

Your student placement within Adult Critical Care

A phenomenal learning opportunity



Adult
Critical Care



Your name	
Your Mentor	
Co - Mentor	
Your sign off Mentor	
Student Champion	
Unit Education Lead	
Date that you will be with us	
Placement	
Telephone number	
Where is this unit	

What you bring with you?

Depending on where you are in your training programme you will bring with you a range of experience and skills. All of these will have relevance to this placement and you will be able to draw upon them to aid and contribute to your experience with us.

What you can expect

Critical Care - This can be quite scary but also very exciting

It all goes on behind closed and locked doors. This is not normally an area that staff can just walk into and many don't want to!!

It can be daunting, challenging, upsetting, rewarding and lots of other things as well.

Don't think you are alone in feeling any of these as we all started somewhere and all of us had a first day.

We hope by having a rewarding placement that you will consider critical care as one of your options when you register.

As a student you will be supernumerary at all times and remain under close supervision by one of your mentors or another experienced nurse. You will have two allocated mentors (one may be your sign off mentor) and shifts will be arranged so that you work with these individuals.

On your first day we will orientate you to the unit – fire exits, toilets, where the tea and coffee are?

What we need you to do?

Essential numbers you need to know as you may be asked to call them	
Crash	2222 – state where you are
Fire	6666 – state where you are
Security	9999 – state where you are

Off duty

Come and see us before you start, shifts are negotiable but many staff choose to work what we call long shifts. Have a think about how you will get the most out of this placement and plan your placement to achieve your objectives.

Sickness

Who do you contact – get the numbers. If you are unable to attend you must phone the co-ordinator on the ward and you must also phone the university to let them know for their records.

Be alert

Safety is paramount and we will take you through some of this but you are the eyes and ears for your patients.

Ask lots

You will never learn if you do not ask.

Get as involved as you can

Again if you don't seek learning opportunities you will not get the best from this placement.

- Observations
- Care of the devices
- Handover
- Documentation
- Unit based procedures
- Wound Care
- Insertion of devices
- Escorting patients to theatre
- MRI and CT Scans
- Collection of Patients Post Operatively
- Session in theatre to see an operation & follow patient to ICU
- Working with the therapists within the Multi – Disciplinary Team

Wear your uniform

In accordance with LHTT requirements – things we have bug bears about – earrings (Only one small pair in ear lobes), No additional nose or brow or ear or lip decoration.

http://thehub.leedsth.nhs.uk/Documents/PoliciesandProcedure/Forms/AllItems.aspx?Paged=TRUE&p_FileLeafRef=Decontamination%20of%20Flexible%20Endoscopes%20Procedure%2edoc&p_ID=338&PageFirstRow=31&&View={5A718C4E-24EE-4A3E-A83D-1E18094ABEAC}

Shoes

Black and smart (No trainers)

Name badges

Wear it but equally if you see other staff not wearing theirs ask them who they are. Remember most of our patients cannot ask so we have to ask for them.

Security for your belongings

Not a lot – don't bring valuables to work – nowhere is safe. We do provide some lockers to store bags etc. But just be aware that there are lots of people around and in the units

Nursing handover of care

The process by which we transfer care from one member of staff to another – this is about ensuring we get to hear about the progress the patient has made, the challenges facing the patient, the risks we need to be aware of and how we will care for the patient in the coming hours. This can occur at any stage of a day and should be an interactive process between the nurses / practitioners. It is not a passive process, it should challenge you to think about the care needed and how you can deliver it to the patients. It is your opportunity to ask questions, to seek reassurance about things you may be unsure about and to have a chat with your colleagues.

We don't often take notes at our handovers, but if you want to please ensure they are thrown away in the confidential waste at the end of a shift.

Confidentiality

We are very protective about our patient dignity and right to confidentiality. Most of our patients can't tell us who they want us to talk to and what they want us to tell them. As a student there is no expectation for you to relay information about patients, please seek assistance from the registered workforce if relatives ask you for information.

Safeguarding

Our patient group is extremely vulnerable due to their clinical conditions and dependency on us as professionals to care for them. Please be mindful of this when interacting with them, be empathetic for their situations and mindful when talking to visitors about them.

Please respect them at all times and if you see anybody not doing this, please speak to your mentor or the nurse in charge as soon as possible.

Who's Who

Examples of uniforms you may see



Senior Nurse



Staff Nurse



Nursery Nurse



Apprentice
Clinical Support
Worker



Healthcare
Assistant



Junior
Sister



Senior
Sister



Research
Nurse



Nurse
Consultant



Matron

So what is critical care?

This is where very sick patients come to be taken care of and receive specialist and often highly technical treatments

You will hear us talk about levels of care – this is what we mean.

Level 0

- Patient requires hospitalisation and needs can be met through normal ward care

Level 1

- Patient recently discharged from a higher level of care
- Patients in need of additional monitoring, clinical input or advice
- Patients requiring critical care outreach support
- Patients requiring staff with special expertise
- Needs can often be met on a normal ward, with increased frequency of monitoring and care

Level 2 (High Dependency - 1 nurse: 2 patients)

- Patients needing single organ system support (whether on admission or as a step down' from level 3 care)
- Patients needing pre-operative optimisation
- Requiring invasive monitoring
- Extended post-operative observation
- Patients moving to step down care

Level 3 (Intensive Care - 1 nurse: 1 patient)

- Patients needing advanced respiratory monitoring and support
- Patients needing monitoring and support for 2 or more organs
- Patients with chronic impairment of one or more organs sufficient to restrict daily activities (co-morbidity) and who require support for an acute reversible failure of another organ system.

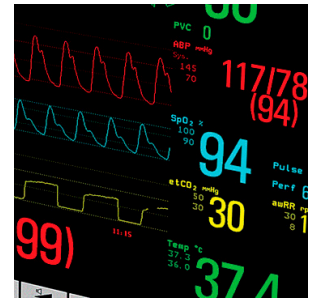
Monitoring

One of the most visually different things you will notice is the amount of equipment in use. Across all the units patients are continually monitored (some of the screens are different).

Monitoring allows to track immediate changes in patient condition (remember they can't often say they don't feel well).

Monitoring allows us to assess the effectiveness of treatments we are giving and how we might alter this to improve a patient condition.

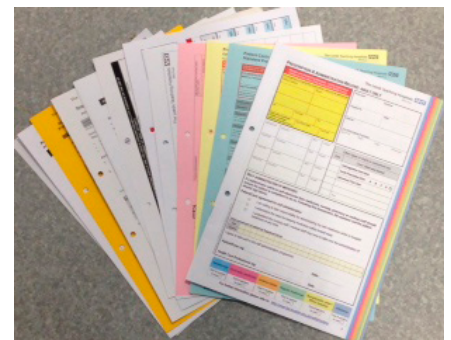
We will take you through the monitoring and how to interpret some of it.



Paper work

We recognise that there is a lot of paperwork in critical care. We review them regularly to ensure they are reflecting how we assess, plan, deliver and evaluate the care our patients need.

We do not expect you to be the signatory to these documents but you can contribute, all entries will be overseen by a registered nurse.



Safety

Paramount and cannot be stressed enough.

Safety includes using cot sides, high staff to patient ratios, close attention to medication, close attention to infection prevention and many more.

We will ask you to perform a hand hygiene assessment as you start on the unit.

Wearing gloves and aprons are required many times on a shift.

We often place patients in isolation for their own protection and for protection for others. This brings its own challenges for patients, relatives and staff.

Sources of Information

Marsden Manual -Contains detailed information about the performance of nursing procedures. Accessed via the trust intranet site on:

[*http://lthweb/sites/nursing-and-midwifery/royal-marsden-manual/royal-marsden-manual*](http://lthweb/sites/nursing-and-midwifery/royal-marsden-manual/royal-marsden-manual)

LTHT Policies and procedures are available through Leeds Health Pathways on the Intranet.

Quality Improvement Initiatives Groups -Check out the info boards as to who, what and where you can tap into information.

ACC web pages - We have our own site, have a look and see what you can find. Let us know what you would like?

[*http://lthweb/sites/adult-general-intensive-care*](http://lthweb/sites/adult-general-intensive-care)

BNF and datasheet Compendium are around in book form; the BNF is also present in searchable form on the Intranet. They contain information about drugs - properties, preparation, administration, compatibilities, side effects, assays etc. If you are ever in doubt about giving a drug, don't depend on colleagues; consult these sources

Resource files - There are various files in the desk at the bed space, in the bookcase on the unit, on the bookshelf in the coffee room and in the resource room, that maybe useful.

The staff on each unit are very knowledgeable and are keen to share their knowledge.

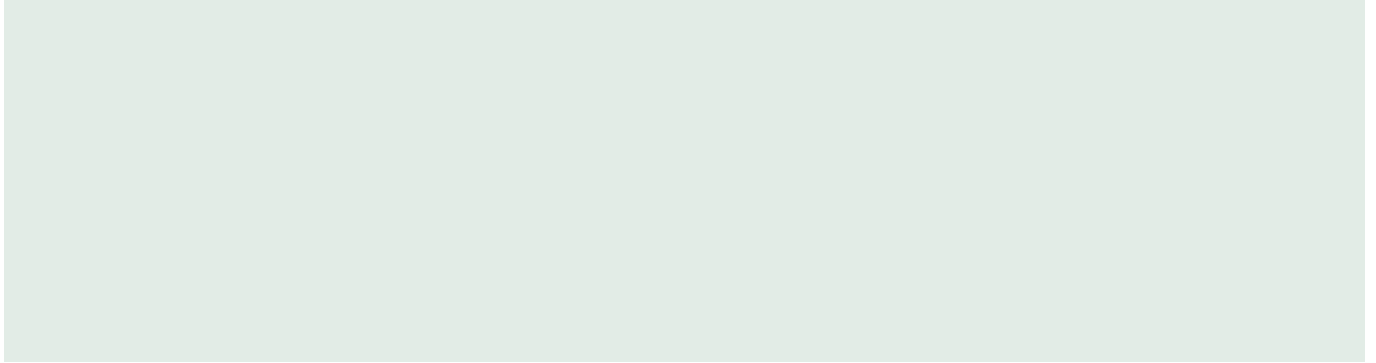
Tell us about your experience on our CSU

Did you get to work with your mentors?

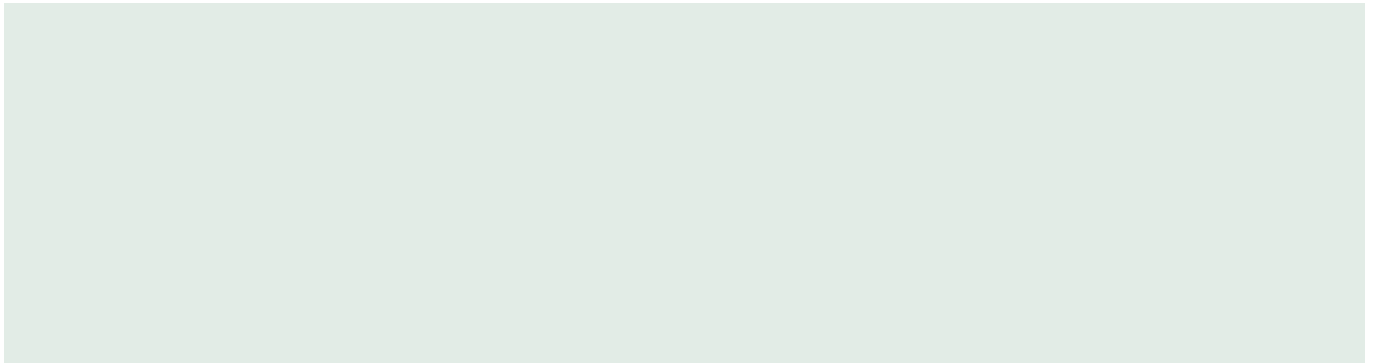
Did you get to achieve your objectives?

Did we make you feel welcome?

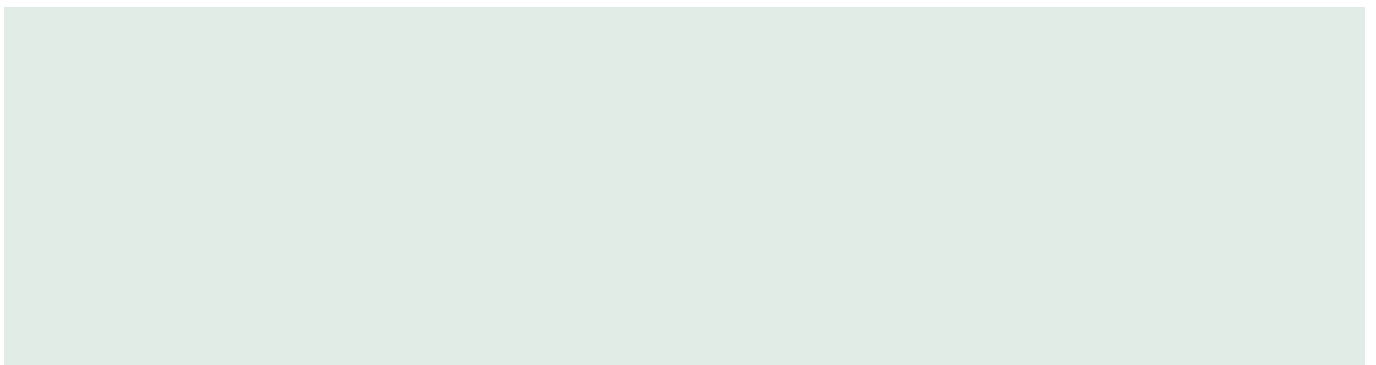
Were there enough learning resources for you?



Can you tell us three positive things about your placement?



Was this booklet useful?





What can we improve?



Please give this to one of the quality team

h.mcgarvie@nhs.net

Thank you

We hope to see you when you qualify and join our team.





Version 1.0
September 2016
Active from
09/2016
Review Date
09/2019

© The Leeds Teaching Hospitals NHS Trust • 1st edition (Ver 1)
Title - Your Student Placement within Adult Critical Care
Author: Helen McGarvie Lead Nurse Clinical Quality - ACC
Design by Medical Illustration Services MIS: 20160818_008/BP