The Effect Of Orientation Training Given To Newly Recruited Healthcare Workers During The COVID 19 Pandemic: Quasi-Experimental Research

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ABSTRACT

Aim: The aim of this research to determine the Effect of Orientation Training Given to Newly Hired Healthcare Professionals During the COVID 19 Pandemic.

Methods: All 28 healthcare professionals who started working in a pandemic hospital affiliated to the Ministry of Health between 17-21 April 2020 were included in the sample. Research type, conducted in a quasi-experimental single-group pre-test post-test research design.

«Education Evaluation Form» and «Nursing Services Counseling Follow-up Form in the Covid-19 Process». The data were analyzed in the IBM SPSS 21.0 package program. Descriptive statistics (frequency, percentage, mean, standard deviation) were used in the analysis of the data. The Cronbach›s

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alpha coefficient of the scales was evaluated at the 95% confidence interval and the significance was evaluated at the $p<0.05$ level.

Results: The difference between the individual pre-test and post-test was statistically significant according to the mean age, gender, educational status and occupational groups of the nurses included in the study ($p<0.05$). As a result of the 1st week evaluation made by two consultant nurses, the consistency between the consultants was found to be statistically significant ($p<0.05$). The 1st and 2nd week mean distributions of the raters were 75.63 ± 19.03 and 87.28 ± 12.30, respectively, the Cronbach›s alpha coefficient was 0.96 and 0.88, respectively, and the difference between the raters› mean scores for two weeks was statistically significant ($p=0.001$).

Conclusion: Orientation Training given to healthcare workers who have just started working in a pandemic hospital during the Covid-19 process has positively affected nursing care with the increase in their knowledge and skills.

Key Words: *Covid-19, orientation training, healthcare workers*

Covid 19 Pandemisi Sırasında Sağlıkta Yeni İşe Başlayan Sağlık Çalışanlarına Verilen Oryantasyon Eğitiminin Etkisi: Yarı Deneysel Araştırma

ÖZ

Amaç: Bu araştırmanın amacı, COVID 19 Pandemisi Döneminde İşe Yeni Başlayan Sağlık çalışanlarına Verilen Oryantasyon Eğitiminin Etkisini belirlemektir.

Metot: Sağlık Bakanlığına bağlı bir pandemi hastanesinde 17-21 Nisan 2020 tarihleri arasında göreve başlayan 28 sağlık çalışanının tamamı örneklem kapsamına alındı. Araştırma, yarı deneysel ön test, son test araştırma modelinde uygulandı.

«Eğitim Değerlendirme Formu» ve «Covid-19 Sürecinde Hemşirelik Hizmetleri Danışmanlık İzlem Formu» kullanıldı. Veriler IBM SPSS 21.0 paket programında analiz edildi. Verilerin analizinde tanımlayıcı istatistikler (frekans, yüzde, ortalama, standart sapma) kullanıldı. Ölçeklerin Cronbach alfa katsayısı %95 güven aralığında, anlamlılık $p<0,05$ düzeyinde değerlendirildi.

Bulgular: Araştırmaya alınan hemşirelerin yaş, cinsiyet, eğitim durumu ve meslek gruplarına göre bireysel ön test ve son test arasındaki fark istatistiksel olarak anlamlıydı ($p<0,05$). İki konsültan hemşire tarafından yapılan 1.hafta değerlendirmesi sonucunda konsültanlar arasındaki uyum istatistiksel olarak anlamlı bulundu ($p<0.05$). Puanlayıcıların 1. ve 2. hafta ortalama dağılımları sırasıyla 75,63 ± 19,03 ve 87,28 ± 12,30, Cronbach alfa katsayısı sırasıyla 0,96 ve 0,88 ve puanlayıcıların iki haftalık puan ortalamaları arasındaki fark istatistiksel olarak anlamlıydı ($p= 0,001$).

Sonuç: Pandemi hastanesinde çalışmaya yeni başlayan sağlık çalışanlarına Covid-19 sürecinde verilen oryantasyon eğitimi bilgi ve becerilerinin artması ile hemşirelik bakımını olumlu yönde etkilemiştir.

INTRODUCTION

Covid-19 Pandemic which began to be seen in Wuhan, China›s Hubei province in December 2019, was declared a pandemic by the World Health Organization (WHO) on March 11, 2020, as it continued to spread rapidly across the world (He et al., 2020; Pellino et al., 2020). Covid-19 becomes a serious condition due to its rapid spread through contaminated respiratory droplets from person to person and due to the fact that individuals not showing symptoms are carriers (Liu et al., 2020; Chew et al., 2020; Pappa et al., 2020). Dry cough, fever, headache, tiredness, loss of taste and smell, myalgia are seen as symptoms of the disease. These are accompanied by leukopenia in laboratory and by ground-glass opacity on chest X-ray and tomography (Velavan et al., 2020). In order to avoid Covid-19 during the pandemic, we have to learn to live with hand hygiene, mask and social distance in social life.

This is important for healthcare professionals who provide uninterrupted healthcare every day of the week. In this process, this situation is much more important for healthcare professionals who have just started working in hospitals. The general adaptation training given theoretically and practically during the pandemic process and the 15-day orientation process and success of healthcare professionals positively affect the health of themselves, their colleagues, and therefore the patients they care for. Detailed instructions on the use and management of personal protective equipment and special training in the management of Covid-19 patients reduce the anxiety created by unknown and uncontrollable dangers and are extremely important for healthcare professionals to protect themselves and care for patients in the Covid-19 process and to know the functioning of the hospital. During the COVID 19 pandemic; «Training brochures and guides were created by the TR Ministry of Health for health workers. In addition, the only common goal of all these developments, such as WHO, CDC guides, information sharing in the written and visual media, and the rapid publication of all publications without referee control, is to inform and to fight against the Covid-19 pandemic. It was the responsibility of the hospital administrators to support the health workers with practical training. This should be improved as well as increasing the competence and quality of care of the newly recruited health workers with this updated information. In addition, the importance of protecting the health of health workers is emphasized in all objectives of ICN and other health institutions.

Aim of the research; it is the examination of the effect of theoretical and applied

in-service training given to healthcare workers who have just started their duties during the COVID 19 pandemic period. It is a quasi-experimental pre-test and post-test design research whose data were obtained from retrospective records.

Hypotheses:

H1: Pre-test and post-test knowledge averages of newly recruited health workers who are given orientation training are different.

H2: According to socio-demopraphic variables, pre-test and post-test knowledge averages of newly recruited health workers who are given orientation training are different.

METHODS

This research design is a quasi-experimental single-group pretest posttest design. The data were evaluated retrospectively.

Research Place and Time

he research was conducted in a public COVID19 Pandemic hospital between 17-21 April 2022.

Participants

The research sample consisted of 28 healthcare workers (nurses and technicians) who started working in the COVID 19 Pandemic Hospital between 17-21 April 2022, and the full count sampling method was used.

Post hoc power analysis was used to estimate the strength of the observed effect based on the sample size (n=28) and test of our dataset. As a result of the analysis, the effect size dz was found to be 0.5 and the power (1-β err prop) was 0.8983.

Data Collection

Data Collection Tools: In the collection of the data, *"Personal Information Form"* developed by the researchers in line with the literature and containing the socio-demographic characteristics of the healthcare workers was used. In order to determine the participants' level of professional knowledge, «Pre-test» was applied before the training, «Post-test» and «Training Evaluation Form"

were applied after the training. The nursing practices of the newly recruited healthcare personnel were evaluated with the «Counselling Follow-up Form of Nursing Services in Covid-19 Process». This evaluation was made by 2 nurse consultants (charge nurse and chief nurse) at the end of the 1st week they started working in Covid services. Likewise, the evaluation was repeated by the same nurse consultants at the end of the 2nd week. As a result, at the end of the 2nd week, the new healthcare worker was evaluated by 2 separate nurse consultants 4 times in total.

Personal Information Form; It consists of a total of 5 questions about the gender, age, educational status, occupation, and work experience of the newly recruited healthcare personnel.

Pre-test and –Post test;, designed to be applied twice, before and after "General Compliance Training", to the new healthcare workers who have started working during Covid process. Each question was scored 5 out of 100 points.

Training Evaluation Form; is a 5-point Likert type form consisting of 30 items: 16 items for Planning and Implementation of the Training, 8 items for the Trainer, and 6 items for Post-Training Outcomes. Each response given to the questions in the form with the statements «strongly disagree», «disagree», «undecided», «agree» and «absolutely agree» was scored from 1 to 5. Increasing scores reflect the success of the training. 16 items for the Planning and Implementation of the Training, 8 items for the Trainer and 6 items for the Post-Training Achievements. The Cronbach›s Alpha coefficient of 16 items for Planning and Implementation of Education was 0.93, Cronbach›s alpha coefficient of 8 items for the trainer was 0.86, and Cronbach›s alpha coefficient of 6 items for Post-Training Achievements was 0.89. In addition, it was determined that the Cronbach's alpha reliability coefficient of 30 items in total was 0.91. In our study, the reliability of the education evaluation form consisting of 3 sections and 30 items was found to be high.

Counselling Form of Nursing Services in Covid-19 Process; This form consists of a total of 36 items in 3 parts: counselling topics, basic nursing practices, and the workflow of the unit. Each statement as «strongly disagree», «disagree», «undecided», «agree» and «absolutely agree» was scored from 1 to 5. In order to evaluate the behaviours of newly recruited healthcare workers during the 15-day orientation process in which they started to work in Covid

services, each healthcare worker was evaluated 2 times by 2 nurse consultants (charge nurse and chief nurse) at the end of the 1st and the 2nd week, 4 times in total. Calculation; Mean Score (Total Score / Number of Practices Evaluated) and Mean Score out of 100 (Mean Score x 25).

In the Counseling Form of Nursing Services in the Covid-19 Process, the section Cronbach›s alpha value of the psychological counseling issues 0.93 the Cronbach›s alpha value of the basic nursing practices section 0.98 and the unit›s It has been determined that the Cronbach›s alpha value of the section where the workflow is included is 0.96 . It was determined that the total Cronbach›s alpha value of the Counseling Form of the Nursing Services in the Covid-19 Process was 0.96.

As a result of the 1st week reliability analysis applied to all the items of this form, the Cronbach›s alpha coefficient was 0.96; As a result of the 2nd week reliability analysis, Cronbach›s alpha coefficient was determined to be 0.88. In this study, no difference was found between the 1st and 2nd evaluation mean scores of both guides, and high correlations are important in terms of showing reliability.

Education Intervention:

The training was completed in 5 days, 3 day of theory and 2 day of practice. 40 hours of training was given, including 24 hours of theory and 16 hours of practice.

The content of the theoretical training

Physical Structure of the Institution, Departments Provided Service, Administrative Structure and Managers, Working Conditions, Permits, Transportation to the Hospital Contact Information to the Institution, Committees, Covid Units and Studies, Waste Management, Patient Safety Practices, (Identity Verification, Prevention of Falls, Patient Transfer, Information Topics such as Mobbing-White Code-Employee Rights Circular Infection Control Precautions (Hand Hygiene, Use of Personal Protective Equipment, Sharps Injuries, Basic Nursing Practices, Hospital Cleaning) were included. With face-to-face slides in the training hall of the hospital, each lesson was 40 minutes in 960 minutes.

Application training

The Use of Personal Protective Equipment, the care of patients suspected or diagnosed with COVID 19 infection, Basic Nursing Practices and Patient Care were carried out by 2 specialist nurses in 16 hours.

Data Analysis

The data obtained were transferred to the computer environment and analysed in IBM SPSS 21.0 (IBM Corp., Armonk, New York) package program. Descriptive statistics (frequency, percentage, mean, standard deviation) were used in the analysis of the data. The compatibility of numerical data to normal distribution was assessed by Q-Q plot and Kolmogorov - Smirnov test. Wilcoxon test was used in the analysis of the data. ICC (Intraclass correlation coefficient) was used for the assessors agreement and Cronbach›s alpha coefficient was used for the reliability analysis of the scales. The results were evaluated at 95% confidence interval and significance was evaluated at $p < 0.05$ level.

Ethical Considerations

Approval was obtained from the Non-Interventional Clinical Research Ethics Committee of a university (dated 10.07.2020 and decision no: 2020/08-08), and permission was obtained from the Covid-19 Scientific Research Commission of Ministry of Health (dated 14.07.2020 and decision no: 2020-07-14T10_09_45). Informed consents of healthcare workers who received general compliance training in Covid-19 process were obtained electronically.

Limitations of the Research

The fact that the research was carried out during the most intense period of the Covıd-19 Pandemic process and the retrospective evaluation of the data led to the following limitations.

1. Limitation of the number of samples and sampling method

2. Receiving a hospital without selecting the hospital by sampling methods

3. No expert opinion of the pre-post test knowledge assessment tool, no test analysis

4. Lack of expert opinion of the education evaluation form, lack of validity

5. The application evaluation form did not receive expert opinion and did not have construct validity.

However, despite these limitations, we can say that it is important in terms of reflecting the interventions and results in a hospital during the pandemic period. In this study, no difference was found between the 1st and 2nd evaluation mean scores of both guides, and high correlations are important in terms of showing reliability.

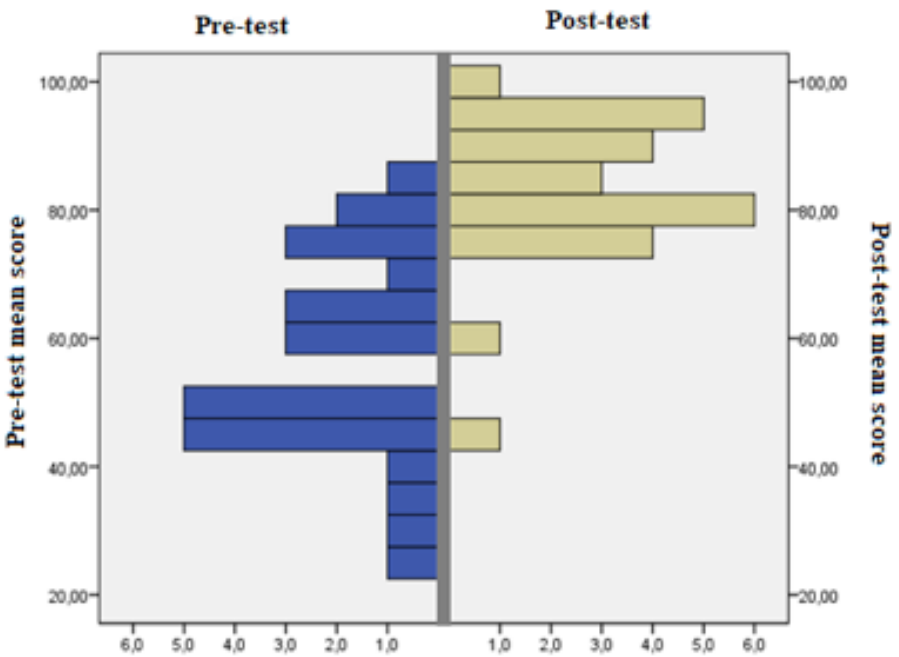
RESULTS

The mean age of the healthcare workers included in the research was 23.32±1.51 years, and 20 (71.4%) were female, 16 (57.1%) were undergraduates, 75 (75%) were nurses and the work experience (0.69±0.86) was between 0-3 years **(Table 1).**

TABLE:1 Distribution of Sociodemographic Characteristics of Healthcare Workers

Personal Information (n=28)		
	n	%
Gender		
Female	20	71.4
Male	8	28.6
Education Status		
Bachelor's Degree (Nurse)	16	57.1
High School Degree (Nurse)	-	-
Associate Degree (Nurse)	7	25.0
Vocational School of Health Services (Anesthesia technician)	5	17.9
Occupation		
Nurse	21	75.0
Anaesthesia Technician/Technologist	7	25.0
Work Experience (Year)		
0	14	50.0
1	11	39.3
2	1	3.6
3	2	7.1
	Mean	**Standard Deviation**
Age	23.32	1.51

The scores obtained from the pre-test are in the range of 25-85 (56.29 ± 16.03) and the scores obtained from the post- test are in the range of 45-100 (83.00 ± 12.07). The difference between the pre-test and the post- test was found to be statistically significant.



Wilcoxon test; p<0.0001).

Figure 1: Distribution of Trained Healthcare Workers According to the Answers to the Pre-test and Post-test (n=28)

TABLE:2 Pre-Test and Post-Test Scores Distribution of Newly Started Health Care Employees by Demographic Characteristics (N=28)

	Pre-test	Post-test	% Difference	p
Gender				
Male	52.5±17.11	80.63±10.5	53.57	0.012
Female	57.89±15.75	84.12±12.9	45.29	0.0001
% Difference	10.28	-7.96		
Educational Status				
Bachelor's Degree	62.81±14.72	86.79±7.5	38.17	0.001
Associate Degree	38.33±9.83	81.67±19.41	113.04	0.026
Vocational School of Health Services	57.00±9.08	74.00±8.22	29.82	0.041
p (Bachelor's&Associate)	0.017	0.038		
(percentage of change %)	(-38.97%)	(-33.19%)		
p (Bachelor's&VSHS)	0.54	0.027		
(percentage of change %)	(-9.25%)	(-38.28%)		
p (Associate&VSHS)	0.011	0.47		
(percentage of change %)	(48.70%)	(-7.62%)		
Occupation				
Anaesthesia Technician/ Technologist	38.33±9.83	81.67±19.41	113.04	0.026
Nurse	61.43±13.61	83.42±9.44	35.80	0.0001
p	0.005	0.035		
(percentage of change %)	(60.25%)	(38.47%)		

At the end of the 1st week evaluation, as both of the assessors in the training agreed, the highest score was obtained from the statements «Pays Attention to Hand Hygiene and Practices It» and «Complies with the Working Hours of the Unit» while the lowest score was obtained from «The Level of Knowledge on the Functioning and Structure of the Hospital is Sufficient» and «Executes the Judicial Protocol Duly» **(Table 3).** At the end of the 2nd week evaluation, the lowest score was obtained from the statements «Uses Application Areas (nucleus etc.) in the Automation System Properly and «Makes Quality Management System Function Properly».

The highest score, as both of the assessors in the training agreed, was obtained from the statements «Performs Patient Care Practices» and «Pays Attention to Hand Hygiene and Practices It» **(Table 3).**

TABLE:3 Distribution of Evaluation Results of Observer Specialist Nurses by Week (N=28)

			1. Assessor	2. Assessor	Mean±SD
1. Week	Lowest -1	The level of knowledge on the functioning and structure of the hospital is sufficient	67.86	61.43	64.65±4.55
	Lowest -2	Executes the judicial protocol duly	66.67	62.86	64.77±2.69
	Lowest -3	Uses application areas (nucleus etc.) in the automation system properly	67.86	64.29	66.08±2.52
	Lowest -4	Recognition of the institution and the orientation is sufficient	67.14	66.43	66.79±0.5
	Highest -1	Complies with the working hours of the unit	97.14	94.29	95.72±2.02
	Highest -2	Pays attention to hand hygiene and practices it	95.71	92.14	93.93±2.52
	Highest -3	Performs the shift handover procedures properly	85.00	79.29	82.15±4.04
	Highest -4	Performs patient care practices	81.43	76.43	78.93±3.54

2. Week	Lowest -1	Uses application areas (nucleus etc.) in the automation system properly	80.71	80.00	80.36±0.52
	Lowest -2	Executes the judicial protocol duly	82.86	82.86	82.86±0.73
	Lowest -3	Makes quality management system function properly	82.86	80.00	81.43±2.02
	Lowest -4	Applies invasive interventions	83.57	85.00	84.29±1.01
	Highest -1	Pays attention to hand hygiene and practices it	98.57	95.00	96.79±2.52
	Highest -2	Performs patient care practices	95.71	90.00	92.86±4.04
	Highest -3	Complies with the working hours of the unit	94.29	89.29	91.79±3.54
	Highest -4	Uses personal protective equipment properly	92.86	90.71	91.79±1.52

SD: Standard Deviation

As a result of the 1st week evaluation performed by 2 nurse consultants (charge nurse and chief nurse) using the Counselling Form of Nursing Services in Covid-19 Process, the consistency between the consultants was found to be statistically significant (p<0,05) **(Table 4).** The score distribution of the first assessor was (76.36 ± 19.39), the score distribution of the second assessor was (74.91 ± 19.03) and the average distribution was (75.63 ± 19.03). **(Table 4).** The score distribution of the first assessor was (88,18 ± 11,83), the score distribution of the second assessor was (86,38 ± 13,50) and the average distribution was (87,28 ± 12,30). As a result of the reliability analysis applied with all items of the evaluation, it was found that Cronbach's alpha ranged between 0,84 and 0,98 and the score concordance between the assessors was 0.88.

It was determined that the difference in the mean scores of the assessors within two weeks was statistically significant (Wilcoxon test; p=0,001) **(Table 4).**

TABLE:4 Evaluation of the Inter-Observer Agreement (N=28)

		Min.	Max.	Mean	SD	ICC	Cronbach's Alpha
1. Week	1. Assessor	52	87	76.36	19.39	0.96	0,98
	2. Assessor	50	84	74.91	19.03		
	Mean	50	87	75.63	19.03		
2. Week	1. Assessor	71	93	88.18	11.83	0.88	0.97
	2. Assessor	69	95	86.38	13.50		
	Mean	69	93	87.28	12.30		

* Standard Deviation

When the training evaluation mean scores of the healthcare workers who received general compliance training was evaluated, it was determined that the most positive result was "Trainer". In the training process, the qualifications of the trainer came to the fore. In general, it is observed that above-average satisfaction and perception occurred, and all three stages of the training were successful **(Table 5).**

TABLE:5 Training Evaluation Score Averages of Newly Started Health Workers (N=28)

	N	Minimum	Maximum	Mean	SD
Planning and Implementation of the Training	28	2	5	4.34	0.63
Trainer	28	3	5	**4.46**	0.53
Post-Training Outcomes	28	3	5	4.38	0.54
The Overall Evaluation Result	28	2	5	4.39	0.59

SD: Standard Deviation

DISCUSSION

Successful transition to practice depends on the new nurse building confidence and gaining essential clinical reasoning abilities while orienting to their role. Orientation programs with trained preceptors have been found to be the most successful means of preparing new graduate nurses for clinical practice (Powers et all, 2019)

Sustainable nurse orientation programs have a structured program with defined outcomes to promote clinical competence, safe patient care, and professional

development; and an evaluation process to guide continual improvement and meet organizational needs. (Chant et all, 2019) Newly graduate nurses are vulnerable to the stressful and workload of their first few months of employment. In addition, demanding work requirements and poor practice environments wear out nurses starting out. It is seen as a quality indicator that the institution organizes training programs for all new personnel without distinction in order to ensure easier adaptation of the employee to the institution. (Quek et all, 2019) .Therefore, compliance training should be given to the new personnel immediately or within the first 15 days. In our study, it was seen that the new healthcare workers consisted of young, female nurses with 0-3 years of work experience and a Bachelor's Degree (Table 1). In this regard, it can be said that they were inexperienced in terms of professional life. Similar results are observed in the studies conducted in our country (Buğdaylı & Akyürek, 2017; Zengin Aydın & Büyükbayram, 2020). It is extremely important to provide general compliance trainings to new healthcare workers who have started working at pandemic hospitals during Covid-19 process; especially to those who are young and have little or no work experience. It is essential for their own health, as well as the health of other healthcare professionals and the community, so that they do not create a source of contamination.

The difference between the pre-test and the final test was found to be statistically significant (Wilcoxon test; $p<0,0001$) (Figure 1). Differences between individual pre-test and final test changes according to gender, educational status and occupational groups were found to be statistically significant ($p<0,05$) (Table 2).

At the end of the 1st week evaluation, as both of the assessors in the training agreed, the highest score was obtained from the statements "Pays Attention to Hand Hygiene and Practices It" and "Complies with the Working Hours of the Unit" while at the end of the 2nd week evaluation, as both of the assessors in the training agreed, the highest score was obtained from the statements "Performs Patient Care Practices" and "Pays Attention to Hand Hygiene and Practices It" (Table 3). In line with the results obtained, as the main elements of the 15-day orientation process after the orientation training (3 days theoretical and 2 day practical) given at a pandemic hospital, understanding the importance of hand hygiene and practicing it, and the successful implementation of patient care practices at the end of the 15th day, demonstrated the success of the training and showed that sufficient time was provided. Implementation of the trainings given and reflecting the knowledge of the employees on the field is important in terms of reducing the work stress, eliminating the possibility of making mistakes and the negative consequences that may occur.

As a result of the evaluation made at the end of the 1st and the 2nd week, the consistency between the consultants was found to be statistically significant ($p<0,05$). Consistency analysis of the evaluations made at the end of the 1st and the 2nd week were determined to be 0.96 and 0.88, respectively (Table 4). The fact that the results of the evaluations made by the charge nurse and chief nurse evaluating the new healthcare worker are consistent with each other and by weeks, makes the assessment more objective. It was determined that the difference in the mean scores of the assessors within two weeks was statistically significant (Wilcoxon test; $p=0,001$) (Table 4). With this result, we can say that the two-week adaptation process was successful.

As the training provided increases the level of knowledge, the result is pleasing. Along with the in-service trainings, the subjects, time, length, location, and the frequency of the training should be arranged in line with the needs. Updating employees' knowledge in accordance with the current approaches and evidence-based practices will be the most accurate approach. But first, it should be aimed to determine the training and the professional knowledge, attitudes and behaviours as a whole and to reflect the results in individualized patient care. We believe that the new healthcare workers', who started working at a pandemic hospital during the Covid-19 process, being equipped with hand hygiene and protective isolation methods will reduce work stress and enable them to be more efficient.

When the training evaluation mean scores of the healthcare workers who received general compliance training were evaluated, it was seen that the most positive result above 4.34 was the trainer with an average of 4.46. (Table 5). We believe that it was effective that the team planning and implementing the trainings consist of the same and experienced trainers under the leadership of training nurses. Training mentor nurses on clinical assessment is essential to assist new nurses in their transition to practice. Safe and effective patient care is dependent upon having nurses who are well prepared for their role through being provided guidance and support from trained preceptors (Powers et all, 2019). In the studies, the importance of receiving training by competent people is mentioned (Erdoğan, 2020).

In the literature, the importance of evaluating the adaptation process on an individual basis and the continuity in education with in-service trainings are emphasized (Carter et all, 2022; Richard et all, 2022).

CONCLUSION

It was determined that the healthcare workers included in the study were young female nurses with a bachelor's degree and little work experience. Individual pre-test and final test differences according to gender, educational status and occupational groups and the final test scores of men and women being higher than the pre-test scores were found to be statistically significant ($p<0,05$; $p=0,012$; $p=0,0001$). When the training evaluation mean scores were evaluated, it was concluded that the most positive result was "Trainer". In the training process, the qualifications of the trainer came to the fore. In general, it was seen that all three stages of the training were successful.

As a result of the 1st week evaluation performed by 2 nurse consultants (charge nurse and chief nurse) using the Counselling Form of Nursing Services in Covid-19 Process, the consistency between the consultants was found to be statistically significant ($p<0,05$). As a result of the reliability analysis applied with all items of the evaluation, it was found that Cronbach's alpha ranged between 0.95 and 0.98 and the score concordance between the assessors was 0.96. After the reliability analysis of the evaluation performed by 2 nurse consultants (charge nurse and chief nurse) at the end of the 2nd week, it was found that the Cronbach's alpha ranged between 0.94 and 0.96 and the consistency between the consultants was statistically significant ($p<0,05$). As a result of the reliability analysis applied with all items of the evaluation, it was found that Cronbach's alpha ranged between 0,84 and 0,98 and the score concordance between the assessors was 0.88. It was determined that the difference in the mean scores of the assessors within two weeks was statistically significant (Wilcoxon test; $p=0,001$). The highest scores for both of the weeks, as both of the assessors in the training agreed, were obtained from the statements "Performs Patient Care Practices" and "Pays Attention to Hand Hygiene and Practices It". The difference between the pre-test and the final test was found to be statistically significant. According to the results obtained from the study, Orientation Training given to new healthcare workers who had started working at a pandemic hospital during Covid-19 process has had a positive impact on nursing care with an increase in their knowledge and skills.

The training content, prepared in line with the guidelines created by the Ministry of Health and the explanations made by WHO, aims to protect from Covid-19 infection and use personal protective equipment as well as basic nursing practices. In our study, it is important that the orientation training can be done face-to-face to the healthcare professionals who have just started working during the Covid-19 pandemic process, in terms of providing knowledge, attitude and behavior change

by both theoretical and practical. It is recommended that this training should be carried out in larger groups and for health workers starting every duty, and this process should be supported by adding orientation trainings in the clinic where they will work, in line with the Ministry of Health Quality Standards Version 6, to last at least 15 days.

Ethical committee:

Approval was obtained from the Non-Interventional Clinical Research Ethics Committee of a university (dated 10.07.2020 and decision no: 2020/08-08), and permission was obtained from the Covid-19 Scientific Research Commission of Ministry of Health (dated 14.07.2020 and decision no: 2020-07-14T10_09_45).

Author contribution

Füsun Afşar; Study conception and design, Data collection, Data analysis and interpretation, Drafting of the article, Critical revision of the article

Özlem İbrahimoğlu; Data analysis, interpretation and Drafting of the article

Hatice Erdoğan; Data analysis, interpretation and Drafting of the article

There is no conflict of interest.

No conflict of interst

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