Profile of Learning Opportunities

Ward 15
Wansbeck General Hospital

‘The clinical placement as a Learning Zone’

Translating the practice environment from a broad range of experiences into a profile of learning opportunities

Reviewed June 2009
Dear

On behalf of the ward team I would like to welcome you to Ward 15 at Wansbeck General Hospital. The reason for writing to you is to give you some insight to the ward, details of your mentor, your shifts for the first week, what is expected of you and some information about your ward allocation.

We all appreciate that a new ward placement can be a little daunting and may cause some apprehension; however please don’t be too worried, we can all still remember how it feels! Have a read through the information and if you have any queries please do not hesitate to contact us at any time. An informal visit prior to your placement can also be arranged if you think it would be beneficial.

Your educational needs are very important to us, so if there is any aspect of anatomy and physiology, types of operations, surgical nursing, terminology or anything else you would like us to tailor to your requirements, please give us a ring and an educational programme can be devised to meet your needs. You may find it helpful to discuss the aspect of teaching sessions with other students who may be allocated to the surgical wards at the same time as you, as they may have similar needs which can then be taught together.

Looking forward to working with you as a valued member of the ward team,

Sincerely,

Anne Grayson
Ward Sister/Manager

SB/AG 06.07
Guidance for all new Learners and Mentors

This profile is a comprehensive document detailing all the learning opportunities available to this specific clinical area. It is intended that learners, students and mentors select the appropriate opportunities to help the learner/student meet the specified competencies for their own individual placement.

Students should not expect to access all of these opportunities whilst on placement as not all may be appropriate to their stage of training or required competencies. However, some aspects of the opportunities available may enhance knowledge and skills or a particular area of interest and may compliment competencies that need to be achieved.

Learning should be unique to the individual and aim to enhance the knowledge, skills and attitudes of the professionals we have the privilege of helping to become the carers of the future.
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1. Area/Ward Profile
2. Learning Zone
3. Learning opportunities
Shift Patterns

The working week on the ward runs from Monday to Sunday

The ward however is only open daily from Monday to Friday.

Shift patterns can be negotiated however to gain the maximum benefit from this ward allocation it is recommended that mirroring your mentors shifts is the best way to ensure your competencies are fully achieved.

**Early Shift:** 8am to 4pm
7.30am to 3.30pm

**Late Shift:** 1pm to 8.45pm

Your shifts for the first week will be:

<table>
<thead>
<tr>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
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Your mentor will be:
Ward 15 is open daily from 7.30 am to 9pm. It is a 17 bedded day surgery unit. The ward comprises of 17 beds in two 6 bedded single sex bays with one five bedded bay. There is a variety of bathing, showering and toilet facilities for both able bodied and less able patients.

The ward specialises in day case surgery and investigations whereby patients attend for operations or procedures under a general or local anaesthetic. Our patients are usually allowed home later in the day.

We cover a range of specialities as well as day surgery, these include emergency surgical admissions (although the ward is primarily for planned or elective admissions) however due to hospital-wide pressure on beds some patients are admitted as an emergency for investigation of their complaint which may or may not result in an operation), orthopaedic surgery, urology, gastroenterology, gynaecology, haematology and a range of medical investigations.

As the ward deals with some patients who return on a regular basis for procedures and/or investigations, a strong bond and rapport can develop with the patient and their relatives. This is very rewarding but on occasion we nurse patients who are nearing the end of their life and require terminal care. This can appear a little daunting at first, especially if the ward is your first allocation. However, you will be fully supported by caring and compassionate staff with excellent counselling skills.

The patient is not cared for in isolation. Holistic care is our goal which aims to care for the patient, their children, family, friends and extended family.

Primary nursing is practiced on the ward, whereby the ward is divided into 3 primary nursing teams headed by the primary nurse, and supported and assisted by both qualified and unqualified associate nurses. You will be rostered to work with your mentor in your allocated primary nursing team for at least 50% of your shifts and also supported by experienced associate mentors.

Primary nursing within the surgical wards is currently based on the Roper, Logan and Tierney ‘Activities Of Living’ model (although this is currently under discussion and review). This is where an experienced nurse acts in the role of primary nurse (named nurse), and is responsible for assessing, planning, implementing and evaluating care for a designated group of patients. He or she is supported by qualified associate nurses and health care assistants, who work under his/her direction. The aim of primary nursing is to provide continuity and quality of care for the patient and to assist in nurse/patient communication. The patient and their relatives have a named nurse who knows them and who is aware of their plan of care, to turn to for help and to answer any queries.

The importance of the multi-disciplinary team in delivering effective patient care cannot be stressed highly enough. The patient cannot be cared for in isolation by any one group of professionals, it is a team effort. Everyone from portering staff, domestic staff, through to nurses, doctors and physiotherapists to name but a few, have a role to play in patient care. Hospitals cannot function without support services and the value of their contribution must be recognised.
Many of the ward staff are educated to degree or diploma level (or are currently studying at this level) and have recognised teaching and assessing qualifications. Therefore the standard of training and education at ward level is very high and you can expect an excellent placement both for educational and clinical skills opportunities.

We believe that Ward 15 offers a wide range of learning opportunities for students, and as a team we aim to encourage learning not only by observation but also participation wherever possible. As each student joins the ward at differing stages in their training, we acknowledge that you may be feeling anxious, but hope that our friendly approach from committed and enthusiastic staff can foster a good learning environment.
Student Nurse/Learner Induction Checklist

Name:

Start Date:

Student Intake:

This programme is a guide to assessors to aid the integration of the student/learner into the working environment. It is recommended best practice that this checklist be completed on the first day of your allocation to ensure that the individual is fully orientated to the ward layout, is aware of how to summon help in the event of an emergency, is aware of expectations of them and that all health and safety issues have been fully explained in order to protect the patient, individual and team.

Students must be allocated to their assessor at least one week prior to commencement of their placement. At this time their ‘off duty’ is produced around their mentor’s shifts to ensure that student and mentor can work together on the first day of their allocation to the ward. Students MUST work at least 50% of their shifts with their nominated mentor.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Student Signature</th>
<th>Mentor Signature</th>
<th>Date</th>
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<tbody>
<tr>
<td>Tour of ward</td>
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<tr>
<td>Introduce to all staff members</td>
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<tr>
<td>Introduce to patients</td>
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<tr>
<td>Organise off duty</td>
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<td>Procedure for reporting sick</td>
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<tr>
<td>Discuss dress code</td>
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<tr>
<td>Give student ward profile and philosophy</td>
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<tr>
<td>Induction on safe manual handling</td>
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<tr>
<td>Health and safety file</td>
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<td>Trust policies files</td>
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<tr>
<td>Control of infection policies and procedures</td>
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<tr>
<td>Nursing care plans and relevant documentation</td>
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<td>Risk assessment file</td>
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<tr>
<td>Royal Marsden Manual (on intranet)</td>
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<tr>
<td>Emergency exits and fire procedures</td>
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<tr>
<td>Cardiac arrest procedures and crash trolley</td>
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<td>Restaurant</td>
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<td>Car parking</td>
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<tr>
<td>Handling a complaint or concern</td>
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Opportunities For Students

- Experience of every aspect of surgical nursing from investigation, minor surgery, day case surgery and care of the terminally ill.

- The opportunity to follow a patient through from admission to discharge and to visit theatre to watch their operation with the patients and surgeons consent.

- Supervised experience of assessing, planning implementing and evaluating care.

- Counselling and support of the patient and their family/friends.

- Practical experience in using a wide variety of computerised monitoring and diagnostic equipment.

- The opportunity to care for patients with altered body image.

- Playing an active role as a member of the primary nursing team whose views and opinions are sought and valued.

- Formal time set aside with your mentor to discuss learning needs and objectives, and strategies for completing your ward allocation to achieve the widest possible scope of experiences.

- Constructive feedback on progress.

- Access to specialist nurses for advice and education.

- Involvement of the primary care team in the planning and safe effective discharge of patients.

- Access to the hospital library in the Education Centre with computer access to the internet, CINAHL and MEDLINE. Word processing facilities are also available if required.

- You may have the opportunity to escort patients to other hospitals in the region for specialist investigations where appropriate.

- Experience of ward rounds with consultant and other medical staff.

- Communication and good inter-personal skills are the key to effective patient care. This can be non-verbal, verbal and written; and is perhaps the most important lesson you can learn in any care setting. How you function with people on a daily basis and use your communication skills can make a vast difference to how patients, relatives, their friends and your colleagues perceive you.

- On your first day you will be introduced to your mentor and the rest of the ward team, and will be shown the ward layout to get you orientated. This should include the location of fire exits and fire fighting equipment, nurse call and emergency buzzer systems as how to summon help in an emergency.

- Risk assessment and risk management strategies.
• The development of observational skills.

• Assisting in identifying and maintaining a safe care and working environment.

• Experience in wound dressings and wound care management.

• The opportunity to participate in administration of medicines, including the giving of injections.

• Managing a small caseload of patients and ward management experience depending upon the stage of your training.

• Recognise the importance of customer relations in an ever increasing consumer oriented approach to health care.

• The opportunity to observe certain procedures performed on the ward and in the x-ray department i.e. lung and liver biopsies.

Whilst exhaustive, this list is not complete but reflects the variety of opportunities available to you depending upon your stage of training.
<table>
<thead>
<tr>
<th>Key Elements</th>
<th>Learning opportunities</th>
<th>Resources</th>
<th>Contact Point</th>
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<tr>
<td><strong>Care Planning</strong></td>
<td>• Documentation&lt;br&gt;• Audit&lt;br&gt;• Management of patient caseload</td>
<td>• Mentor&lt;br&gt;• Nursing Team</td>
<td>• Clinical Governance&lt;br&gt;• Mentor&lt;br&gt;• Ward Team</td>
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<td><strong>Communication Skills</strong></td>
<td>• Induction&lt;br&gt;• Library&lt;br&gt;• Discharge planning&lt;br&gt;• Unit handovers&lt;br&gt;• Ward Rounds&lt;br&gt;• Management of patient caseload&lt;br&gt;• Progress evaluation with mentor</td>
<td>• The Patient&lt;br&gt;• Mentor&lt;br&gt;• Nursing Team&lt;br&gt;• Medical staff&lt;br&gt;• Care Facilitators&lt;br&gt;• Community Staff&lt;br&gt;• Social Services&lt;br&gt;• Relatives&lt;br&gt;• MDT</td>
<td>• Mentor&lt;br&gt;• Ward Team&lt;br&gt;• MDT&lt;br&gt;• The patients</td>
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<tr>
<td><strong>Risk Management</strong></td>
<td>• Health and Safety&lt;br&gt;• Infection control&lt;br&gt;• Drug Rounds&lt;br&gt;• Skill mix/rotation&lt;br&gt;• Bed Allocation&lt;br&gt;• Observation of procedures&lt;br&gt;• Management of patient caseload</td>
<td>• Mentor&lt;br&gt;• Nursing Team&lt;br&gt;• Specialist Nurses&lt;br&gt;• Policies&lt;br&gt;• Guidelines</td>
<td>• Clinical Governance&lt;br&gt;• Specialist Nurses</td>
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<tr>
<td><strong>Practical Skills</strong></td>
<td>• Wound dressings&lt;br&gt;• Drug rounds&lt;br&gt;• Observations&lt;br&gt;• Documentation&lt;br&gt;• Use of diagnostic/monitoring equipment&lt;br&gt;• Assistance with clinical procedures&lt;br&gt;• Pre and post operative care</td>
<td>• Underpinning knowledge&lt;br&gt;• Mentor&lt;br&gt;• Nursing Team&lt;br&gt;• Medical staff&lt;br&gt;• Specialist Nurses&lt;br&gt;• Drug records&lt;br&gt;• Other departments&lt;br&gt;• Learning resources&lt;br&gt;• Policies and procedures</td>
<td>• Library and staff&lt;br&gt;• Intranet/Internet&lt;br&gt;• Specialist Nurses&lt;br&gt;• Ward team</td>
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What We Expect From You

- To be on time for your shift.
- To let us know if you are going to be late.
- To inform the ward in advance if you are going to be off sick.
- To be well presented and tidy with the minimum of jewelry (see hospital dress code if unsure) to have long hair tied back, to wear flat, sensible and quiet black shoes.
- To wear your I.D. badge.
- To let us know early on if you have any problems, if you feel you cannot confide in your mentor please speak to the Ward Sister or her deputy.
- To show enthusiasm and a willingness to learn.
- To grasp every opportunity to gain as many and varied experiences as possible.
- To play an active role as a team member.
- You are responsible for completing your part of your portfolio.
- To act as a member of the ward team while on placement and as such treat our patients and relatives in an appropriate manner.
- To ask if you are unsure about anything. There will be many unfamiliar words and jargon used which will may seem obvious once they are explained, but uncertainty and guessing can compromise patient care – so speak up!
Ward Philosophy

The staff on Ward 15 believe that nursing care should be delivered according to the following philosophy:

All patients will be treated with respect, dignity and equality regardless of race, sex, religion or special needs. We believe in treating our patients as individuals with their own unique needs and wants. In order to plan care effectively we acknowledge that the patient is the most important member of the team and must be consulted in all decisions affecting their care and treatment, whilst respecting their need for psychological, spiritual and physical support.

The patient is not cared for in isolation, we respect the fact that the patient’s family/carers have the right to be involved in their care if the patient so wishes, and to query any aspect of care provided, voice any concerns and have access to the complaints procedure without fear or prejudice. Concerns and comments about our service are actively encouraged as a means by which to change and improve standards of care. All aspects of care delivery will be based on the ‘Essence of Care’ with standards benchmarked in order to continuously improve our service.

As communication is vital to the delivery of good nursing care, each patient will have a ‘named nurse’ (primary nurse). They will be supported by associate nurses and other healthcare professionals, with whom patients and their families are encouraged to discuss any aspect of care.

Team working is a vital component of hospital care with everyone’s contribution valued and respected. Nursing staff work closely with members of the multi-disciplinary team to ensure that the highest standards of care possible is delivered, thus ensuring continuity of care from admission to discharge by involving other professionals, community services and outlying hospitals as appropriate.

In order to deliver the highest possible standards of care our staff must be trained and educated and continually develop as professionals. All members of staff are committed to updating their training needs, knowledge and education and to keep updated with current nursing research to ensure the best possible care for each patient is delivered according to evidence and research based practice.

Whilst no-one likes to come into hospital, we hope that the standard of care you receive will ensure that you have confidence in a dedicated and committed workforce who continually strive to deliver a high quality service to all patients and their extended families.
Surgical Unit Philosophy

This philosophy has been written by the nurses looking after you to reflect their beliefs, values and attitudes. It is a statement as to how we believe you should be cared for, it reflects the standards of care you should expect and the quality of staff you should be cared for by.

Florence Nightingale said in 1860 “The hospital should do the patient no harm.” Whilst the nursing staff fully endorse this statement, we believe that our philosophy of care should be further advanced to assist the individual to return to a state of well-being acceptable to them following admission, surgery or investigative procedure. It is recognised that this aim is not always possible for every patient depending upon the individuals diagnosis or prognosis, therefore dignity, individual choice, privacy, and a peaceful pain-free demise will be the aim.

Patients will be cared for by highly motivated and well trained staff to the best of their ability following research and evidence based practice, with the aim of enhancing the physical and emotional state of the patient through health promotion strategies, counselling and support mechanisms.

The patients right to choose and to be consulted and rights of consent will be respected at all times. Nursing staff will give relevant information to the patient and relatives/significant others (if the patient so desires) in an appropriate and timely manner.

There will be a team approach to patient care utilising all necessary hospital and community professionals, voluntary organisations and friends/relatives of the patient where appropriate.

Nursing staff will endeavor to act as the patients advocate at all times, thereby protecting them in situations which may be threatening or imposing; or where the patient is unable or unwilling to speak for themselves.
## Who Are We?

<table>
<thead>
<tr>
<th>Role</th>
<th>Name(s)</th>
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<tbody>
<tr>
<td>Ward Sister/Manager</td>
<td>Anne Grayson</td>
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<tr>
<td>Deputy Ward Manager</td>
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<tr>
<td>Primary Nursing Team A</td>
<td>Kay Dunn, Joanne Turner, Jackie Gebhard, Jill Allington-Straughan, Liz Thompson, Bernie Potts, Pauline Anderson</td>
</tr>
<tr>
<td>Primary Nursing Team B</td>
<td>Judith Sinclair, Joanne Winn, Emma England, Helen Hetherington, Faye Parker, Kelly Hankinson, Lisa Anderson, Paula Mailer, Wendy Atkinson</td>
</tr>
<tr>
<td>Ward Clerk</td>
<td>Janet Lawton</td>
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<tr>
<td>Consultant Medical Staff</td>
<td>Miss Sarah Mills, Mr Mike Bradburn and Mr Stuart Falconer Colorectal Surgeons, Mr Gallagher, Mr Bawa – Upper GI Surgeons, Mr Mike Carr and Mr Youseff – Breast Surgeons, Mr Trevor Dorkin and Mr David Thomas – Urologists, Mr Dixon and Mr Postlethwaite – Dental Surgeons, Mr Sher, Mr Jones, Mr John Leitch, Mr Paul Partington, Mr Kevin Emmerson, Mr Mike Reed, Mr Candal-Couto, Mr Gibbons, Mr Muller, Mr Murty – Orthopaedic Surgeons, Dr Mo Dewar – Haematologist, Dr Iain Neilly – Haematologist, Keith Gibbard – Podiatrist, Sharon Bell – Podiatrist</td>
</tr>
</tbody>
</table>
Contact telephone number for any queries or to arrange an informal visit is:

01670 521212 ext. 6169
01670 564169
01670 564170

I hope that the information contained in this letter will prove useful. Please do not hesitate to contact us if you need to.

On behalf of the ward team, we look forward to meeting and working with you.