

Student Nurses



Outpatients Department Wellington & Kenepuru

2022

Student Name:

Welcome

Welcome to all students

We hope you find this guide helpful. We would like you to find your time at Outpatients interesting and enjoyable. Please ask questions as we are here to help you make the most of your time in Outpatients.

Please ensure you give your full contact details to the nurse who is your preceptor.

Your initial contact should be with the Change Nurse Manager or the Associate Charge Nurse Manager at **OPD Reception 8060400**. If you are unable to come to work please call the Change Nurse Manager or the Associate Charge Nurse Manager.

Outpatient clinic vision:

Professional care in partnership with patients to achieve best possible outcomes.

Outpatient Team objectives:

- To provide care and service which focuses on the needs of patients and families
- To advocate for patients, supporting their rights and choices
- To strive to improve the quality of care and service
- To support the work of the team and value individual achievement
- To promote a health environment
- To have a quality focus

Professional nursing practice in outpatients is:

- A specialised expression of caring
- Focused upon the health needs of patients and families
- A supportive partnership between nurse and patient
- Committed to assisting patients to maximize their health potential
- Expressive of the principles of the Treaty of Waitangi – protection, participation, partnership and self-determination.

Outpatients Wellington & Kenepuru – Student Nurse Orientation book

Recognising that health and wellbeing are a subjective state, nurses in Outpatients are committed to assisting patients to maximise their health potential while living with an injury or disability through a partnership of care, support and shared responsibility. Nursing practice is based upon sound theoretical knowledge of nursing and is enhanced by new developments and theories. Nurses are accountable for their practice development and for maintaining a safe working environment.

Clinical Practice complies with clinical policy and procedures stored on the intranet under CapitalDocs.

We enjoy having students in the department and we hope that you enjoy being here.

If there is anything we can improve to make this student placement more enjoyable, please let us know formally or informally.

Written suggestions/comments can be addressed to the Charge Nurse Manager and left in the department.

Welcome!!
We are looking forward to working with
you

Contacts

Outpatients	Main contact	Email for main contact	Extension no
Clinical Nurse Manager		Louise.Corlett@ccdhb.org.nz	80399 (Well) 2838 (Kene)
Associate Clinical Nurse Manager		Gayle.Kaiwai@ccdhb.org.nz	80398 (Well) 2838 (Kene)
Student coordinator (Wellington)		Sue.Sutherland@ccdhb.org.nz	80393
Student Coordinator (Kenepuru)		Yvonne.Stevenson@ccdhb.org.nz Christine.Remfrey@ccdhb.org.nz	2939 2823
Reception Wellington	806 0400		80400
Reception Kenepuru			7205 7091

Your Preceptor/ Clinical Liaison Nurse

You will be allocated one main preceptor, this preceptor will be responsible for organising your timetable and helping you complete your objectives. To provide you with a wide of clinical experience you will work with a number of different clinic nurses. It is **your** responsibility to ensure the nurse you are working with is aware of your objectives for the day/week. Please provide evaluations and/or other paperwork to your preceptor in a timely fashion (i.e. not on your final day).

Expectations of the Student Nurse while in Outpatients

The shift in the Main Outpatients is:

Day Mon-Fri : 0800 hrs to 1630 hrs

We have a few expectations of student nurses working in Outpatients:

- ❖ 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 contact the CNM and ACNM
- ❖ You must complete the full shift that you are allocated to work – if you are unable to do so please discuss this with your preceptor or nurse in charge of the dept. 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 they are 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 Sue Sutherland, Yvonne Stevenson or Chris Remfrey 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 is unlikely to be able to complete any paper that is given to them in the last days of your placement

Safety Measures in Outpatients

Health and safety

Ask your preceptor to show you the Hazard Register so you can see some of the risks of working in the department.

Standard precautions

Standard precautions are observed in the departments. Please ensure you know what this means and where to find the various types of personal protective equipment you might need.

Emergency equipment and procedure

The hospital emergency number is 777

Please be aware of the fire and emergency procedures in the department. Every student is responsible for knowing the whereabouts of emergency equipment.

Please ensure you can locate the following:

- Fire alarms
- Fire hoses and extinguisher
- Fire exits
- Yellow hat and evacuation disc
- Resuscitation trolley
- Oxygen cylinder
- Suction equipment

Reportable events are reported via the 3DHB Square database on the CCDHB intranet home page. There is a quick guide to assist which can be found on CapitalDocs (1.104029). Please discuss the reportable events process with your preceptor.

In the case of fire

If the fire alarm is activated while you are in the department please be guided by the department fire wardens and follow any instructions given by them.

If the intermittent alarm sounds there is no need to evacuate you may remain in the department.

If however a continuous alarm sounds then evacuate the department as instructed by the fire wardens. Evacuation should be to an areas where the alarms are sounding intermittently or not at all. This will normally be the main entrance to the hospital. If in doubt follow the Fire Warden in the yellow hard hat.

Security

As part of our concern for your personal security and safety CCDB encourages awareness of the dangers inherent in any similar sized community. Everyone has the right to feel safe on a CCDHB campus. You can help to keep the environment safe for everyone by:

- Ensuring you know where all the emergency bells are in the different rooms
- Recognising risk and taking steps to avoid potentially hazardous situations
- Making use of the Security Orderly Service and by reporting and suspicious or threatening behavior to security on ext 80600 (Wellington) and ext 7100 (Kenepuru)
- Ringing 777 in the event of a security emergency
- Not bringing valuables or large amounts of cash to work
- Not leaving valuable items unsecured
- Not leaving keys or lock combinations in public places
- Wearing your ID at all times
- Reporting any lost keys or ID cards to Security immediately
- Ensuring all confidential information (paper or on the computer) is kept secure
- Discarding of any confidential information in the blue shredder bin

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"/> Where to store your bags	<input type="checkbox"/> Toilets (staff and patients)
<input type="checkbox"/> Staff tea room	<input type="checkbox"/> Fire alarms, extinguishers, hoses
<input type="checkbox"/> Emergency Trolley	<input type="checkbox"/> Fire exits
<input type="checkbox"/> Linen supplies	<input type="checkbox"/> Spill kits
<input type="checkbox"/> CNM/ACNM Office	<input type="checkbox"/> Reception
<input type="checkbox"/> Store room	<input type="checkbox"/> Medication cupboard
<input type="checkbox"/> Dirty utility room	<input type="checkbox"/> Weight/measure bays
<input type="checkbox"/> Clean utility room	<input type="checkbox"/> Tympanic thermometer & covers
<input type="checkbox"/> Drug fridge	<input type="checkbox"/> Stationery supplies
<input type="checkbox"/> Controlled Drug cupboard	<input type="checkbox"/> Follow me printers
<input type="checkbox"/> Stationery packs	<input type="checkbox"/> Label printers
<input type="checkbox"/> Dressing trolley and Materials	<input type="checkbox"/> Smoking Cessation Information
<input type="checkbox"/> PPE	<input type="checkbox"/> RACS patient info leaflets
<input type="checkbox"/> ECG machine	<input type="checkbox"/> Cancer Society Packs
<input type="checkbox"/> Blood glucose meter	<input type="checkbox"/> Sterile Gloves
<input type="checkbox"/> Oxygen cylinder	<input type="checkbox"/> Lifting hoist
<input type="checkbox"/> Suction equipment	<input type="checkbox"/> Room roster
<input type="checkbox"/> Confidential waste bin	<input type="checkbox"/> Tell us what you think brochure

The Nurse's role in outpatients

Nurses in this department has a varied and interesting role because of the differing nature of the clinics. They also have staff responsibilities such as Health & Safety, Emergency Management, Hand Hygiene, NZNO.

It is the responsibility of the clinic nurse to ensure that all clinic requirements are met. This includes preparation of notes and ensuring that all relevant information e.g., reports, X-rays, discharge summaries, letters and required equipment is available.

The nurse who is usually the key nurse for that specialty manages the running of the clinic. They act as the patient advocate and may be required to chaperone the patient. The outcome of the visit is recoded in the clinic letter which is kept on the Clinical Record and a copy is sent to the GP.

Time between clinics is used to prepare for future clinics, respond to queries and undertake other necessary tasks.

The Student's role in outpatients

This Orientation Handbook should assist you to formulate your Learning Objectives early on in your placement. You can review them with your preceptor.

Much of your time will be spent observing but whenever possible we encourage you to be involved.

The nurse you are working with will guide you as to what you can do. Please ask if there are any particular procedures you would like to see.

We would encourage to note the process by which patients have come to Outpatients. Where they are in the hospital system and how their appointments impact on their day to day lives especially if they attend frequently.

Think about how the Outpatient Department fits into the hospital cycle of care.

On arrival each day please attend the morning meeting at 8.05 and report to the nurse to whom you are allocated. Find out if you can help prepare for the clinic. Stay with your nurse and let them know where you are and if you have to leave the department at any time. Where possible and if the patient consents, students are encouraged to sit in on clinics and observe.

Once the last patient has left and the doctors have finished you can help the nurse complete the clinic, tidy away the notes and equipment.

Health care assistants

The healthcare assistants are part of the nursing team. They manage the stocking and stores in the department and change the bed linen. They also run clinics under the direction and supervision of the Registered nurses.

Patients' rights

The Code of Health and Disability Services Consumers' Rights in English and Māori are prominently displayed the department. There are Cook Island Māori cards available.

We try to keep patients well informed about what is happening in clinics. We have a board on which the clinic nurse will write if a clinic is running late and by how long. Nurses will frequently go into the waiting room and talk to individual patients if they notice they are getting upset about a clinic running late.

Finding policies

Look on CapitalDocs on the intranet for the most up to date policies. It would be good to familiarize yourself with these:

- Dress code CapitalDocs 1.1092
- Control of hazardous substances CapitalDocs 1.1865
- Consumer Complaints, Advocacy and Code of Rights CapitalDocs 1.8761
- An individual's right to access their own personal information CapitalDocs 1.103976
- Medical records (Electronic and hard copy) content and documentation CapitalDocs 1.1147
- Use of email, texting and instant messaging CapitalDocs 1.100324
- Nursing Documentation – Outpatient Services, Surgery, Women and Children's CapitalDocs 1.104025
- Chaperone for clinical examination including intimate clinical examination (adults) CapitalDocs 1.621
- Use of Interpreting Services CapitalDocs 1.2052
- Informed Consent (Adults and Children) CapitalDocs 1.2706
- Unregulated Health Care Workers (Kaiāwhina): Health Care Assistants & mental Health Support Worker Role and Responsibilities CapitalDocs 1.1694

Information about conditions and procedures:

There are guidelines for particular clinic in the department plus books and pamphlets relating to different conditions and procedures in some of the clinics. You should find these interesting and helpful and are welcome to look at any of them. We ask that books stay in the department please.

Kenepuru clinics

- Orthopaedic/fracture
- Ear, nose and throat (ENT)
- Medical
- Infectious diseases
- Dermatology
- Diabetes/Endocrine
- Breast surgery
- Psycho geriatrics/Geriatrics
- General surgery
- Neurology
- Vascular
- Podiatry (diabetes)
- Assessment, treatment and rehab (AT&R)
- Ophthalmology
- Genetics
- Surgical and dermatology biopsy
- Respiratory
- Renal
- Oncology
- Haematology
- Cardiology
- Orthotics

Wellington clinics

- Dermatology
- Neurosurgery
- Cardiothoracic
- Vascular
- Ear, nose and throat (ENT)
- Breast surgery
- Surgical biopsy
- Bariatric Surgery
- Upper Gastro Intestinal (GI)
- Colorectal & Manometry

Function

The Outpatient Department (OPD) is used by people who have been referred for a specialist opinion as well by those who have been hospitalized and are returning for follow-up. Referrals for appointments come from general practitioners (GPs) and other specialists including hospital consultants and registrars, community nurses or from wards and departments.

Clinics

Clinics are held Monday to Friday. In general morning clinics start at 8.30 and afternoon clinics at 13.30 hours. Sometimes clinics run over a full day. Clinics are held weekly to monthly so you may not have a change to work in a particular clinic. You will be rostered so you see a variety of clinics. If you have queries about anything please ask the nurse you are with or your preceptor.

Outcomes

There are several possible outcomes following an appointment: patients may be discharged to their GP, reviewed at a later date with or without investigations (e.g., blood tests, x-rays) or they may be referred onto another service (e.g., dietetics, plastic surgery). They may be placed on a surgical waiting list or, less commonly, admitted acutely to the ward.

Hours of operation

Nurses and Health Care Assistants work between 07.30 and 18.00. Usually finishing at 16.30.

Medical and allied health staff

Each specialty has at least one consultant. There may be a number of registrars and house surgeons attending a clinic. A dietitian and specialist nurses are attached to some clinics. There may be other Clinical Nurse Specialists e.g., wound care, stoma care, breast, infectious diseases (ID), attached to various surgical, ulcer, vascular and ID clinics.

Evaluation of Clinical Experience

Student: _____ Date of placement _____

Preceptor: _____

This evaluation is intended to offer feedback to the preceptor and their clinical area please
Please return this form to Charge Nurse Manager.

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: