**Orientation to Placement Setting**

To be completed before the end of the first shift for each additional placement area e.g. Spoke, alternative experience

The key element of orientation is for the student to understand emergency and safety procedures and protocols and their responsibilities within these. It may be undertaken by an **RN / supervisor**

The items below are essential; please add any other specific practice setting requirements in the end box.

|  |  |  |  |
| --- | --- | --- | --- |
| **Information/Orientation** | | **Date/supervisor initial (for alternative/ complementary/spoke placements)** | |
| Responsibilities in Emergency situations: | - Cardiac arrest  - alerting team/employees |  |  |
| Fire | - alarm points  - assembly points  - standing orders, policies, procedures |  |  |
| Accident/Incident  Procedures | - staff  - visitors  - identified first aider  -inform University if incident form completed |  |  |
| Infection Control | - used equipment/sharps/linen  - policies  - disposal of waste |  |  |
| Moving and Handling Policy and mobility techniques in this area | |  |  |
| Vulnerable Adults / Safeguarding Children | |  |  |
| Communication Process | - observation / duty hours  - reporting sickness and absence  - person to whom the student must report  -understands the policy for receiving and referring messages and enquiries |  |  |
| Student understands their responsibility in reporting unsafe/poor quality of care and using the Complaints Procedure | |  |  |
| Confidentiality and Information Governance | |  |  |
| Mobile Phones | |  |  |
| Dress and Attire - policy and regulations related to dress code whilst on placement | |  |  |
| Toured the placement area environment /  Introduced to the staff / staffing structure | |  |  |
| Personal Safety and risk issues | |  |  |
| Management and storage of patients valuables | |  |  |
| Management and storage of students personal belongings | |  |  |
| Does the student require any reasonable adjustments? If yes, follow-up in the initial interview. Please circle: **Yes / No** | |  |  |
| Other issues specific to this placement (Please Specify) | |  |  |

Name of RN/Supervisor ……………………………..