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1. Introduction

Welcome to the Kenepuru Hospital Medical Day Ward (MDW). We are looking forward to working with you and supporting you in your practice development and learning within this clinical area.

We have designed this student programme to enable you to learn about the purpose and values of the MDW, our patients and their conditions, the treatment they receive and the nursing skills required to manage their care.

Our team of Registered Nurse's (RN's) acknowledge the prior learning you bring to our area of practice. We trust you will make the most of every opportunity as you continue to develop your critical thinking skills, linking theory to practice. Key to ensuring you have an enjoyable and educational placement is effective two-way communication. We aim to be approachable and listen to any concerns you may have. Positive comments are good for us too (Foley, 2013).

We hope that you are happy being part of our team and benefit from your placement with us.

Contact details:

Please email the student contact, Nano Tunnicliff or call the unit for placement details

Hospital Switchboard		2370179
Medical Day Ward		04 385-5999 extension 7228
Nurse Manager	Lisa MacDonald	DD – Ext 7028
Associate Charge Nurse Manager	Hayley Morum	Hayley.Morum@ccdhb.org.nz 0272063260
Nurse Educator DEU	Eugene Andrada	Eugene.Andrada@ccdhb.org.nz 0277115036
Student contact in MDW Facilitator	Nano Tunnicliff	Nano.Tunnicliff@ccdhb.org.nz

2. The Medical Day Ward

Our Patients

The MDW provides an inpatient service to administer intravenous medication and perform other procedures to enable a patient to have a better quality of life. Most of our patients have chronic health conditions that require ongoing, regular visits, but we also have a significant number who receive a one-off or a short-term treatment (e.g. 1 week) and are then discharged from the service.

Our patients are community based, ranging in age from young adults to the older person, who arrive at the ward for a day only procedure – an infusion, a transfusion or an injection. These treatments can take anywhere from 1 - 7 hours to administer so a patient can be with us for the whole day. This makes the ward a busy, ever changing place to work.

A patient follows a pathway from referral through treatment to discharge from the ward. There are many parts to this process, so this is best described in the following simple workflow diagram. Take a few minutes to read the following pathway to learn about the steps a patient undertakes to receive their treatment and the various people and teams who interact with them or support their pathway throughout.

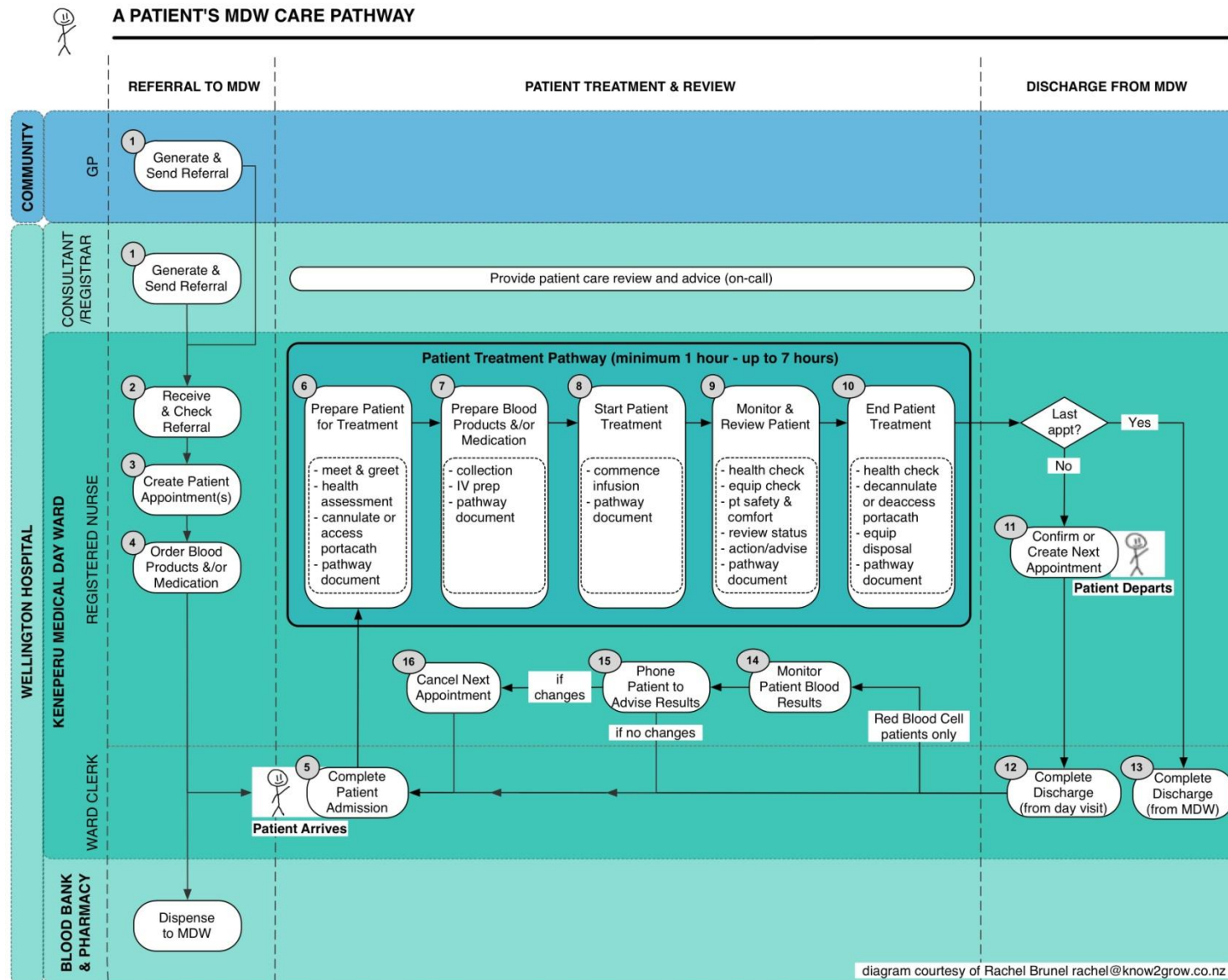


Figure 1 - MDW Patient Care Pathway

A few notes to support the diagram:

1. Step 3: Currently patients are phoned by the MDW RN to determine the day and time which best suits them to be booked for an appointment, within any allowable limits of their treatment timelines. We also discuss and determine any special needs the patient may have that we need to cater for (e.g. ambulance transfer, bed or chair, mobility or oxygen needs etc.). A scheduling process is being implemented in the near future but RN discussion with the patient is a continuing priority.
2. Step 5: Patients check in to the MDW Reception passing through the Outpatient Department area on arrival.
3. Step 7: Blood products dispensed from the Blood Bank at Wellington Hospital are delivered to the Kenepuru Laboratory fridge. The MDW RN collects the required products just prior to the commencement of an individual patient's treatment, as required. Other medications are sent directly to the MDW from the pharmacy or the patient brings their own medication which has been issued from the community pharmacy.
4. Step 14: For all patients' prescribed Red Blood Cells, the RN assesses and evaluates their blood results taken prior to their next treatment to determine if that treatment is necessary. The patient is phoned to advise them of the results and whether the treatment is required.

A Nurse-Led Infusion Clinic

Nursing care in MDW is innovative, specialised and team focused. All treatments and procedures are undertaken by RN's within the RN scope of practice. A Medical Registrar based within Kenepuru hospital is on-call at all times, otherwise the operation of the ward is the responsibility of our RN team. A consultant Medical Oncologist comes to do a clinic on Tuesdays with a Registrar to see patients prior to chemotherapy treatment.

Our patients' IV therapy based treatments are represented as an **Umbrella of Care** as follows:

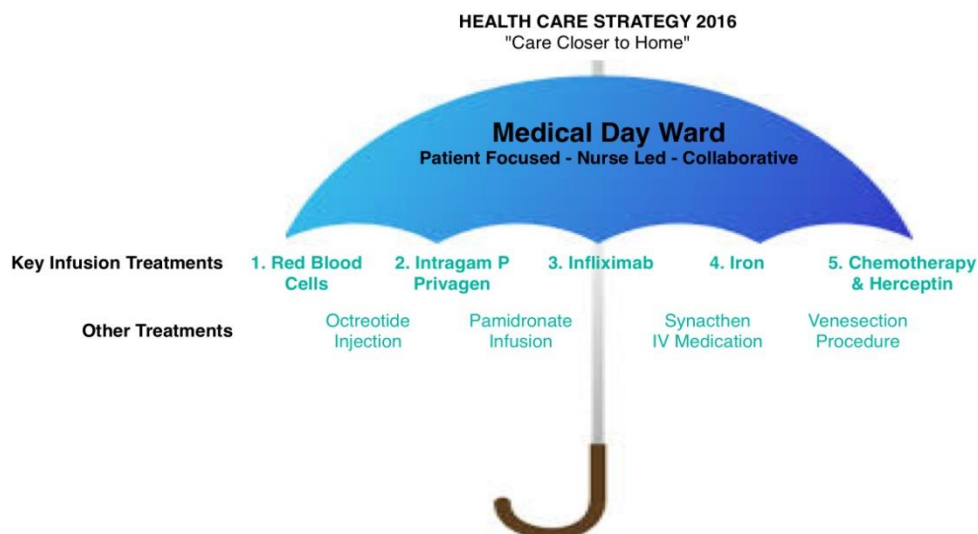


Figure 2 - MDW Umbrella of Care

We also conduct Natalizumab, Zolendronic Acid, Ocrelizumab, Goserelin (Zoladex) and Fulvestrant treatments. As new treatments are funded so too is the range of products that we can administer in the outpatient setting.

The ward operates Monday to Friday 8am to 4:30pm and caters for up to 20 patients/treatments over the day in a 3 cubicle area. The area is located on the ground floor near the main hospital entrance and passing through Outpatient Department. The unit has 15 chairs and 3 beds. It also has additional 2 chairs in the consult rooms. Treatment days vary as follows:

Intragam P, Privigen, Infliximab, Iron, Natalizumab, Ocrelizumab, Therapeutic Venesections	Monday to Friday
Chemotherapy	Tuesday and Wednesday
Herceptin	Wednesday
Red Blood Cells	Wednesday to Friday

MDW Treatment Days

Individual care or patient preferences are considered where possible, but typically allocation of a patient and their care is decided by the RN's at the beginning of the shift and a RN takes a patient in turn as they arrive.

A RN is typically assigned 2-6 patients and their treatments per day.

Essential to our provision of care is our collaboration with all members of the Multi-Disciplinary Team (MDT) and Health Care Team (HCT) from community to tertiary hospital and hospice level care. This team approach enables better integration of services and patient experience.

The nurse, in addition to managing the treatment is an advocate, supporter, coordinator, educator, team member and assessor. The clinic is committed to providing support to patients and their Whānau to achieve their optimum level of functioning and maximise their independence in the community. Respect for the patients and colleagues are an integral part of our nursing practice.

3. Student Programme

Learning Goals

We appreciate that you will develop your own objectives, however to help focus your learning and to guide preceptors in their teaching, **the MDW also has set Goals of Learning** for you to achieve. The purpose of these goals is for you to learn how the MDW operates, and to gain the essential knowledge and clinical skills required to provide safe care for our patients.

- GOAL 1:** To be able to describe how THE MDW operates as a nurse-led clinic and how the clinic is of benefit to the patient.
- GOAL 2:** To be able to discuss the five key MDW patient treatments.
- GOAL 3:** To be able to demonstrate the clinical skills required to administer the five key MDW patient treatments.

Note: The MDW learning goals are negotiable depending on your level of experience and the duration of your placement (*refer Appendix for detail and sign off*).

Learning Structure

The MDW operates with RN's who typically work on a part time basis therefore our student programme has been designed to provide consistent support and a learning structure to best allow you to achieve your learning objectives (Henderson & Eaton (2013).

The model is presented in the following figure using the same Umbrella of Care model introduced in the previous section:

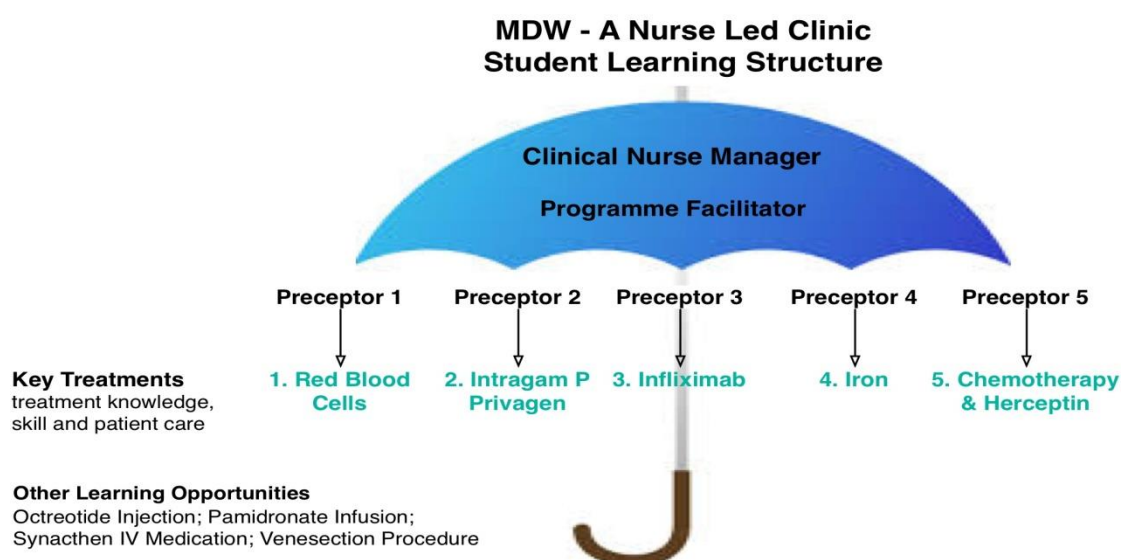


Figure 3 - MDW Student Learning Structure

Roles

1. The **Nurse Educator** (NE) has overall responsibility for the student programme.
2. The **Facilitator** (who is also an MDW RN) will be responsible for:
 - a) Welcoming and introducing you to the MDW.
 - b) Coordinating your placement and with the team assigning your preceptors.
 - c) Clarifying your professional responsibilities whilst in MDW (i.e. hours, dress code, and conduct).
 - d) Acting as the key point of liaison with your university tutor and the NM.
 - e) Referring any professional issues with key persons to the NM.
 - f) Being available for discussion with you and your preceptor(s) as required.
 - g) Assessing and sign-off of the MDW learning goal 1.
 - h) Evaluating the programme throughout with the preceptors and NM
 - i) Completing the final evaluation of your learning and the student programme.
3. Your **RN Preceptors** will be responsible for:
 - a) Teaching you under direct supervision, the steps, the knowledge and the clinical skills required to provide a treatment for a patient on the MDW pathway. One RN preceptor will be assigned a specific infusion treatment.
 - b) Helping you meet your learning objectives through a critical thinking, reflection and problem solving approach (Walker, Dwyer, Moxham, Broadbent & Sander, 2013).
 - c) Liaising with the facilitator regarding your progress and evaluation or with your tutor or the NM, as required.
 - d) Referring any professional issues with key persons to the Facilitator or NM.
 - e) Maintaining open communication with you at all times.
 - f) Being accountable for the outcome of the patient care.
 - g) The assessment and sign-off of MDW learning goals 2 and 3.
4. As the **Student Nurse** you will be responsible for:
 - a) Meeting all student nurse professional responsibilities, standards and conduct.
 - b) Informing the facilitator and preceptors of your learning objectives.
 - c) Liaising with the facilitator on your progress
 - d) Achieving the programme objectives

Learning Schedule

To keep things as simple as possible, you will ideally be assigned only two preceptors/treatments each week. Your preceptor may have 3-4 patients having different treatments over a particular day, however your focus will be the specific treatment the individual preceptor is assigned to teach you.

Please refer to the Appendix for your preceptor assignment record sheet.

Day One

- the first day is spent with the facilitator who will welcome you to the ward and the nursing team and will introduce you to the student programme
- you will be informed of all aspects of the ward's health and safety and hazard management procedures and you'll participate in an emergency scenario
- you will complete a 'treasure hunt' to help you orient you to the ward areas, equipment, documentation and emergency resources
- you will be introduced to our patient pathway by working with the facilitator in their patient care
- you will be given the preceptor roster for the term of your placement

Weeks 1-4

- You will work with each of the assigned preceptors in their patient care to achieve your personal objectives and the MDW Goals of Learning.

At the end of each Week

- your learning progress and how the programme is working for you will be evaluated in discussion with the facilitator

Final Week

- The focus in this final week will be you taking on a patient load, if appropriate for your level of practice. An RN will provide direct supervision of your patient care, treatment delivery and administrative tasks during this time, but it will be your responsibility to apply what you have learnt.
- A final evaluation with the facilitator is set for the afternoon of your last day. This will be a session where we evaluate your practice development as well as providing you with an opportunity to feedback on the effectiveness of MDW student programme.

4. Useful Resources

Emergency and Key Contact Numbers

Emergency Number	777
Ward Phone Number	04 385-5999 extension 7228 or 9182228 direct dial

CCDHB Documents

These can be found on the located on the intranet under “Capital doc”.

1. IV Therapies Administration and Management (doc no 1.101584)
2. Blood Component and Plasma Product Transfusion (doc no 1.369)
3. Informed Consent (doc no 1.2706)
4. Hand Hygiene policy (doc no .101890)
5. Workplace Bullying, Victimisation, Discrimination and Harassment (doc no 1.1094)
6. Direction and Delegation of Care by Registered Nurses/Midwives (doc no. 1.100860)

5. References

1. Foley, V., Myrick, F. & Yonge, O. (2013). Intergenerational Conflict in Nursing Preceptorship. *Nurse Education Today*, 33(9), pp. 1003-1007.
2. Henderson, A., Eaton, E. (2013). Assisting Nurses to Facilitate Student and New Nurses Learning in Practice Settings: What ‘support’ do nurses at the bedside need? *Nurse Education in Practice*, 13(3), pp. 197-201
3. Walker, S., Dwyer, T., Moxham, L., Broadbent, M. & Sander, T. (2013) Facilitator Versus Preceptor: Which offers the best support to undergraduate nursing students? *Nurse Education Today*, 33(5), pp. 530-535.

6. Appendix Day 1 ORIENTATION DAY

The initial day of your placement is spent with the Facilitator of the Learning Programme.

The aim of the day is provide you with a knowledge base and support so you feel confident and safe.

The day will focus on the learning programme and patient treatments, meeting the preceptors/ward administrator, orientating you to the ward environment and identifying safety measures. By the end of the day you will be assisting with patient care.

The staff/patient ratio on this day may require the Facilitator to be assigned patients but this will be a lesser workload than usual and only after the first hour of the shift.

As follows are the activities for the day. There is no set order to how these are achieved. Flexibility is key. You will have the opportunity to work on these independently.

We hope you enjoy your introductory day.

- ☐ Meet and greet the MDW staff
- ☐ Orientate to the Ward environment
- ☐ Discuss the ‘cold chain’ management of medication
- ☐ Discuss the emergency evacuation plan
- ☐ Discuss the *Learning Programme*
- ☐ Identify your learning objectives
- ☐ Clarify professional responsibilities
- ☐ Identify your preceptor assignment roster
- ☐ Commence the *Treasure Hunt*
- ☐ Participate in a patient emergency scenario
- ☐ Participate in patient care and use of the patient pathway

Appendix: Day 1/2

‘TREASURE HUNT’

Clinic Room

<input type="checkbox"/>	Spill Kit	<input type="checkbox"/>	Notes on Injectable Drugs
<input type="checkbox"/>	Medication cupboard	<input type="checkbox"/>	Needle Grippers
<input type="checkbox"/>	Medication fridges	<input type="checkbox"/>	Medication added labels
<input type="checkbox"/>	IV fluid store	<input type="checkbox"/>	IV Dressings
<input type="checkbox"/>	IV syringes/tubing/needles	<input type="checkbox"/>	Dressing packs
<input type="checkbox"/>	Vacutainers	<input type="checkbox"/>	Sterile Gloves
<input type="checkbox"/>	Alcohol wipes	<input type="checkbox"/>	Tympanic thermometer covers

Health & Safety

<input type="checkbox"/>	Emergency Exit	<input type="checkbox"/>	Oxygen and suction equipment
<input type="checkbox"/>	Emergency cabinet (Civil Defense)	<input type="checkbox"/>	Oxygen isolation ‘Shut Off’ Valve
<input type="checkbox"/>	Resuscitation trolley	<input type="checkbox"/>	Patient call bells
<input type="checkbox"/>	Bio-hazard bags	<input type="checkbox"/>	Emergency bells
<input type="checkbox"/>	Fire Alarm	<input type="checkbox"/>	Yellow emergency hats
<input type="checkbox"/>	Fire extinguishers	<input type="checkbox"/>	Emergency Response Flip Chart
<input type="checkbox"/>	Linen supplies		

Equipment

<input type="checkbox"/>	Manual BP machine	<input type="checkbox"/>	Weighing scales
<input type="checkbox"/>	Obs Machine	<input type="checkbox"/>	Bedpans / urinals
<input type="checkbox"/>	IV trolleys	<input type="checkbox"/>	Photocopier / Fax machine

Documents

<input type="checkbox"/>	EWS chart	<input type="checkbox"/>	IV Immunoglobulin Assessment
<input type="checkbox"/>	Laboratory/blood requests	<input type="checkbox"/>	Medication charts
<input type="checkbox"/>	A109		

Resource Files

<input type="checkbox"/>	Medical Oncology & Hematology	<input type="checkbox"/>	Ferinject
<input type="checkbox"/>	IVIG	<input type="checkbox"/>	Medication information pamphlets
<input type="checkbox"/>	Infliximab	<input type="checkbox"/>	Natalizumab and Ocrelizumab

Staff Facilities

<input type="checkbox"/>	Toilets	<input type="checkbox"/>	Lockers
<input type="checkbox"/>	Uniforms		

Non-MDW Facilities

<input type="checkbox"/>	Ambulance Bay	<input type="checkbox"/>	Radiology reception
<input type="checkbox"/>	Accident & Emergency	<input type="checkbox"/>	Laboratory
<input type="checkbox"/>	Pharmacy	<input type="checkbox"/>	Vibe cafe
<input type="checkbox"/>	Coffee Spot		

Student/ Preceptor Assignment

Preceptor Name	Assigned Treatment	Assigned Week/Days

MDW: Goals of Learning

Goals	Achieved (Y/N)	Signature & date
GOAL 1: A Nurse Led Clinic		
Provide an example of how the MDW functions as a nurse led clinic and how the patient benefits.		

GOAL 2: Patient treatments		
Treatment 1 - Red Blood Cells		
Describe the patient's condition/disease and the indication for requiring a blood transfusion. Discuss risk of a transfusion how you would help manage this.		
Treatment 2 - Intragam P/Privigen		
Describe the patient's condition/disease with emphasis on autoimmune disorder and its effect on the patient's quality of life.		
Treatment 3 – Infliximab		
Describe the patient's condition/disease and the effect of this on their quality of life and needs during admission		
Treatment 4 – Natalizumab		
Describe the patient's condition/disease and the effect of this on their quality of life and needs during admission		
Treatment 5 - Iron		
Identify the indication for an iron infusion and the types of product.		
Treatment 5 - Chemotherapy and Herceptin		
Discuss the effects of chemotherapy to your Nurse Preceptor. Describe the risks of toxic medication to you and how safety is managed in the MDW.		

GOAL 3: Clinical Skills Competence	Achieved Y/N	Signature & date
1. Check that oxygen and suction equipment is functioning		
2. Check all documents available - PIF, pathway, EWS, referral, informed consent, medication chart, patient ID sticky labels		
3. Demonstrate admission and assessment of patient		
4. Demonstrate taking of vital signs		
5. Check medication (5 Rights + Documentation)		
6. Assemble fluid and line IV line		
7. Insert tubing into pump and set rate/volume/time		
8. Connect infusion to cannula		
9. Commence infusion		
10. Monitor patient as per MDW protocol		
11. Flush line		
12. Disconnect infusion when completed		
13. Remove IV cannula		
14. Dispose of equipment		
15. Restock IV trolley		
16. Participate in emergency scenario (anaphylaxis) day 1		

Note: All tasks relating to pump management e.g. changing data must be done under direct supervision of an IV certified RN. (DON office instruction, ccdhb October 2016)

Documentation		
1. Check referral documents are correct		
2. Complete pathway documentation		
3. Arrange date and time for next appointment		
4. Complete blood and lab request forms		
5. Complete EWS chart correctly		
6. Check patient's blood results on MAP		
7. Fax medication requests to blood bank and pharmacy		
8. Record fridge temperatures		

Observation		
1. Insertion of IV cannula		
2. Taking bloods and labelling blood tubes		
3. Accessing of Portacath		
4. Venesection procedure		
5. Changing PICC or CVC dressing		

NOTE

Goal 1 (Nurse Led Clinic) will be assessed and signed off by the Facilitator.

Goal 2 (patient treatments) will be assessed and signed off by the preceptor assigned to the specific treatment. If your placement is less than four weeks then you will not be expected to complete all (5) of the treatment objectives.

Goal 3 (clinical skills) can be assessed and signed off by any of the assigned preceptors. Skills will be learnt across each of the treatments with all preceptors.

Competence with a task is evaluated but is to be related to your assessment, intervention and evaluation of the patient's progress (i.e. "critical thinking").

It is expected that you will access **policies and guidelines** to direct your nursing care.

Student Programme Evaluation

Please return this form to the programme facilitator

Student Name (optional) _____

Date _____

Evaluation of Preceptors

Points to consider: approachability and support, provided opportunity to complete my objectives, knowledge and skills, provided constructive feedback

Your Comments:

Evaluation of Student Programme

Points to consider: structure to achieve the learning objectives, value of the facilitator role, usefulness of this booklet, evaluation process. Your ideas for Improvement.

Your Comments:

Thank you for completing this form. Your feedback is valuable to the continued development of this programme.