses develop leadership, coaching, and communication skills while helping strengthen the next generation of LTC professionals ⁽⁹⁾. IENs, specifically, have also reported that having more positive relationships with their colleagues would contribute to them remaining in the workplace ⁽¹¹⁾. Together, these relationships foster teamwork, improve workplace culture, support knowledge sharing, and contribute to stronger staff retention across the home ⁽⁹⁾.

Perley Health developed and formally evaluated a Nursing Orientation Peer Support Program (NOPSP) to support newly hired nurses during their transition into LTC practice. Drawing on both the evaluation findings and practical implementation experience, this field guide provides step-by-step recommendations to help LTC homes develop, adapt, and implement their own orientation peer support program. Rather than starting from scratch, leaders can use this guide to build a sustainable program that supports new nurses, strengthens the workforce, and ultimately improves resident care.



Self-Reflection

Consider a previous transition into a new role

Was the orientation sufficient to build confidence in the role?

Were there topics or information that were not included in the orientation, but should have been?

Who provided guidance and reassurance during the transition into the new role?

How might a dedicated peer support mentor have improved the experience?

Program Overview

What is a Nursing Orientation Peer Support Program (NOPSP)?

A Nursing Orientation Peer Support Program (NOPSP) is a structured onboarding and professional development initiative designed to support newly hired Registered Nurses (RNs) and Registered Practical Nurses (RPNs) as they transition into practice within the long-term care (LTC) environment. Recognizing the complexity of resident care and the unique challenges of the LTC sector, the program uses principles of peer mentorship to enhance confidence, competence, and integration into the clinical team.

The NOPSP is embedded within nursing orientation as a distinct phase in the onboarding process. Participation is expected for all new hires, with limited exceptions (see page 22). The program begins after new hires have completed their classroom orientation and nursing buddy shifts and have started working independently in their new roles.

The program spans six weeks, during which each new hire is paired with an experienced nurse, referred to as an Orientation Partner. Whenever possible, new hires are matched with Orientation Partners who work on the same unit and shift time, or in a nearby clinical area. Pairings are determined and overseen by the NOPSP Coordinator who facilitates introductions and check-ins throughout the program. The NOPSP Coordinator also offers support or re-pairings if there are any challenges that arise within the peer support partnership.

Throughout the six-week partnership, new hires and Orientation Partners are encouraged to connect at least weekly through in-person meetings, telephone calls, or email communication, depending on their preferences and needs. These conversations provide an opportunity to discuss learning needs, access the home's resources, navigate workplace culture, ask questions, and reflect on experiences during the transition to practice. This structured yet flexible approach allows support to be tailored to the specific but evolving needs of each newly hired nurse.

Orientation Partners commit to maintaining regular communication and providing both scheduled and responsive support throughout the partnership. They foster a safe, respectful, and inclusive learning environment where new hires feel comfortable seeking guidance, reflecting on practice, and discussing challenges.

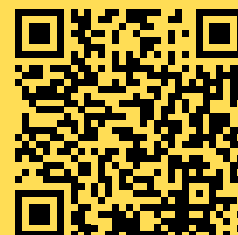
Through this peer-based approach, the NOPSP aims to strengthen the transition experience, encourage retention, and support the delivery of high-quality resident care.

Toolkit

Keeping it simple

To provide a quick overview of the Nursing Orientation Peer Support Program, Perley Health developed a one-page visual summary that highlights the key components of the program.

- For a downloadable version, please see **Toolkit Resource 1 - Nursing Orientation Peer Support Program Information Flyer** - PerleyHealth.ca/orientation-peer-support-program



How Much Does a NOPSP Cost?

The NOPSP described in this guide is designed to be cost neutral for the home.

This means it does not require additional funding nor new staff positions. Instead, it works by using roles and processes that already exist in a typical LTC setting.

The program was developed and tested at Perley Health and adjusted, over multiple iterations, to fit within typical LTC budget limits, scopes of practice, and lived realities of the sector. Because it builds on existing onboarding and staffing structures, it is designed to be sustainable over time without any added cost pressures.



Insight

**Grants helped build it.
Sustainability keeps it going.**

At Perley Health, two grants supported the pilot, evaluation, and refinement of the NOPSP.

However, the program was designed to be cost-neutral and embedded within existing roles and workflows, allowing it to continue beyond funded periods.

Toolkit

Looking for a grant, too?

At Perley Health, this program was supported through external funding that pilot, evaluate, and refine the NOPSP. Check out these wonderful organizations:

- Registered Nurses' Foundation of Ontario Nursing Innovator Grant:
<https://www.rnfoo.org/nursing-innovation>
- Registered Nurses' Association of Ontario Advanced Clinical Practice Fellowship:
<https://rnao.ca/bpg/get-involved/acpf>

Additional funding from the government of Ontario may also be available for LTC nurse mentorship programs:

- Ontario Centres for Learning, Research, and Innovation in Long-Term Care Nursing PLEDGE
<https://clri-ltc.ca/nursing-pledge>



Insight

Peer support Vs Mentorship support

While both involve support from an experienced colleague, peer support programs focus on onboarding, role transition, confidence, and integration into the team and culture of the home. Mentorship programs typically focus on longer-term professional development, career growth, and skill development.

Key Concepts

Nursing Orientation Peer Support Program (NOPSP): A structured program that pairs a newly hired nurse with an Orientation Partner during onboarding to provide peer support, guidance, and encouragement throughout the nurse's first six weeks of independent practice.

NOPSP Coordinator: The individual responsible for coordinating and overseeing the NOPSP. This role includes facilitating program processes, supporting participants, monitoring implementation, and promoting program sustainability. Ideally, the NOPSP Coordinator is someone already responsible for nursing orientation, onboarding, education, or workforce development within the home.

Orientation Partner: A direct point-of-care RPN or RN who is paired with a newly hired nurse to provide peer support, facilitate integration into the team and culture of the home, and promote a positive onboarding experience. Orientation Partners ideally have at least two years of nursing experience, mentorship training, strong interpersonal skills, and an interest in supporting others. They should also be comfortable with the home's policies, procedures, and care routines.

New hire: A RPN or RN newly hired into a direct point-of-care role within a LTC home, regardless of previous nursing experience.

Buddy shift: A training shift where a newly hired nurse works alongside a more experienced nurse to learn the home's routines, expectations, and workflows. They are independently assigned any residents or care duties.

Independent practice: The period following the completion of formal orientation and/or buddy shifts when a newly hired nurse assumes responsibility for their assigned residents and duties without a designated preceptor or buddy.

Peer support: Emotional, social, and practical support provided by a colleague with shared professional experience to promote confidence, learning, engagement, and successful role transition, while the new hire practices independently.

Unit: A designated resident care area that a nurse may be assigned. This may be called neighbourhood, resident area, or other terms in different LTC homes.

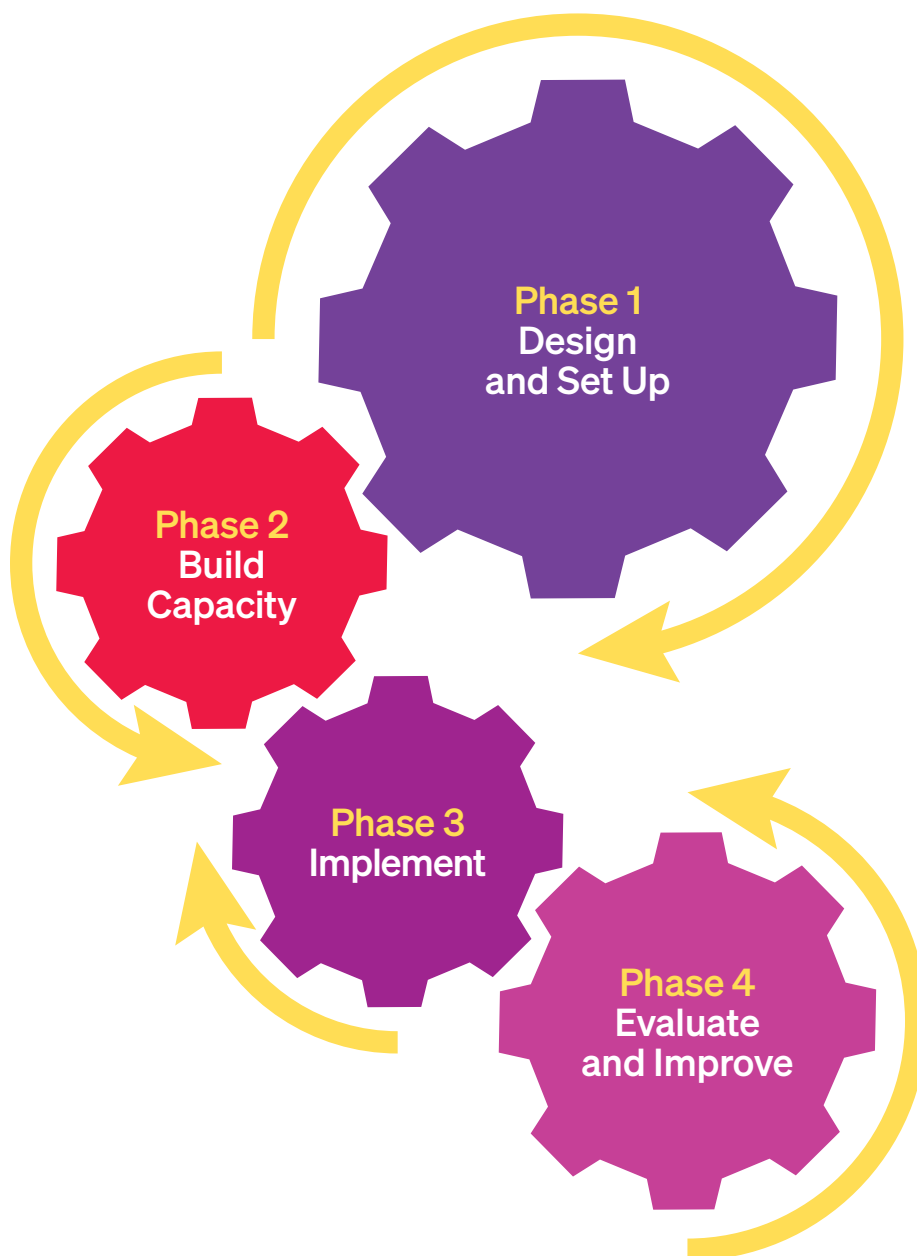
10 Practical Steps to Building an Effective NOPSP

The Four Phases of Development

Building an effective NOPSP involves four connected phases of development and implementation:

- **Design and Set-up**
- **Build Capacity**
- **Implement**
- **Evaluate and Improve**

The phases are interdependent, meaning each one supports and strengthens the others. As the program develops, earlier steps may need to be refined based on new learning.



Insight

To pilot or not to pilot?

The scale of implementation should match what is manageable for the home. At Perley Health, a small pilot with four peer support nurse partnerships served as a proof of concept, helping assess feasibility and user experience before committing to a full program.

Whether a home starts with a pilot, rolls out the program slowly, or moves directly into implementation will depend on the home's readiness, resources, and capacity.

There is no one-size-fits-all approach.

Insight

Rooted in real-world experience

Perley Health began building their NOPSP program in 2019, when practical models for nursing peer support or mentorship programs in LTC were not readily available.

These steps are rooted in the practical operations and lived experiences of nursing in LTC. The program is also formally evaluated and evidenced-informed.

The Ten Practical Steps

The following 10 practical steps provide a path from idea to implementation and are organized within the four phases of development.



Design and Setup

1. Validate the home's value of a NOPSP
2. Assign a NOPSP Coordinator
3. Define structure and workflow
4. Clarify roles and expectations
5. Develop tracking tools

Build Capacity

6. Select and support Orientation Partners
7. Prepare participants for the NOPSP



Implement

8. Pair new hires with Orientation Partners
9. Troubleshoot common challenges

Evaluate and Improve

10. Adapt to feedback



The Ten Practical Steps: At a Glance

For clinical leaders implementing the NOPSP in their home, a comprehensive implementation checklist was developed to outline the steps and track progress. This is a high-level checklist. More details can be found in the following sections.

Phase	Practical Step	Implementation Checklist
 Design & Setup	1 Validate the Home's Value of a NOPSP	☐ Identify the need. Position the NOPSP as a solution to specific challenges within the home, such as onboarding, communication, teamwork, or retention. ☐ Align with existing priorities. Connect the NOPSP with the home's goals, initiatives, and strategies to build support and visibility.
	2 Assign a NOPSP Coordinator	☐ Appoint a NOPSP Coordinator. Select a coordinator with strong connections to orientation and new hires. ☐ Build on existing roles. Whenever possible, integrate the NOPSP coordination into existing workflows and responsibilities. ☐ Provide protected, flexible time. Ensure the coordinator(s) has dedicated time that can adapt to changing program needs. ☐ Share coordination responsibilities. If required, distribute tasks between multiple team members to strengthen sustainability, continuity, and knowledge retention.
	3 Define Structure and Workflow	☐ Define and maintain program scope. Establish clear boundaries to ensure the NOPSP remains focused, realistic, aligned with union requirements, and sustainable within available resources. ☐ Embed the NOPSP into existing orientation processes. Identify where the program fits within current onboarding activities and workflows. ☐ Map the NOPSP workflow. Define the key steps of a clear and repeatable process. Include the tasks needed to maintain the program over time.

<div>2</div> <div>Build Capacity</div>	<div>4</div> <div>Clarify Roles and Expectations</div>	<div> ☐ Define clear roles, expectations, and program boundaries for all participants. Reduce confusion, prevent role overlap, and promote consistent implementation. </div> <div> ☐ Ensure all participants, including the NOPSP Coordinator, have a shared understanding of their roles and responsibilities. Provide a one-pager outline to reference throughout the partnership. </div>
	<div>5</div> <div>Develop Tracking Tools</div>	<div> ☐ Centralize program tracking. Maintain the Orientation Partner pool and partnership tracker in one location to support organization and coordination. </div> <div> ☐ Track key milestones. Record important dates, partnership status, and follow-up activities to support timely check-ins. </div>
	<div>6</div> <div>Select and Support Orientation Partners</div>	<div> ☐ Develop a sustainable Orientation Partner pool. Build a diverse group across units and shifts through proactive recruitment, leadership support, and clear communication about the role's purpose and expectations. </div> <div> ☐ Select Orientation Partners intentionally. Choose individuals based on experience, interpersonal skills, team credibility, and a genuine commitment to supporting others. </div> <div> ☐ Support ongoing engagement and recognition. Maintain participation through regular communication, appreciation, feedback, and sharing the impact of the role. </div>
	<div>7</div> <div>Prepare Participants for the NOPSP</div>	<div> ☐ Provide intentional, scalable training and communication. Equip Orientation Partners with training and new hires with clear program information. </div>

3

Implement

8 Pair New Hires with Orientation Partners

- ☐ **Pair Orientation Partners thoughtfully.**
Consider scheduling, work location, shift alignment, availability, and overall fit to support a successful six-week partnership.
- ☐ **Use standardized email templates.**
Support consistency and simplify administration with ready-to-use communication tools.
- ☐ **Provide coordinator support throughout the partnership.**
Guide the relationship through introductions, check-ins, and closing communication.

9 Troubleshoot Common Challenges

- ☐ **Communicate proactively to address potential challenges early.**
Regular check-ins help identify and resolve issues before they escalate.
- ☐ **Plan for program sustainability.**
Shared oversight and clear processes support continuity during periods of change.

10 Adapt to Feedback

- ☐ **Administer ongoing evaluation.**
Take an opportunity to seek feedback on participants experience in the program.
- ☐ **Take actions to improve the program.**
Based on the feedback received from the evaluation, make changes to improve the experience for newly hired nurses and Orientation Partners.

4

Evaluate & Improve

Toolkit

Ready, set, implement!

- For a downloadable version, please see;
Toolkit Resource 2 - Nursing Orientation Peer Support Program Ten Practical Steps: At a Glance - PerleyHealth.ca/orientation-peer-support-program



Phase 1: Design and Set-up

1. Validate the Home's Value of a NOPSP

One of the first practical steps in building a NOPSP is validating its value within the home. Two considerations are particularly important:

1. Understanding the home's specific challenges or needs that a NOPSP could help address.
2. Aligning the NOPSP with existing priorities, initiatives, or strategic goals within the home.

By identifying a genuine need within the home and aligning the NOPSP with larger, established initiatives, the program will gain greater visibility and support across multiple organizational levels within the home. This increases access to resources, strengthens buy-in from key interest holders, and helps to protect the project from implementation delays, loss of momentum, and potential derailment.

Understand the Home's Specific Challenges and Needs

Before implementing a NOPSP, it is important to clearly identify the existing gaps, challenges, and priorities within the home and assess whether a NOPSP is well positioned to address them.

Perley Health identified the following challenges within the home that contributed to the decision to build a NOPSP:

- New hire turnover, particularly when poor teamwork, lack of support, or difficulty integrating into the team are identified as contributing factors
- Inconsistent comfort levels in asking questions and uncertainty about when to seek clarification, resulting in variable access to guidance and support for new hires
- Challenges integrating new hires into established teams that are influenced by differing worldviews, generational perspectives, professional backgrounds, and levels of LTC experience
- Retention challenges related to perceived poor fit, limited workplace connection, or team dynamics
- Increased interpersonal conflict and difficulty navigating workplace conversations among nursing staff
- Communication challenges between staff and residents/families
- Self-identified development needs by the nursing team in areas such as communication, conflict management, giving and receiving feedback, and mentorship
- Disruptions to staffing stability, onboarding, and training processes resulting from events such as the COVID-19 pandemic and broader workforce pressures

While these challenges may not be present in every home, identifying which issues a NOPSP is intended to address can help build a stronger case for implementation, guide program design decisions, and support buy-in across the home.

Toolkit

Start by listening

The best way to understand the needs of new nurses is to ask them directly. Perley Health gathered feedback from newly hired RNs and RPNs to better understand the challenges, supports, and resources that influenced their onboarding experiences and identify opportunities to enhance support for newly hired nurses within the home.

- For a downloadable version, please see **Toolkit Resource 3 – Nursing Orientation Peer Support Program Pre-Implementation Questionnaire** - PerleyHealth.ca/orientation-peer-support-program



Aligning the NOPSP with Existing Priorities, Initiatives, or Strategic Goals within the Home

Rather than positioning the NOPSP as a standalone project, alignment with current priorities helps build credibility, strengthen buy-in from senior leadership, and increase the likelihood of sustained implementation.

Start by scanning the home for existing initiatives that align with the goals of a NOPSP and engage with initiative leads to explore opportunities for integration or collaboration. Pitch how a NOPSP can also strengthen these existing projects. Ideally, these initiatives will already have approved resources and support across the home.

Common areas of alignment in LTC may include:

- Strategic priorities
- Quality Improvement Plans (QIPs)
- Operational plans
- Management rounding and leadership visibility programs
- Staff retention and human resources strategies
- Clinical education and orientation program development
- Psychological health and safety initiatives
- Recent or planned restructuring within the home
- “People-first” or workforce engagement strategies
- Accreditation committees and standards work
- Best Practice Spotlight Organization (BPSO) designation activities (<https://rnao.ca/bpg/bpsa>)
- Special grants or funded nursing projects occurring outside direct care settings



Insight

It doesn't all happen at once

At Perley Health, strategic alignment for the NOPSP developed gradually over a six-year period. In practice, success may begin with identifying just one strong point of alignment within the home and building from there.

As the long-term care sector and the home's priorities evolve, this step is not static. Homes may need to revisit and refine alignment over time to maintain relevance, support, and momentum for the program.

Case Study

Building on what exists

At Perley Health, the development of the NOPSP was strengthened through the following strategic alignment with several initiatives within the home, which helped generate momentum and secure leadership support:

1. Best Practice Spotlight Organization (BPSO) initiative

As a designated BPSO, Perley Health was implementing the RNAO Leading and Sustaining Nursing Leadership Best Practice Guideline. The NOPSP aligned with the leadership goals of this initiative.

2. Advanced Clinical Practice Fellowship

Perley Health routinely supported annual applications for an Advanced Clinical Practice Fellowship through the Registered Nurses Association of Ontario, funding an RNs protected time to work on an improvement project. This was leveraged to give dedicated resources to the NOPSP development.

3. Post-pandemic staffing and retention strategy

At the time of the NOPSP consideration, Perley Health was actively engaged in operational and quality improvement efforts focused on strengthening staffing stability following the COVID-19 pandemic. The NOPSP aligned with the staffing and retention goals of this initiative.

4. Organizational growth

During a period of organizational growth within the Clinical Education and Perley Health Centre of Excellence teams, the NOPSP project team expanded.

5. Grant funding to evaluate and scale the program

Following implementation, the NOPSP team secured external grant funding to support formal evaluation and to scale the program.

Implementation Checklist for Practical Step 1

☐ Identify the need.

Position the NOPSP as a solution to specific challenges within the home, such as onboarding, communication, teamwork, or retention.

☐ Align with existing priorities.

Connect the NOPSP with the home's goals, initiatives, and strategies to build support and visibility.



2. Assign a NOPSP Coordinator

The NOPSP Coordinator is responsible for coordinating the day-to-day tasks and overseeing the participants of the program.

Dedicated and protected time for this role is critical to the success and sustainability of the program. The NOPSP Coordinator is responsible for a range of activities, including:

- Recruiting and maintaining a pool of Orientation Partners
- Meeting with new hires before pairing
- Assessing compatibility between new hires and Orientation Partners
- Training participants for the partnership experience
- Pairing new hires with Orientation Partners
- Monitoring partnerships throughout the six-week program
- Facilitating participant connection through regular check-ins
- Troubleshooting challenges or conflicts that arise
- Documenting partnership progress
- Confirming partnership completion
- Recognizing and celebrating participant achievements
- Collecting feedback and evaluation data to support ongoing improvement

When planning protected time for the NOPSP Coordinator, keep it flexible rather than assigning fixed blocks of time. Responsibilities vary based on recruitment, onboarding, and the number of active partnerships, often requiring ongoing coordination, communication, and follow-up across different shifts and schedules. Flexible protected time allows the NOPSP Coordinator to respond more effectively to these changing demands.

When determining who should serve as the NOPSP Coordinator, consider those in existing roles whose workflows naturally align with these responsibilities. They should also have direct access to the employees' schedules.

Additionally, whenever possible, distribute coordination responsibilities across more than one person. Sharing tasks such as follow-up, evaluations, and program oversight improves continuity, reduces reliance on a single coordinator, and helps preserve program knowledge during staffing or broader organizational changes within the home.

At Perley Health, for example, coordination responsibilities were shared across three team members. While the Clinical Educator led the program, the other team members supported follow-up, evaluations, and coverage during absences, strengthening program continuity and sustainability.



Insight

Finding the right fit

At Perley Health, the Clinical Educator role was a strong fit for the NOPSP because this individual:

- Already connected regularly with new hires during corporate and nursing orientation
- Oversaw other components of the orientation process
- Provided clinical support to new hires at the point of care
- Had established relationships with nursing staff who could serve as Orientation Partners
- Had flexible enough daily workflows to meet coordination demands of the NOPSP

How much time does it take?

At Perley Health, it is estimated about 1-2 hours/week was spent on NOPSP Coordinator activities per week with a volume of about 3 new hires a month. This varied depending on the volume of new hires in any given month.

Implementation Checklist for Practical Step 2

☐ **Appoint a NOPSP Coordinator.**

Select a coordinator with strong connections to orientation and new hires.

☐ **Build on existing roles.**

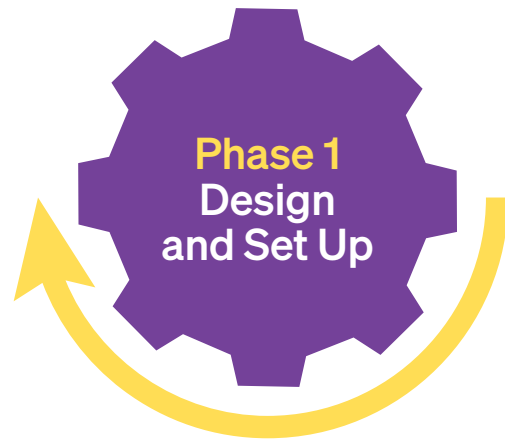
Whenever possible, integrate the NOPSP coordination into existing workflows and responsibilities.

☐ **Provide protected, flexible time.**

Ensure the coordinator(s) has dedicated time that can adapt to changing program needs.

☐ **Share coordination responsibilities.**

If required, distribute tasks between multiple team members to strengthen sustainability, continuity, and knowledge retention.



3. Define Structure and Workflow

Establish the Scope of the Program

The NOPSP is grounded in mentorship principles, but mentorship programs can vary significantly in size, structure, and purpose. Clearly defining the scope of the program early in the planning process helps establish realistic boundaries, maintain consistency, and ensure the program remains aligned with set goals. A well-defined scope can also prevent the program from becoming overly complex or difficult to sustain over time.

Several factors may influence the scope and design of the program, including:

- Available resources (e.g., staffing, time)
- Physical environment and unit layout
- Shift schedules and staffing models
- Collective agreement requirements and union definitions of mentorship
- The home's priorities and culture
- Interest holder needs, preferences, and capacity
- Desired program outcomes and objectives

The scope of the NOPSP should reflect what is achievable and sustainable within the unique context of the home. It should be informed by the needs, capacity, and expectations of those involved. Clearly defining the program's boundaries helps ensure it remains practical, focused, and sustainable over time. Once established, these parameters can guide the development of program processes and procedures.

Real World Example

Refining the scope of the NOPSP

At Perley Health, the scope of the NOPSP evolved based on feedback from new hires and Orientation Partners. Early versions included a clinical skill mentorship component; however, feedback highlighted the need to focus peer support on transition, connection, and navigating the transition into the home rather than clinical skill development.

Early Program Scope	Refined Program Scope
Clinical mentorship focused on new hires developing formal learning plans and achieving clinical skill goals with the Orientation Partner.	Peer support focused on transition to practice, team integration, and navigating the home's processes and resources.
Challenge: <ul style="list-style-type: none">• New hires felt overwhelmed by learning plan development while adapting to a new role.• Orientation Partners found clinical skill development time-intensive and overlapped with Perley Health's Clinical Educator responsibilities.• Limited funding was available to meet premium payment requirements for formal nursing mentorship, as per the union collective agreements.	Outcome: <ul style="list-style-type: none">• No requirement for newly hired nurses to document a formal learning plan. Encouraged to discuss learning needs with the NOPSP Coordinator.• The scope of the Orientation Partner was redefined not to include any clinical demonstrations or teaching.• Scope of Orientation Partner aligned with nursing regular rates of pay, making the NOPSP program more sustainable.

Establish Processes and Procedures

To establish a fully functional NOPSP, homes should clearly define the program's processes, procedures, and operational workflow. This includes determining how the program will function in practice and how it will be integrated into existing orientation and onboarding activities. Because the home's organizational structures, resources, and workflows vary, the design of the program will differ from one home to another.

Mapping the process collaboratively with key interest holders using methods such as process mapping can help ensure the program is practical, sustainable, and aligned with the home's needs (See Figure 1 next page).

The NOPSP works well when embedded into an existing nursing orientation and onboarding process as a mandatory component of orientation. Integrating the NOPSP into orientation helps reinforce participation, accountability, and sustainability.

While the program should be presented as a standard part of onboarding, some new hires may benefit more from having the option to participate rather than being required to do so.

Consider offering participation as optional for:

- Casual employees whose schedules may not support a consistent peer partnership.
- Current employees transitioning into an RN or RPN role who are already familiar with the home's environment, routines and culture.
- Former nursing students with placement experience in the home who have already been oriented to the environment and team.

The NOPSP Coordinator can remain available as a resource and point of contact as needed for these employees.

An example of how Perley Health embedded the NOPSP into their established monthly nursing orientation cycle is depicted in Figure 1. Homes should adapt the structure, timelines, and workflows to align with their own orientation processes, staffing models, and available resources.

Nursing Orientation at Perley Health

(Occurring once a month)

Mandatory Online Learning (1 Day)

The new hire's first day of employment is completed remotely through self-directed online learning. During this time, all new employees, regardless of role, complete mandatory education modules aligned with legislative requirements, regulatory expectations, and the home's policies through the learning management system.



In-Person Nursing Orientation (3 Days)

Following online learning, the new hire participates in three days of onsite orientation facilitated by a Clinical Educator and various subject matter experts from the home. This phase uses a blended learning approach that incorporates didactic teaching, experiential learning, collaborative activities, and simulation-based skills training. Preparatory information is shared about the NOPSP with new hires at this time.



Nursing Buddy Shifts (3–5 Days)

Sometimes known as shadow shifts, this phase provides unit-specific orientation. The new hire is buddied with an experienced nurse and observes and participates in the daily workflow of the unit. An Orientation Checklist is used to guide learning and document completion of key orientation activities and experiences.



Nursing Orientation Peer Support Program (6 Weeks)

The NOPSP begins when the new hire starts working independently on the unit following completion of buddy shifts. For six calendar weeks, the new hire is paired with an Orientation Partner who serves as a dedicated point of contact for guidance, resource navigation, emotional support, and socialization into the home's culture. The partnership is supported and monitored by the NOPSP Coordinator.



Corporate New Hire Welcome Day (1 Day)

Approximately one to two months after starting employment, all new hires attend an in-person welcome event alongside employees from across the home. This session focuses on the home's culture, mission, vision, values, and strategic priorities and is delivered using a blended learning approach.

Figure 1. Flowchart of how the NOPSP was integrated into the nursing orientation schedule at Perley Health.

Once it is determined where the NOPSP fits within the broader orientation framework, homes can establish the operational processes that will guide how the program functions in practice, including how participants are identified, matched, supported, and monitored over time.

As an example, on the next page is Perley Health's high-level procedural steps for NOPSP operation. In addition to these operational activities, ongoing oversight, monitoring, and quality improvement processes are required to support program sustainability and effectiveness.

Perley Health Example

NOPSP Procedure at Perley Health

1. The NOPSP Coordinator Becomes Acquainted with the New Hire

During the in-person nursing orientation, the NOPSP Coordinator gathers key information about each new hire's role, learning needs, and transition experience to support a meaningful Orientation Partner match.

2. The NOPSP Coordinator Prepares the New Hire for Program Participation

During the in-person nursing orientation, the NOPSP Coordinator introduces the program, explains its purpose and expectations, and clarifies how peer support will help the new hire transition into practice.

3. The NOPSP Coordinator Selects an Orientation Partner

Prior to the new hire starting independent practice, the NOPSP Coordinator reviews the available Orientation Partner pool and identifies the most appropriate match for the new hire.

Factors considered may include:

- Unit assignment or physical proximity of work location
- Compatibility of personalities and communication styles
- Alignment between the Orientation Partner's strengths and the new hire's learning needs
- Availability of the Orientation Partner, including any planned leaves or vacations

Once selected, the Orientation Partner is contacted and informed of the upcoming partnership.

4. The Partnership Is Formalized

On the new hire's first day of independent practice, the NOPSP Coordinator formally initiates the partnership. An introductory email is sent to the new hire and copied to the Orientation Partner, expectations of program participants.

5. The NOPSP Coordinator Tracks Program Participation

The NOPSP Coordinator maintains documentation of all active partnerships and monitors progress throughout the six-week program period. Tracking records may include partnership start and end dates, communication milestones, and any concerns requiring follow-up.



Insight

Keep it collaborative

At Perley Health, the NOPSP design was shaped through input from interprofessional team members such as point-of-care nurses, new hires, managers, directors, clinical educators, subject matter experts, human resource teams, unions, and research teams.

Including the home's labour relations specialist helps prevent unintended collective agreement violations and ensures accurate use of terminology.



6. The Orientation Partner and New Hire Establish Contact

The Orientation Partner and new hire connect using a communication method that works best for them, such as in-person conversations, email, or telephone. The frequency, length, and format of interactions are intentionally flexible and self-directed, allowing the partnership to adapt to individual needs and schedules. The recommended length of time of weekly meetings will vary by home. At Perley Health, meetings were routinely under 30 minutes.

7. The NOPSP Coordinator Conducts a Two-Week Check-In

At the two-week mark, the NOPSP Coordinator checks in separately with both the new hire and Orientation Partner, to assess the partnership and gather feedback. If concerns arise, the NOPSP Coordinator provides support by clarifying expectations, coaching participants, or adjusting the match if needed.

8. The Program Is Formally Concluded

The partnership concludes six weeks after the new hire begins independent practice. The NOPSP Coordinator sends separate communications to both participants to acknowledge completion of the program, thank them for their participation, and invite any final feedback.



Insight

Subtle nuances matter

Perley Health learned several key nuances when implementing the NOPSP in LTC:

- Given the inherent role and power differences between RNs and RPNs in LTC, pairing RNs with RNs and RPNs with RPNs creates more balanced, effective, and meaningful peer support relationships.
- Clear, consistent framing of the program as both mandatory and beneficial improves engagement—even when participants initially feel they “don’t need it.”
- New hires and Orientation Partners are scheduled as regular shifts (no special HRIS coding or booking); connection happens within normal workflow.
- Separate check-ins with each participant create psychological safety to raise concerns or discuss challenges.
- Clearly communicate new partnerships to essential team members across the home, as required. For example, at Perley Health, Managers of Resident Care are informed of the partnership.

Program Maintenance Activities

In addition to the day-to-day tasks of coordinating active partnerships, NOPSPs also require ongoing program maintenance activities to ensure long-term sustainability. Many of these activities can be assigned to the NOPSP Coordinator.

1. Maintain the Orientation Partner Pool

The Orientation Partner roster should be reviewed regularly to:

- Confirm participants remain employed and available
- Identify role, unit, or scheduling changes that may affect future pairings
- Assess whether the pool size is sufficient to meet onboarding demands

2. Recruit Additional Orientation Partners as Needed

When the available pool becomes limited, additional Orientation Partners should be recruited to ensure adequate capacity. Participation in the Orientation Partner role is voluntary.

3. Prepare Orientation Partners for Success

New Orientation Partners should receive education regarding the purpose of the program, expectations of the role, available resources, and strategies for supporting new hires during their transition.

4. Recognize and Celebrate Orientation Partner Contributions

Homes should formally recognize the contributions of Orientation Partners and celebrate their commitment to supporting colleagues. Recognition activities may include certificates, appreciation events, professional development opportunities, or informal acknowledgments from leadership.

Implementation Checklist for Practical Step 3

☐ Define and maintain program scope.

Establish clear boundaries to ensure the NOPSP remains focused, realistic, aligned with union requirements, and sustainable within available resources.

☐ Embed the NOPSP into existing orientation processes.

Identify where the program fits within current onboarding activities and workflows.

☐ Map the NOPSP workflow.

Define the key steps of a clear and repeatable process. Include the tasks needed to maintain the program over time.



4. Clarify Roles and Expectations

Strong, supportive relationships require clear roles, shared expectations, and well-defined boundaries. Clearly communicating this to NOPSP participants helps reduce confusion, prevent role overlap, and minimize frustration or unintended overstepping within the partnership. Without this clarity, the effectiveness of the relationship can be compromised, potentially leading to new hires feeling unsupported or disconnected, and Orientation Partners feeling less confident or willing to participate.

An effective NOPSP clearly outlines the expectations and responsibilities of both the newly hired nurse and the Orientation Partner, ensuring a shared understanding of how each contributes to a successful orientation experience. It is also important that both parties understand the role of the NOPSP Coordinator, who provides guidance and support to strengthen the partnership and address challenges if they arise.

An example of the roles and expectations of NOPSP participants, as defined at Perley Health, is outlined below. This will differ depending on how the program is implemented within the individual home.

New Hire – Expectations of Participation

- Participation in the NOPSP is expected as part of the orientation process. Please see page 22 for limited exceptions.

New Hire – Roles and Responsibilities

New hires are expected to:

- Check-in once a week with the assigned Orientation Partner in person, by phone, or by email.
- Engage actively in peer support conversations and activities.
- Ask questions, seek clarification, and use the Orientation Partner as a resource during their transition.
- Be open to feedback, reflection, and learning from both successes and challenges.
- Communicate needs, challenges, or barriers that may impact their transition.
- Demonstrate professionalism, respect, and person-centred care in all interactions.
- Identify concerns early and connect with the NOPSP Coordinator when additional support is required.

Orientation Partner – Expectations of Participation

- Participation in the NOPSP is a voluntary but structured commitment during the orientation period.

Orientation Partner – Roles and Responsibilities

Orientation Partners are expected to:

- Check in once a week with the new hire in person, by phone, or by email.
- Provide encouragement, guidance, and support within the scope of the role (see below).
- Create a safe and welcoming environment where questions and conversations are encouraged.
- Share knowledge about Perley Health's environment, resources, and workplace culture.
- Identify concerns early and connect with the NOPSP Coordinator when additional support is required.

NOPSP Coordinator Support

- Accountable for the program maintenance activities
- Provides guidance and clarification on program roles, expectations, and processes.
- Supports troubleshooting of challenges within the orientation partnership.
- Connects participants to additional resources, supports, and subject matter experts, when needed.
- Helps ensure consistent and effective implementation of the program across the home.
- Ensure Manager of Resident Care is aware of current partnerships

For more details on the role and duties of the NOPSP Coordinator, please see practical step 2 on page 19.

Scope of the Orientation Partner

To avoid burn out and conflict, it is also important to clarify what support is appropriate for an Orientation Partner to provide for a new hire. See Table 1 for a summary.

Within the Scope of an Orientation Partner	Outside the Scope of an Orientation Partner
<ul style="list-style-type: none">• Answer questions• Guide the new hire to policies, procedures, and other resources• Share personal experiences of onboarding• Discuss concerns, offer advice, and support new hire in problem solving• Promote confidence and encourage new hire• Provide constructive feedback	<ul style="list-style-type: none">• Demonstrate clinical skills• Offer informal buddy, or shadow, shifts• Complete tasks for the new hire• Develop and monitor a performance improvement plan• Offer peer support outside of scheduled work hours

Table 1. Summary of the scope of an Orientation Partner when providing support to a new hire

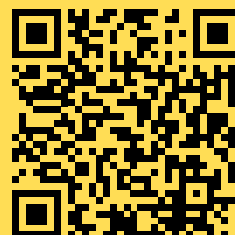
If the new hire demonstrates a higher need for support outside the scope of an Orientation Partner, the new hire should connect with the NOPSP Coordinator for guidance.

Toolkit

Establishing role clarity

It is helpful to provide both new hires and Orientation Partners with information outlining role clarity, expectations, and program boundaries to reference throughout the partnership.

- For a downloadable version, please see **Toolkit Resource 4 – Nursing Orientation Peer Support Program Overview: Outlining Roles, Expectations, and Scope** - [PerleyHealth.ca/orientation-peer-support-program](https://perleyhealth.ca/orientation-peer-support-program)



Implementation Checklist for Practical Step 4

- ☐ **Define clear roles, expectations, and program boundaries for all participants.**

Reduce confusion, prevent role overlap, and promote consistent implementation.

- ☐ **Ensure all participants, including the NOPSP Coordinator, have a shared understanding of their roles and responsibilities.**

Provide a one-pager outline to reference throughout the partnership.



5. Develop Tracking Tools

To effectively coordinate the NOPSP, it is important to maintain accurate and organized tracking of both available Orientation Partners and active partnerships. As multiple partnerships may be running simultaneously, with each at a different stage of the six-week program, a centralized tracking tool helps the NOPSP Coordinator monitor progress, anticipate upcoming tasks, and ensure timely follow-up.

It is recommended that the Orientation Partner pool and active partnership tracking be maintained within the same document. This allows the NOPSP Coordinator to quickly identify available Orientation Partners when new hires are onboarded and simplifies overall program management. It also facilitates clear communication if the NOPSP Coordinator roles are shared between team members.

Tracking does not need to involve a complex spreadsheet. Rather, the goal is to have all key information captured in a format that is visible, accessible, and easy to update. An organized tracking system will make maintaining partnerships, scheduling check-ins, and monitoring program completion significantly more manageable.

New hires should be added to the NOPSP tracking tools and matched with an Orientation Partner before their first independent shift so that all program details are prepared in advance and the partnership can begin seamlessly.

Helpful Orientation Partner Pool Tracking Categories

- **Name:** Orientation Partner's full name.
- **Designation:** Professional designation (e.g., RN, RPN).
- **Unit:** Primary unit where the Orientation Partner works.
- **Shift:** Typical shift worked (days, evenings, nights, or rotating).
- **Employment Status:** Full-time or part-time
- **Orientation Partner Start Date:** Date the individual joined the Orientation Partner pool to help track experience within the program.
- **Training Received:** The type and date of Orientation Partner training completed (e.g., full four-hour training or just-in-time training).
- **Preferences:** Preferred units, designations to mentor, scheduling considerations, or any other matching preferences.
- **Contact:** Preferred method of contact, such as email or phone number, to support timely communication and partnership coordination.
- **Notes:** Any additional information relevant to future partnership assignments, such as periods of leave, availability, or special considerations.

Helpful NOPSP Partnership Tracking Categories

- **New Hire:** Full name of the new hire.
- **Designation:** Professional designation of the new hire (e.g., RN, RPN).
- **Unit:** Assigned work unit.
- **Shift:** Typical shift worked (days, evenings, nights, or rotating).
- **Employment Status:** Full-time or part-time
- **Contact:** Preferred method of contact, such as email or phone number, to support timely communication and partnership coordination.
- **Assigned Orientation Partner:** Name of the matched Orientation Partner.
- **First Independent Shift:** Date of the new hire's first independent shift.
- **Official Program Start Date:** This date is marked by when the NOPSP Coordinator official sends the pairing email to both the Orientation Partner and new hire. This is often the same as the first independent shift

but may differ if the partnership begins later. Comparing the first independent shift date and the official program start date will offer insight to the NOPSP Coordinator about how efficiently the program is running (e.g. delayed pairing resulting in a new hire being without an Orientation Partner for their first few days).

- **Anticipated Two-Week Check-in Date:** Scheduled date for a two-week check in. Recording this date serves as a reminder to add it to the NOPSP Coordinator's calendar.
- **Actual Two-Week Check-in Date:** Date the check-in was completed, which may differ from the anticipated date. Comparing the anticipated two-week check in and the actual two-week check-in will offer insight to the NOPSP Coordinator about how efficiently the program is running.
- **Program End Date:** Expected completion date based on the six-week partnership timeline.
- **Conclusion Email Sent Date:** Date the program formally concluded by email.
- **Evaluation Sent Date:** Date the program evaluation was distributed to both participants. Record the reminder emails, if applicable.
- **Comments:** Capture any additional information related to the current partnership, including noteworthy updates, troubleshooting, changes in participation, or changes in the status of either the new hire or the Orientation Partner (e.g., new hire resigns, Orientation Partner becomes unavailable, partnership is reassigned, or program timeline is adjusted).

Implementation Checklist for Practical Step 5

☐ Centralize program tracking.

Maintain the Orientation Partner pool and partnership tracker in one location to support organization and coordination.

☐ Track key milestones.

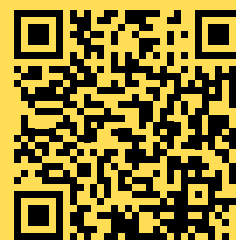
Record important dates, partnership status, and follow-up activities to support timely check-ins.

Toolkit

Ready-to-use tracking tool

Save time with Perley Health's editable NOPSP tracking template. This spreadsheet tracks the Orientation Partner pool and program partnerships.

- For a downloadable version, please see **Toolkit Resource 5 – Nursing Orientation Peer Support Program Tracking Spreadsheet** - [PerleyHealth.ca/orientation-peer-support-program](https://perleyhealth.ca/orientation-peer-support-program)



Tip

Keep It Secure, Keep It Accessible

Store tracking tools securely to protect sensitive information while ensuring they remain accessible to designated team members. This balance supports both information security and program continuity if the NOPSP Coordinator is unavailable.

Phase 2: Build Capacity

6. Select and Support Orientation Partners

The success of a NOPSP depends on the quality and commitment of its Orientation Partners. These experienced nurses volunteer their time to share their knowledge, provide guidance, and support new hires as they transition into their roles. In doing so, they embody a nurses supporting nurses' philosophy that not only enhances the orientation experience but also strengthens teamwork, belonging, and a culture of support across the home.

Because Orientation Partners have a significant influence on a new hire's experience, careful attention should be given to selecting the right individuals, developing a strong pool of Orientation Partners, and fostering their ongoing engagement and sense of purpose. This is particularly important in volunteer-based NOPSP models, such as Perley Health's, where Orientation Partners are not financially compensated for participating but choose to champion the program because they recognize its value.

Selecting the Right Orientation Partners

Identify nurses who consistently demonstrate strong communication skills, professionalism, and a genuine commitment to supporting and guiding others in practice. These individuals often already play an informal leadership role within the team and are naturally looked to by colleagues for guidance and support.

Ideally, Orientation Partners should:

1. Have nursing experience in LTC and within the home.
2. Hold a regular full-time or part-time position.
3. Demonstrate strong interpersonal skills and a genuine interest in mentoring and supporting colleagues.
4. Be seen as a trusted colleague within the nursing team.
5. Volunteer for the Orientation Partner role.
6. Be available to provide consistent support throughout the NOPSP period, with no planned long-term leaves.

Tip

Use these criteria as a guide

These characteristics reflect what Perley Health has found to be most successful—not strict rules. Use judgment when selecting Orientation Partners.

For example, a nurse with fewer years of experience but exceptional enthusiasm, strong organizational knowledge of the home, and a passion for supporting others may be an excellent fit.

Likewise, during periods of high recruitment, the NOPSP Coordinator may need to prioritize program sustainability by selecting capable nurses who don't meet every criterion.



Insight

Recommendations matter

At Perley Health, the most successful Orientation Partners were often identified through recommendations from Managers of Resident Care, Clinical Educators, and recent new hires.

When inviting a nurse to the role, let them know they were recommended by colleagues. Being recognized for their supportive approach reinforces that their strengths have been noticed and valued, making the invitation more meaningful.

Finding Potential Orientation Partners

The following 10 practical steps provide a path from idea to implementation and are organized within the four phases of development.

Identifying nurses who are well suited to the Orientation Partner role requires a strong understanding of the nursing team, unit culture, and staff strengths. Consider using the following strategies:

1. Seek recommendations from nursing managers, clinical educators, nursing supervisors, quality improvement leads, and professional practice leaders.
2. Ask recent new hires about their onboarding experience and which nurses helped them feel welcomed, supported, and confident in their role.
3. Observe nurses in practice, paying attention to how they interact with colleagues, support learners, and lead buddy shifts.
4. Look for nurses who consistently champion quality improvement and practice change, as they often demonstrate leadership and a commitment to professional growth.
5. Invite volunteers by promoting the role and encouraging interested nurses to self-nominate or express their interest.

Developing a Pool of Orientation Partners

Build and sustain a diverse group of Orientation Partners to ensure flexibility, continuity, and effective matching with new hires.

When developing the pool, include nurses from a variety of units and shifts. For example, while it may be easier to recruit primarily day shift nurses, this can create challenges when new hires are scheduled for evenings or nights.

The size of the Orientation Partner pool should also be intentional, taking into account the typical number of new hires over a given onboarding period (e.g., six weeks) and the overall size of the nursing team, to ensure adequate coverage and support across all shifts.

Tip

Determining the Size of the Orientation Partner Pool

At Perley Health (450 beds, 13 units, 180 employed nurses), the Orientation Partner pool was set at around 25. This provided strong coverage across shifts and units while remaining a manageable group of engaged volunteers during typical recruitment periods.

Pool size should remain flexible: a smaller group (e.g., 10) was insufficient during higher recruitment periods, while 20 was more than adequate, almost too much, during lower-volume periods.

Because the Orientation Partner role is voluntary, recruitment may take time. However, a strong pool is typically built from nurses who are engaged and motivated by the purpose of supporting new team members. A champion model can be used to position Orientation Partners as leaders in onboarding, mentorship, and the home's culture.

Building buy-in requires clear communication about the value of the role, expectations, and its impact on new hires, resident care, and the nursing team. The role formalizes the support many nurses already provide while offering opportunities for recognition, training, and professional engagement.

Strategies for recruiting Orientation Partners:

1. Approach nurses directly with the opportunity.
2. Explain why they were specifically considered.
3. Clearly communicate the value of the program for residents, the team, and their own professional growth.
4. Share personal confidence and belief in the importance of the program.
5. Emphasize that participation is completely voluntary.
6. Provide a clear and realistic overview of expectations and responsibilities.
7. Assure them that they will receive training, resources, and support.
8. Allow time for reflection before they decide.

Additionally, building buy-in for the NOPSP program among the home's leaders such as team managers, supervisors, educators, and senior leaders within the home plays a key role in its success. Even if they are not Orientation Partners themselves, their understanding and support of the program helps model its value, reinforce its importance, and accelerate uptake at the point of care by consistently communicating and normalizing its purpose.

Tip

Use evidence, not assumptions

When promoting the NOPSP, homes should avoid overstating potential benefits. Benefits should be shared using evidence from the literature, formal evaluations, and local program data as it becomes available to ensure messaging is accurate, credible, and context specific.



Insight

Leveraging existing strategies

At Perley Health, nurses were already familiar with champion models from prior quality improvement and program initiatives. This well-established foundation helped support quicker adoption of the Orientation Partner program, which may not be the case in other homes.

Try leveraging engagement strategies that have already worked before within the home.

Fostering engagement and recognizing contributions.

Maintain the established pool of Orientation Partners through ongoing support, meaningful recognition, and regular engagement to sustain motivation and long-term participation. Because this is a voluntary role, retention depends on making Orientation Partners feel valued, connected to the program's impact, and confident in their contribution to new hire success and team culture. Ongoing communication, appreciation, and opportunities for feedback help reinforce their role as key contributors to onboarding and care quality.

Strategies include:

- Recognition certificates or awards
- Small tokens of appreciation where possible (e.g., small gift cards, if funding permits)
- Sharing program updates and impact summaries
- Regular check-ins or touchpoints to offer support and gather feedback
- Raising awareness of Orientation Partners' contributions within the care team
- Recognizing Orientation Partners during special events, such as Nursing Week



Implementation Checklist for Practical Step 6

☐ **Develop a sustainable Orientation Partner pool.**

Build a diverse group across units and shifts through proactive recruitment, leadership support, and clear communication about the role's purpose and expectations.

☐ **Select Orientation Partners intentionally.**

Choose individuals based on experience, interpersonal skills, team credibility, and a genuine commitment to supporting others.

☐ **Support ongoing engagement and recognition.**

Maintain participation through regular communication, appreciation, feedback, and sharing the impact of the role.

7. Prepare Participants for the NOPSP

Preparing both new hires and Orientation Partners in advance of participation in the NOPSP significantly improves engagement and strengthens the overall impact of the program. Preparation does not need to be complex. Simple, intentional steps can make a meaningful difference. Orientation Partners benefit from training and ongoing support that equip them to mentor effectively, navigate common onboarding conversations, and appropriately redirect staff to resources when needed. This preparation builds confidence, clarity, and a stronger sense of ownership in their role.

New hires also benefit from early preparation by understanding the purpose and value of the program as part of their onboarding experience. It normalizes the idea that they are entering a learning environment where they may not yet know what they don't know, and that they have a designated, approachable person they can safely turn to for guidance.

Training the Orientation Partners

Orientation Partner training should prepare participants for their role by building skills in peer support, communication, and relationship-building. Training can be adapted based on a home's unique context, available resources, and the experience of Orientation Partners.

Key training topics may include:

- Program Overview: Purpose, structure, roles, and expectations of the NOPSP.
- Effective Peer Support: Characteristics of meaningful and supportive partnerships.
- Communication Strategies: Skills for supportive, respectful, and constructive conversations.
- Supporting Transition and Resilience: Helping new hires navigate change and build confidence.
- Creating a Safe Learning Environment: Promoting trust, psychological safety, and approachability.
- Adapting Support Approaches: Adjusting support based on individual needs and circumstances.
- Orientation Partner Role Confidence: Clarifying boundaries and building confidence in the role.



Insight

When clarity drives engagement

At Perley Health, when the purpose of the program was not clearly explained, some new hires did not seek support from Orientation Partners even when they could have benefitted from it. Having a clear upfront explanation of the program significantly improved engagement and willingness to reach out.

Perley Health Example

At Perley Health, Orientation Partners received four hours of protected, in-person training focused on mentorship skills and NOPSP expectations. The session used a blended approach, combining brief presentations with case-based discussions, interactive activities, and collaborative learning.

To increase accessibility, a condensed just-in-time version of the training (5–10 minutes) was delivered, covering essential program concepts for situations where protected time is limited.

Insight

Leverage available resources

The 4-hour protected training for Orientation Partners at Perley Health was made possible through targeted grant funding.

Insight

Training effectiveness

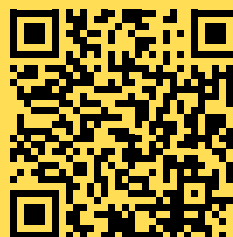
At Perley Health, 20 Orientation Partners participated in the 4-hour training. Fifteen Orientation Partners provided feedback on the training experience. 80% of Orientation Partners indicated they were very satisfied with the training and 60% indicated the training exceeded expectations.

Toolkit

Recreate the training

Perley Health provides training content to support homes in delivering Orientation Partner training, along with a guide to support facilitation.

- For a downloadable version, please see **Toolkit Resource 6 – Nursing Orientation Peer Support Program Orientation Partner Training Slide Deck** and **Toolkit Resource 7 – Nursing Orientation Peer Support Program Orientation Partner Training Facilitator’s Manual** - PerleyHealth.ca/orientation-peer-support-program



Preparing the New Hires

Since the NOPSP is integrated into orientation, dedicating 5–10 minutes during an existing orientation session is an efficient way to introduce the program, especially when new hires are already gathered in one place (for example, during classroom learning aspects of orientation). This brief overview does not need to be extensive, but it should clearly set expectations and provide key context for participation.

The session should include:

1. Overview of the NOPSP
2. How it fits within their orientation and onboarding plan
3. The value and impact of the program for new hires
4. What to expect from participation
5. Role clarification of the new hire, Orientation Partner, and NOPSP Coordinator
6. The mandatory nature of the program
7. Explanation of next steps

Implementation Checklist for Practical Step 7

☐ Provide intentional, scalable training and communication.

Equip Orientation Partners with training and new hires with clear program information.

Phase 3: Implement

8. Pair New Hires with Orientation Partners

The NOPSP Coordinator facilitates a structured pairing process to connect new hires with a suitable Orientation Partner and launch the six-week partnership. Matches should consider unit, shift, schedule, availability, learning needs, and overall fit to support a consistent and accessible partnership.

Where possible, pairings should be established before or near the new hire's first independent shift. The partnership begins with an introductory communication outlining roles, expectations, and next steps. The NOPSP Coordinator provides ongoing support through check-ins and partnership closure.

Key steps for pairing include:

- Developing an understanding of the new hire's needs and preferences.
- Reviewing the Orientation Partner pool for alignment.
- Considering unit, shift, schedule, availability, and fit.
- Confirming the Orientation Partner's availability and commitment.
- Sending an introduction to formally begin the partnership.
- Completing follow-up communication during and at the end of the six-week partnership.

Tip

Take an international perspective

Internationally Educated Nurses (IENs) have reported unique challenges when starting new nursing roles in Canada, including having decreased confidence and learning new terminology⁽¹¹⁾.

When exploring the learning needs of a newly hired IEN, it may be helpful to explore their desire to be paired with Orientation Partners who can speak the same language and/or have shared IEN experiences. They may also benefit from resources that have been translated into their native language.

These requests may not always be possible, but making the effort to create these connections can be supportive in itself.

Toolkit

Don't start from scratch

Using standardized email templates for starting, checking in, and closing partnerships can significantly reduce administrative burden and improve consistency, especially when managing multiple active pairings at once.

Perley Health has developed a set of ready-to-use templates to support this process. Additionally, though this was not done at Perley Health, subject matter experts recommend a collaborative sign-off to signify a formal end to the partnership.

- For a downloadable version, please see; **Toolkit Resource 8–Nursing Orientation Peer Support Program Email Templates** - PerleyHealth.ca/orientation-peer-support-program



Implementation Checklist for Practical Step 8

☐ Pair Orientation Partners thoughtfully.

Consider scheduling, work location, shift alignment, availability, and overall fit to support a successful six-week partnership.

☐ Use standardized email templates.

Support consistency and simplify administration with ready-to-use communication tools.

☐ Provide coordinator support throughout the partnership.

Guide the relationship through introductions, check-ins, and closing communication

9. Troubleshoot Common Challenges

NOPSP Coordinators can expect to encounter occasional challenges related to participant engagement, peer partnerships, and program logistics. Most issues can be addressed through proactive communication, flexibility, and timely support.

The following are common challenges that may arise during implementation of the NOPSP, along with practical strategies to help address them.

Challenge

New hire does not reach out to their Orientation Partner

Potential strategies

- Encourage the Orientation Partner to proactively initiate contact.
- Follow up with the new hire to reinforce the purpose, expectations, and value of the NOPSP, including whether participation is mandatory.
- Send an email two weeks after the initial pairing to reinforce participation in the program. This email reminds the new hire to reach out if they have not done so yet, and provides an opportunity for the Orientation Partner to flag this concern to the NOPSP Coordinator.

Challenge

New hire feels they do not need an Orientation Partner

Potential strategies

- Explore why they feel this way and reassess whether participation is optional based on eligibility (e.g., returning employee).
- Reinforce the benefits of peer support and ongoing learning.
- Remind them that new environments, policies, and workflows can present learning opportunities, even for experienced nurses.

Challenge

The new hire and Orientation Partner are not building a productive relationship

Potential strategies

- Meet with each individual separately to understand their concerns.
- Provide coaching or clarification where appropriate.
- Consider pairing the new hire with a different Orientation Partner.

Challenge

A Paired Orientation Partner goes on an unexpected leave

Potential strategies

- Ensure all participants know to notify the NOPSP Coordinator as soon as possible of any unexpected changes.
- Pair the new hire with another Orientation Partner to minimize disruption.

Challenge

No suitable Orientation Partner is available (e.g., based on unit, schedule, personality fit)

Potential strategies

- Ask an already engaged, more appropriate Orientation Partner whether they can support an additional new hire.
- Pair with the next best available match, recognizing that an ideal match is not always possible.
- If appropriate, the NOPSP Coordinator may temporarily provide peer support until a suitable match is available.

Challenge

There are more new hires than available Orientation Partners

Potential strategies

- Determine whether current Orientation Partners are willing and able to support more than one new hire.
- Recruit additional Orientation Partners, if feasible.
- The NOPSP Coordinator may provide interim support when necessary.

Challenge

Restructuring within the home impacts the NOPSP Coordinator role

Potential strategies

- Embed the NOPSP into the home's standard orientation process to support long-term sustainability.
- Ensure more than one individual understands the program and shares responsibility for oversight.
- Maintain clear documentation of program processes, resources, and timelines to support continuity during staffing changes or restructuring within the home

Challenges are a normal part of implementing and sustaining a NOPSP. Most can be mitigated through proactive communication, flexibility, and timely intervention. Regular check-ins with Orientation Partners and new hires can help identify concerns early and maintain positive, supportive relationships throughout the orientation experience.



Insight

Check in before they check out

A simple check-in can prevent bigger challenges. At Perley Health, the NOPSP Coordinator sends separate emails to both the new hire and Orientation Partner at the two-week mark to identify concerns early and provide support if needed.

Tip

Take an international perspective

Internationally Educated Nurses (IENs) have reported unique challenges when starting new nursing roles in Canada, including having decreased confidence and learning new terminology⁽¹¹⁾.

When exploring the learning needs of a newly hired IEN, it may be helpful to explore their desire to be paired with Orientation Partners who can speak the same language and/or have shared IEN experiences. They may also benefit from resources that have been translated into their native language.

These requests may not always be possible, but making the effort to create these connections can be supportive in itself.

Implementation Checklist for Practical Step 9

- ☐ **Communicate proactively to address potential challenges early.**
Regular check-ins help identify and resolve issues before they escalate.
- ☐ **Plan for program sustainability.**
Shared oversight and clear processes support continuity during periods of change.



Phase 4: Evaluate and Improve

10. Evaluate the Program

Ongoing evaluation is essential for understanding both the strengths of the NOPSP and opportunities for improvement. While the NOPSP Coordinator's day-to-day involvement provides valuable insight into what is working well and where challenges exist, structured and confidential feedback from new hires and Orientation Partners offers a more comprehensive understanding of the program. Documenting this feedback also allows homes to identify trends over time and make informed improvements.

Evaluation can provide insight into participants' overall experience, perceptions of specific program components, and the effectiveness of the program in supporting new hires. Importantly, it also helps demonstrate the impact and value of the NOPSP, providing evidence to support ongoing investment, sustainability, and future program enhancements.

Evaluation does not need to be lengthy or complex. Surveys can be brief and focused on answering key evaluation questions, conducted informally for quality improvement purposes, or designed with greater methodological rigor to support research or formal program evaluation.

For ease of administration, surveys can be developed and shared electronically on platforms such as SurveyMonkey. The NOPSP Coordinator can develop a survey to explore topics related to participant enjoyment and satisfaction to ensure the program is meeting the needs of Orientation Partners and new hires. The evaluation also provides an opportunity for participants to identify if changes need to be made in the program. For homes that are unable to share the survey electronically (via email) to participants, physical copies should be made available. NOPSP Coordinators should consider having a lock box central to the new hires and Orientation Partners to leave completed surveys.

Tip

Different roles, different questions

Create separate evaluation surveys for new hires and Orientation Partners. Although both participate in the same program, their roles and experiences differ. Tailored surveys will provide more meaningful, role-specific feedback and richer evaluation insights.

Recommended Information to Collect

Participant Characteristics (Demographic Information)

Collect participant characteristics to understand who participated in the evaluation and to explore whether experiences differ across groups.

Examples include:

- Professional designation (e.g., RN, RPN)
- Employment status (full-time, part-time, casual)
- Typical shift worked (Day, Evening, Night)
- Years of nursing experience
- Years of long-term care experience
- Years employed within the home
- New hires only: Previous long-term care experience

Rationale:

Demographic information provides context for interpreting findings and identifying trends among different participant groups.

Program Participation

Collect information describing how participants engaged with the program.

Examples include:

- Number of times the participant has completed the NOPSP (Orientation Partners only)
- Frequency of interactions between the new hire and Orientation Partner
- Methods of communication (e.g., in person, phone, email, virtual)
- Typical length of interactions

Rationale:

Understanding how participants engaged with the program helps determine whether it was implemented as intended and whether the level of participation influenced outcomes.

Note: Orientation Partners may participate in the program more than once. NOPSP Coordinators are encouraged to administer the survey to Orientation Partners each time they participate as they may have a completely new experience or perspective depending on who they are paired with.

Program Experience

Assess participants' experiences throughout the partnership.

Examples include:

- Adequacy of the six-week program length
- Preferred frequency of meetings
- Challenges encountered during the partnership
- Whether participants plan to continue connecting after the program
- Experience supporting multiple new hires simultaneously (Orientation Partners, if applicable)
- Suggestions for improving the program
- Additional comments or feedback

Rationale:

These questions identify strengths, challenges, and opportunities to improve the participant experience.

Note: NOPSP Coordinators are encouraged to provide an open-ended question/ area for participants to add any additional comments or feedback they did not get to share in this evaluation.

Tip

The importance of voluntary participation

It is important to highlight that participation is completely voluntary and optional. Clarify that choosing whether to complete the survey or not will have no impact on the employee's relationship with the home.

Program Impact

Evaluate whether the program achieved its intended outcomes

Examples include:

- Areas in which Orientation Partners provided support (e.g., workload management, shift adjustment, increasing confidence and independence, navigating the home's resources)
- Perceived benefits of participating in the program
- Whether participants would recommend the program or Orientation Partner role to colleagues
- Whether the program should be offered to all new hires

Rationale:

Measuring program impact demonstrates the value of the NOPSP and provides evidence to support ongoing investment, sustainability, and future improvements.

Evaluation Requirements (Optional)

For a program evaluation, consider including a section outlining the reasons why the new hire or Orientation Partner is being asked to complete an evaluation survey, how their privacy will be protected, and how the home intends to use the data.

Rationale:

These elements help ensure evaluations meet ethical and internal policy requirements when findings will be disseminated beyond internal quality improvement.

Tip

Anonymity – promoting participation

To promote participation, NOPSPs should try to implement measures to protect the anonymity and confidentiality of participants. Consider sending the survey in batches to reduce the ability to identify one single participant. Respondents could feel more comfortable expressing their true opinions on their experience and the program when anonymity is promoted. Always report summarized findings to not isolate individual respondents. In the survey, do not collect the names of participants or employee identification numbers.



Implementation Checklist for Practical Step 10

☐ Administer ongoing evaluation.

Take an opportunity to seek feedback on participants experience in the program.

☐ Take actions to improve the program.

Based on the feedback received from the evaluation, make changes to improve the experience for newly hired nurses and Orientation Partners

Looking Beyond the Core Model

Expanding and adapting mentorship to meet the home's needs

While this guide focuses on implementing a sustainable, cost-neutral NOPSP, mentorship can be integrated in many ways depending on a home's goals, resources, and capacity. As mentorship initiatives continue to evolve across the long-term care sector, homes may wish to build upon the core NOPSP model to support additional priorities or leverage existing mentorship opportunities.

- Expanding beyond onboarding. The NOPSP can serve as the foundation for broader mentorship initiatives that support professional development, leadership, career transitions, or specialty practice areas.
- Integrating with existing mentorship programs. Homes may choose to align the NOPSP with internal or external mentorship initiatives to reduce duplication and create a more coordinated approach to staff support.
- Adapting for other employee groups. While designed for nurses, the model can be adapted for PSWs, allied health professionals, or interdisciplinary teams.
- Enhancing the model when resources allow. Homes with additional staffing or funding may choose to incorporate dedicated mentor training, group learning opportunities, recognition initiatives, enhanced evaluation, or protected mentorship activities beyond those described in this guide.
- Regardless of the approach taken, the principles outlined in this guide—including thoughtful Orientation Partner selection, structured partnerships, ongoing support, and evaluation—remain foundational to developing meaningful and sustainable mentorship experiences.



Insight

Mentorship has many uses.

Beyond onboarding

Perley Health has leveraged mentorship approaches beyond new hire support, including leadership succession, such as wound care nursing and psychogeriatric nursing, to support knowledge transfer and preserve critical expertise.

Beyond nursing

At Perley Health, the PSW orientation model pairs new hires with a dedicated PSW mentor during their first orientation day. The mentor does not have a regular assignment, allowing new staff to learn directly alongside an experienced team member without the competing demands of caring for residents.

Conclusion

A Nursing Orientation Peer Support Program is more than an onboarding initiative—it is an investment in helping new nurses feel welcomed, supported, and connected as they transition into practice.

Perley Health's experience demonstrates that a sustainable peer support program can be successfully embedded in long-term care. Formal evaluation found that the NOPSP supported new hires' confidence, transition, and sense of belonging while providing Orientation Partners with meaningful opportunities to contribute to onboarding and support their colleagues.

Every home will adapt the program to its own context, but the core principles remain the same: intentionally select and prepare Orientation Partners, foster meaningful connections, monitor program progress, and continuously improve through participant feedback.

Ultimately, the NOPSP helps build a supportive workplace culture where new nurses feel confident, connected, and prepared to succeed.

Companion Toolkit Resources

All companion toolkit resources are available

PerleyHealth.ca/orientation-peer-support-program



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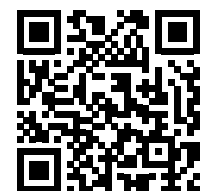
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