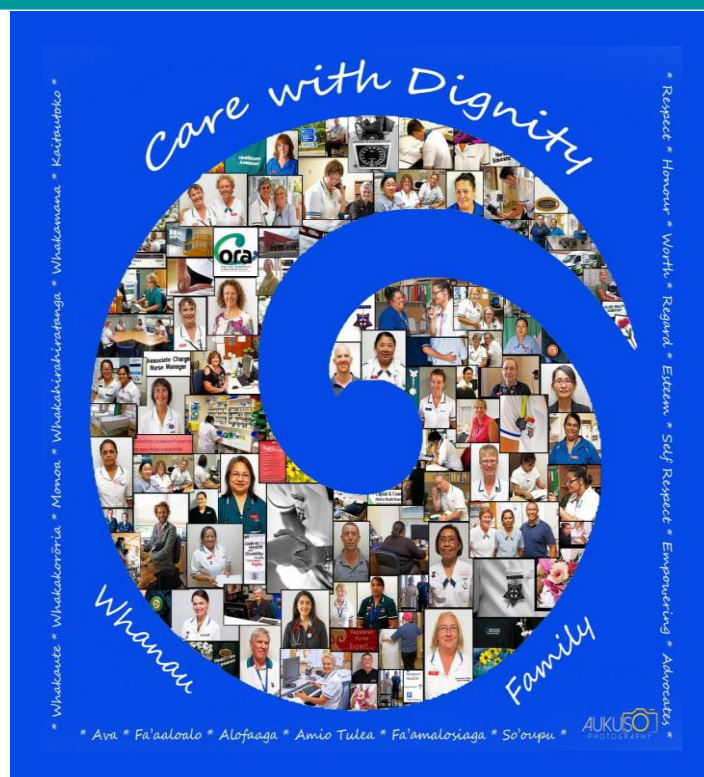


Student Nurses



Ward 6 KPH

Stroke / Neuro Rehabilitation Ward
2020



Student Name:

Kathy Trezise [CCDHB] Karen Bantilan updated Jan 2020, CLN Ward 6

Ward 6 Stroke/Neuro Rehabilitation

Background Information:

Ward 6 is part of Older Adult, Rehabilitation and Allied Health Service (ORA). ORA consists of inpatient wards 4, 5, 6 and 7 at Kenepuru hospital. Wards 4 and 5 mainly focus on health of the older person (HOP) and ward 7 has more of a surgical focus. Ward 6 focuses on rehabilitation. The majority of patients that we get into ward 6 are receiving rehab post stroke, after a brain injury or orthopaedic surgery. There is a dedicated team consisting of physio's, OT's, SLT's, Allied Health Assistance's, Dietitian, Doctors and of course the Staff Nurses and HCA's who all work as a team to achieve the best outcome for the patient.

Rehabilitation nursing:

Rehabilitation nursing is a specialised area of practice committed to restoring and maintaining the optimum level of functioning of the patient and their family/whanau, designed in each individual's situation enabling them to achieve their life goals. Rehabilitation nursing is a philosophy of care. The nurse adopts a holistic approach in meeting their patients' medical, educational, vocational, environmental and spiritual needs. Nursing goals will be set by the multidisciplinary team on an individual basis.

Rehabilitation nurses base their practice on rehabilitative and restorative principles by:

- Managing complex patients in collaboration with other specialists
- Ensuring the patient/family/whanau are informed and supported
- Supporting the patient/family/whanau in goal setting and achievement

Ward 6 is located on the second floor ward block, Kenepuru Hospital

The Charge Nurse Manager, Clinical Nurse Educator, Clinical Liaison Nurse and your preceptor, Academic Liaison Nurse and Colleagues aim to support you during your orientation and placement to ensure that you access all relevant information.

We hope that you enjoy working on Ward 6.

Welcome!!
We are looking forward
to working with you

Contacts

Ward 6		Main contact	Email for main contact	Phone number for ward/Unit
Clinical Nurse Educator		Fiona Martin	Fiona.J.Martin@ccdhb.org.nz	04 9182330
Clinical Nurse Manager		Lisa MacDonald	Lisa.MacDonald@ccdhb.org.nz	04 9182330
Associate Clinical Nurse Manager		Helen Harrison	Helen.Harrison@ccdhb.org.nz	04 9182330
Clinical Nurse(Liaison Nurse(DEU areas)		Karen Bantilan	Karen.Bantilan@ccdhb.org.nz	04 9182330

The Clinical Liaison Nurse is the student contact for Ward 6 and can be contacted via email Karen.bantilan@ccdhb.org.nz.

Your Preceptor/ Clinical Liaison Nurse

During your time in ward 6, you will each be allocated with preceptors who will work alongside to help you develop your skills and enhance your learning. A timetable of the shifts you will be working and who you will be working will be posted at the DEU board in the staff room. It is our goal to keep the number of preceptors you have to a minimum, however due to the nature of nursing, this may not always be achievable. If you have any issues with your preceptor, please do not hesitate to talk to either the CLN, nurse educator, ACNM or nurse manager and we will fix this for you.

During 9 week placements, student nurses are allocated a main preceptor and a second preceptor. We will endeavour to ensure that you mainly work with these preceptors; however, due to shift work this is not always possible.

It is **YOUR** responsibility to ensure the nurse you are working with is aware of your objectives for the day/week. You must provide evaluations and/or other paperwork to your preceptor in a timely fashion (i.e. not on the due date!!). Your preceptor will not complete any evaluations if you give it to them on your last days in the unit.

Dedicated Educational Unit

The Dedicated Education Unit (DEU) model of clinical teaching and learning in Wellington and is a partnership between organisations, the education provider Massey University (Massey) and Whitireia New Zealand (Whitireia) and Capital and Coast District Health Board. Collaboration allows practice areas to provide a more supportive clinical learning and teaching environment for students. DEU's are dedicated to supporting nursing students on clinical placement encouraging incidental and intentional learning modes, and peer teaching. The DEU is based on an Australian model and replaces the Preceptorship model to focus on student learning and curriculum integration.

Preceptor:

Your Preceptor will work alongside you to support your practice and learning during your placement. You will work with your preceptor in a shared care model for your orientation period. This means you will be allocated your own workload and be supported by your preceptor for this time.

Clinical Liaison Nurse

Karen Bantilan is the Dedicated Education Unit Clinical liaison nurse (CLN) for ward 6 and your main clinical contact. Karen will provide you with some structured clinical learning during your clinical placement. Karen has an excellent understanding of your programme and academic study and will work alongside your academic tutors and yourself to support your learning needs and complete formative and summative assessments during your placement.

In addition the CLN will complete all assessments and references relating to ACE for third year students.

If you have any concerns or questions do not hesitate to contact Karen via email Karen.bantilan@ccdhb.org.nz .

Expectations of the Student Nurse while in Ward 6 Stroke/Neuro Rehabilitation – Kenepuru

The shifts in Ward 6 Unit are: **Please arrive to shift 5 minutes before the time**

Morning	:	0700hrs to 1530hrs
Afternoon	:	1430hrs to 2300hrs
Night	:	2245hrs to 0715hrs

We have a few expectations of student nurses working in ward 6 unit:

- ❖ It is expected that you arrive on time for your shift and if you are going to be late or you are unwell and cannot come to call the unit on 04 9182330, **look for CLN or the shift coordinator to inform.**
- ❖ You must complete the full shift that you are allocated to work – if you are unable to do so please discuss this with your nurse, preceptor or nurse educator. A lot of learning occurs at quiet times in the unit!!
- ❖ It is important for your preceptor or the nurse you are working with that he/she is aware of your objectives
- ❖ Due to infection control a clean uniform must be worn, long hair must be tied back and cardigans must not be worn when working in the floor
- ❖ If you are not achieving your objective please see XXX or your preceptor (before the last week in the unit)
- ❖ Please ensure all documentation you need to complete for the polytechnic/university is accomplished before the last days in the unit – your preceptor will **not** complete any paper that is given to him or her if it is given in the last days of your placement.

Remember...

We ask that you respect the Nurses' & HCA's knowledge and experience, our patients and their whanau, as well as all the members of our MDT from the cleaner to the Doctors on ward 6. When in doubt, overwhelmed, confused, uncomfortable or unsure please speak up. There is no such thing as a silly question, also feel free to ask to observe procedures that may be happening. Remember this is your placement, make the most of your learning it will link theory to practice and assist in your development as a student nurse. We are here to support your learning. Effective communication is the key to ensuring an enjoyable and educational placement

Safety Measures in Ward 6

In the event of an emergency situation– **don't panic!**

It is your responsibility to locate your allocated team for that shift and be directed by them.

You must find out this information on your first shift on Ward 6:

- Find out what you should do in the event of a cardiac arrest
- Find out the Emergency Number and staff call system for Ward 6
- What to do in the event of a fire/earthquake?
 - Walk around and find:
 - ✓ Fire hoses/extinguisher, alarms & Exits
 - ✓ Major Incident folder & 'quick flick chart'
 - ✓ Find the Yellow hat—'who wears it, what is it?'
 - ✓ CPR trolley
 - ✓ Defibrillator
 - ✓ Suction & O2 equipment

While you are placed in Ward 6 you will not require a swipe card.

Treasure Hunt

This list is designed to help you become familiar with the environment, but is by no means exhaustive of all the things you will be required to locate.

<input type="checkbox"/> Pyxis Medication Machine	<input type="checkbox"/> Discharge information
<input type="checkbox"/> Controlled Drug cupboard	<input type="checkbox"/> Clinical policies & procedures
<input type="checkbox"/> Admission paperwork/folders	<input type="checkbox"/> "Notes on Injectable Drugs"
<input type="checkbox"/> Linen supplies	<input type="checkbox"/> Roster
<input type="checkbox"/> Clinical Nurse Manager Office	<input type="checkbox"/> Manual BP machine
<input type="checkbox"/> CNE/ACNM Office	<input type="checkbox"/> Suction Equipment
Gym	Scales
<input type="checkbox"/> Intravenous Fluids and equipment	<input type="checkbox"/> Bio-hazard bags
<input type="checkbox"/> Store room	<input type="checkbox"/> Tympanic thermometer & covers
<input type="checkbox"/> Staff tea room	<input type="checkbox"/> OT kitchen
<input type="checkbox"/> Resuscitation trolley	<input type="checkbox"/> Photocopier
<input type="checkbox"/> Dirty utility room	<input type="checkbox"/> Patient charts
<input type="checkbox"/> Clean utility room	<input type="checkbox"/> Laboratory forms
<input type="checkbox"/> Dressing trolley and Materials	<input type="checkbox"/> Alginate linen bags
<input type="checkbox"/> Isolation Equipment	<input type="checkbox"/> Incident Reporting
<input type="checkbox"/> ECG machine	<input type="checkbox"/> Social Dining Room
<input type="checkbox"/> Blood glucose trolley	<input type="checkbox"/> Laundry room
hoists	Unused slings for hoists
<input type="checkbox"/> Where to store your bags	<input type="checkbox"/> Drug Fridge
Steady Sarah	Standing hoist
OT bath/shower room	Patient lounge
Shower chairs	Commode chairs

Objectives

- The provision of appropriate care to the patient and whanau with support and supervision from the preceptor, including
 - ✓ Accurate assessment
 - ✓ Competent implementation of care
 - ✓ Documentation
 - ✓ Referrals

- Gain an understanding of the multidisciplinary team
- Practice good infection control measures
- Pain management
- Fluid management/Fluid balance
- Wound management
- Nasogastric management

Common Presentations to Ward 6

- CVA/Stroke
- Gullian Barre Syndrome
- Complicated surgeries
- Brain Haemorrhage
- Brain Injury i.e. hypoxic brain injury
- Deconditioned patients

Common Medications

DRUG NAME	INDICATION	COMMON SIDE EFFECTS/ ADVERSE REACTION
Metoprolol		
Nimodipine		
Simvastatin		
Atorvastatin		
Warfarin		
Dabigatran		
Aspirin		
Clopidogrel		
Paracetamol		
Quinapril		
Amlodipine		
Furosemide		
Omeprazole		
Digoxin		
Cilazapril		
Metoclopramide		
Ondansetron		
Levetiracetam		

Ward 6 Stoke/Rehabilitation – Student Nurse Orientation book

Carbamazepine		
Citalopram		
Fluoxetine		
Escitalopram		
Mirtazapine		
Melatonin		
Baclofen		
Gabapentin		

Evaluation of Clinical Experience

Nurse: _____ Date of placement _____

Date of Evaluation: _____ Preceptor: _____

This evaluation is intended to offer feedback to the preceptor and their clinical area.

Clinical Learning	1 Strongly Agree	2 Agree	3 Neither agree or disagree	4 Disagree	5 Strongly disagree	Comments
The staff were welcoming and learned to know the students by their personal name						
The staff were easy to approach and generally interested in student supervision						
A preceptor(s) was identified/introduced to me on arrival to area						
One preceptor had an overview of my experience and completed my assessment						
An orientation to the clinical area was provided						
My learning objectives were achieved						
I felt integrated into the nursing team						
I formally met with the "named preceptor" at least fortnightly						
There were sufficient meaningful learning situations in the clinical placement						
How was the Preceptor?						
The preceptor assessed and acknowledged my previous skills and knowledge						
The preceptor discussed my prepared learning objectives						
The preceptor assisted with planning learning activities						
The preceptor supported me by observing and supervising my clinical practice						
The preceptor was a good role model for safe and competent clinical practice						
I felt comfortable asking my preceptor questions						
The preceptor provided me with regular constructive feedback on my practice						

Additional comments:

Please return this form to Charge Nurse Manager or Clinical Nurse Educator

