

# STUDENT NURSE ORIENTATION MANUAL

PHN

2017

Revised November 2018

Chris Campbell PHN

## STUDENT CONTACT DETAILS

The staff at Regional Public Health (RPH) care about your well-being as well as your education. They will notice and be concerned if you don't arrive as planned, if there is illness in our team or in case of an emergency. They may need to contact you to check you're ok and to let you know if there needs to be a change to your placement.

Please could you provide the RPH with your contact details and an emergency contact using the form below? **This information will be kept by a senior staff member for the length of this placement and then will be destroyed. It will not be shared with anyone else without your permission unless there is an emergency.**

Your name	
Your home phone number	
Your mobile phone number	
Name of emergency contact	
Phone number of emergency contact	

## CONTACTING YOUR TUTOR/CTA

From time to time the staff may need to contact your tutor regarding your progress, for support or in the case of problems.

Please could you supply the contact details for the tutor/CTA that will be supporting you during this placement, in the form below?

Name of tutor/CTA	
Phone number for tutor/CTA	

**Please photocopy this page for each RPH team you work with.**

## CONTACTS

NAME	DESIGNATION	PHONE
Leaha North CNS Child Health Cluster  Liz MacDonald CNS Communicable Disease and Housing Team	Student Coordinators	570 9002
Maureen Stringer	Team Leader Immunisation	Phone (04) 587 2951 Cell 027 244 8610
Rukhsana (Rocky) Ali	Team Leader Hutt	Phone: (04) 570 9182 Cell: 027 244 8620
Robyn Kelly	Team Leader Porirua	Phone: (04) 587 2912 Cell: 027 273 4761
Tessa-Jane Dennes	Team Leader Wairarapa	Phone: (06) 377 9112 Cell: 027 620 2513
	Preceptor	

## YOUR PRECEPTOR

You will be allocated one main preceptor, this preceptor will be responsible for helping you complete your objectives. We will endeavour to ensure that you mainly work with this preceptor, however, this may not always be 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 may not complete any evaluations if you give it to them on your last day in the unit.

# REGIONAL PUBLIC HEALTH

Regional Public Health (RPH) serves the greater Wellington region, through its three district health boards (DHBs): Capital & Coast, Hutt Valley and Wairarapa and as a service is part of the Hutt Valley District Health Board. We are the third largest public health service in New Zealand.

Public health is about keeping our population well and preventing ill health before it happens, rather than treating disease in individuals. An important part of our work is working with others to address the wider causes of good or ill health in our population, such as the physical environment, housing and access to services.

We work with our community to make it a healthier safer place to live. We promote good health, prevent disease, and improve the quality of life for our population, with a particular focus on children, Māori and working with primary care organisations.

We have a special focus on improving opportunities for good health for Maori, Pacific and refugee groups and reducing inequalities in health outcomes that exist between these groups and others.

Some of the approaches we use include sharing health information, making submissions to influence policy, enforcing health legislation, doing health impact assessments and working with other agencies to improve access to services and resources.

Our staff includes a range of occupations such as: medical officers of health, public health advisors, health protection officers, public health nurses, and public health analysts.

## Our vision

Better heath for the greater Wellington region.

## Our bold goal

**Halving the rate of avoidable hospital admissions for Maori, Pacific and children by 2021.**

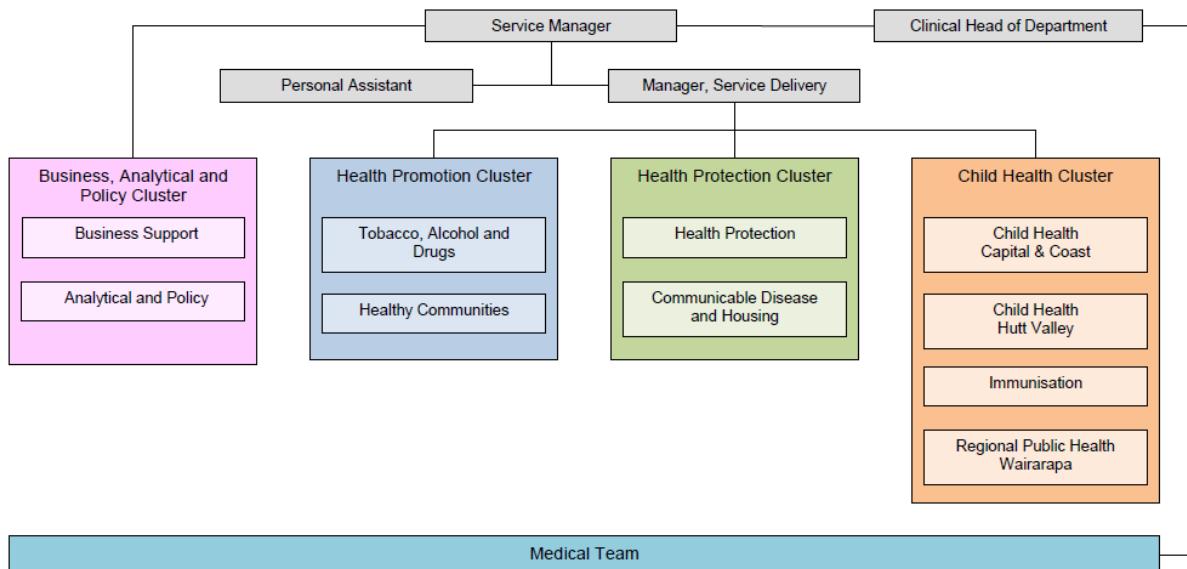
Our bold goal is an aspirational outcome statement developed by staff to challenge and motivate us, and bring a collective purpose to our work.

## Our values

- Integrity
- Excellence
- Equity
- Compassion
- Cultural responsiveness

# ORGANISATIONAL STRUCTURE

## Regional Public Health



There are four groups within Regional Public Health (RPH). These are:

- Business, Analytical and Policy Cluster
- Health Promotion Cluster
- Health Protection Cluster
- Child Health Cluster

## REGIONAL PUBLIC HEALTH BASES

### Hutt base

Location: 1st floor, Community Health Building, Hutt Hospital, High Street, Lower Hutt

Reception is available 8am to 4.45pm.

A swipe card is required to gain access to the building between 5.15pm and 7.45am.

**Phone 04 570 9002 as contact for all bases**

### Porirua base

Location: Level 3, 1 Walton Leigh Ave (City Fitness building), Porirua

Make arrangements to gain access to the building with a staff member.

Parking is available at the car park below New World for 240 minutes.

### Wairarapa base

Location: 9 Russell Street, Masterton

The office is open from 8am – 4.30pm daily.

Parking is available at the front of the building next to the ‘Bottle O’.

## ORIENTATION TO THE BASE

Your preceptor nurse and team leader will support your orientation to the base. Your orientation will include:

	Hutt	Porirua
Meeting staff	<input type="checkbox"/>	<input type="checkbox"/>
Toilets	<input type="checkbox"/>	<input type="checkbox"/>
Staff Room	<input type="checkbox"/>	<input type="checkbox"/>
Kitchen	<input type="checkbox"/>	<input type="checkbox"/>
Staff indicator board	<input type="checkbox"/>	<input type="checkbox"/>
First aid kit	<input type="checkbox"/>	<input type="checkbox"/>
Clinical equipment storage areas	<input type="checkbox"/>	<input type="checkbox"/>
Security of building	<input type="checkbox"/>	<input type="checkbox"/>
Staff parking	<input type="checkbox"/>	<input type="checkbox"/>

<b>Emergency procedures</b>	Hutt	Porirua
The location of emergency exits	<input type="checkbox"/>	<input type="checkbox"/>
The location of fire extinguishers and fire hoses	<input type="checkbox"/>	<input type="checkbox"/>
The evacuation procedure	<input type="checkbox"/>	<input type="checkbox"/>

My Assembly area is:

Hutt \_\_\_\_\_

Porirua \_\_\_\_\_

## EXPECTATIONS OF STUDENT NURSES ON PLACEMENT AT RPH

- Nurses should be prepared for the placement and read the information given/sent. Also bring along your personal learning objectives.
- Good time management. Turn up at the correct place at the time expected. Working hours are 8am – 4.30pm Monday to Friday with the Child Health Cluster and Communicable Disease and Housing Team.
- Immunisation team hours are 7.30am to 4pm Monday to Friday.
- You are expected to wear your uniform when working with the Immunisation team.
- For other placements wear appropriate clothing and footwear. You will often be visiting people in their homes so you will need to wear culturally acceptable dress – ie not low cut tops or mini-skirts. Comfortable footwear will be needed as you may need to climb stairs. Also weather appropriate clothing – warm and waterproof as needed.
- Identification badges must be worn at all times.
- If you are unwell you need to let your student preceptor or the student coordinator know via cell phone.
- Cell phone use whilst on placement should be at break times only. Cell phones should be turned off during work time.
- If you are leaving your placement for any reason you need to let the nurse you are working with know.
- You will be expected to show interest and enthusiasm whilst on placement. Please ask questions as you go along about the topics that you are interested in or unsure of.
- Be polite to staff and clients and maintain a professional manner at all times.
- Confidentiality is paramount.
- If you are not achieving your objectives, please discuss this with your preceptor (before the last week of placement).
- 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 in the last days of your placement.

## PRIVACY AND CONFIDENTIALITY

Staff routinely collect and have access to peoples' personal health information in order to do their jobs. This puts us in a privileged position. Patients must have confidence that we use their information appropriately and we will maintain confidentiality at all times.

Wherever health information is collected, used, held or disclosed by health agencies, the Health Information Privacy Code 1994 (HIPC) applies. The rules in the HIPC can be summarised simply:

- Purpose: You can only collect the information you need.
- Source: Get it straight from the people concerned.
- Collection from the individual: Tell them what you are going to do with it.
- Manner of collection: Be polite and considerate when you are getting it.
- Storage/security: Take care of it once you have got it.
- Access: People can see their health information if they want to.
- Correction: The client can request a correction if it is wrong.
- Accuracy: Make sure it is accurate before you use it.
- Retention: Get rid of it when you are done with it.
- Limits on use: Only use it for the purpose you got it for.
- Limits on disclosure: Only disclose it if you have good reason.
- Unique identifiers: Only assign unique identifiers (NHIs) where permitted.
- Be careful with electronic patient management systems (PMSs) – do not give your password to anyone else and ensure patients and visitors cannot read your screens.
- Ensure hard copy notes are stored safely and securely. Don't leave them lying around where public have access to them.
- Patients or other work related business must not be discussed outside of work.
- When discussing a patient with other people or agencies, ensure that the information you are disclosing is relevant and appropriate.
- Beware of conversations in public i.e. schools, cafes.

## STUDENT NURSE PLACEMENT WITH RPH IS WITH THE FOLLOWING TEAMS:

### Child Health Cluster

A team of motivated health professionals working together with schools and communities to encourage positive outcomes.

Our services are confidential, provided free of charge and available Monday to Friday. While our focus is on schools in high need areas, every school has access to a public health nurse.

#### *Public Health Nurses:*

- Support children referred by parents/caregivers or schools.
- Assess, advocate and refer to hospital, outpatients, specialists or education services.
- Link children and families with community and social services.
- Support access to health care.
- Focus on high need areas to advise and support schools.
- Respond to pandemics and public health emergencies.
- Health promotion.
- Skin standing orders.

#### *Porirua Children's Ear Van*

The Porirua Children's Ear Van is a free, nurse- led service for children aged 0-18 years.

#### The Ear Nurses:

- Have specialist knowledge of ears and associated problems.
- Offer assessment of ears, advice and some minor treatment.
- Refer children to Audiology, Ear Nose and Throat clinics and other health and education services.

#### *Vision and Hearing Technicians*

Provide vision and hearing screening and advice to parents in B4 School Check clinics, schools and community clinics

#### *Public Health Nurse Work and Income*

- Assists with client access to primary health care.
- Works with an intersectoral multiagency approach.
- Establishes community networks and relationships to further support outcomes for clients.
- Supports Work and Income staff with health literacy and health service information.

### *The Immunisation team*

The Immunisation Team comprises of the following teams;

- School based Immunisation team
- Immunisation coordinator
- National Immunisation Register (NIR)
- BCG (TB) programme

The programme is required to administer immunisations to Years 7 and 8 students in the school setting.

### *Year 7 students have a Boostrix Booster*

The Tdap vaccine boosts the protection children receive as babies, against tetanus, diphtheria and whooping cough (or pertussis). Following the full course of immunisations, protection is expected to last at least 20 years against tetanus. Protection against whooping cough wanes after five years. The Tdap vaccine is given as one injection

### *Year 8 in 2017 all students will receive HPV/Gardasil*

The HPV vaccine protects against four strains of human papillomavirus responsible for cervical and some other cancers, and genital warts. Protection is long-lasting. The HPV vaccine is given as two injections, spaced six months apart. From 2017 boys will also be offered the vaccine.

The Programme is contracted by the Ministry of Health (MoH) to Regional Public Health (RPH). As the name suggests this is a regional programme which includes Wellington, Porirua Kapiti Coast, Lower Hutt and Upper Hutt as well as Wairarapa.

Over 100 schools, with approximately 5000 students are enrolled in the programme.

While with the team you will learn about the vaccination, cold chain, administration of immunisations (unfortunately you are not permitted to administer an immunisation), and the reasons why immunisation is so important, safe and easy in the prevention of vaccine preventable infections.

### *The Immunisation Coordinator*

Works solely for the Hutt Valley DHB. There is a separate coordinator for Capital & Coast DHB.

The Immunisation Co-coordinator works with Primary Health Organisations, DHB departments and staff, Outreach Immunisation Service (Kokiri Marae), midwives and various other agencies in the promotion of immunisation from 6 week old babies to adults requiring influenza immunisations. The work is mainly concerned with getting children immunised in a timely manner to ensure that we meet Ministry of Health (MoH) expectations.

The Co-coordinator visits general practices working with practice nurses to ensure that all staff are updated about recent changes to immunisations. Practices and pharmacies fridges are audited to ensure the correct temperature is maintained for vaccine storage and efficacy. This role also involves trouble shooting concerns that may occur with regard to vaccine safety.

### *The National Immunisation Register*

The National Immunisation Register (NIR) is a computerized information system that has been developed to record immunisation details of New Zealand children and more recently adults. All childhood and influenza immunisations are recorded on this data base.

This data base is used to register all babies from birth and supports timely immunisation.

### *BCG Programme*

Two registered nurses work on this programme. The BCG vaccine is offered from birth to 6 months for babies who are eligible. After 6 months babies require a Mantoux test prior to vaccination. If the Mantoux test is positive then they are referred to paediatricians for treatment. Eligibility for vaccination is contained in the link below. On average 100 babies per month are eligible for this vaccine.

## **Health Protection Cluster**

This group combines the physical, social and urban environments work with other inter-related work areas of disease control, food safety, and emergency preparedness. It integrates traditional health protection and health promotion and provides a focus on managing the impact of social and physical environments on people's health.

HPC has four main areas of focus:

1. To protect our environments by reducing the incidence and impact of environmental hazards.
2. To promote healthy environments and address environmental inequalities across sectors, especially for our vulnerable communities.
3. To control the spread of communicable diseases.
4. Responsibility for RPHs preparedness for any emergency public health response.

The nursing student on placement will have the opportunity to experience the housing and disease control nursing teams working in a variety of community settings. The main areas of focus for the public health nurses (PHNs) include areas 2, 3 and 4 mentioned above.

The Communicable Disease PHNs follow up vaccine preventable diseases and other notifiable diseases. These include tuberculosis, Hansen's disease (leprosy), meningococcal disease, rheumatic fever, hepatitis and outbreaks of influenza and enteric disease.

PHNs are also involved in contact tracing, education, health promotion, awareness raising and vaccinations when required. We work as a crucial link between the hospital specialist doctors, medical officers of health, GPs and the community. All of the Health Protection Cluster is involved in emergency preparedness and border control. The PHN's are able to work closely with the health protection officers depending on the situation.

PHNs are involved in the resettlement of refugees into the Wellington region. We work closely with Red Cross services. We will visit all quota refugees within the initial six to eight weeks of their arrival to ensure they are linked to a GP service, are aware of how to access necessary health services such as dentists, and are aware of any hospital or health referrals that have been made.

In Wellington there are approximately 240 quota refugees that are resettled to the Wellington region on an annual basis. There are six intakes of approximately 40 refugees. Currently Wellington is resettling quota refugees from Syria, Iraq, Afghanistan, Iran, Myanmar, Columbia, Ethiopia, and Eritrea. In addition to quota refugees, the PHNs also assist with health screening for two other categories of clients from refugee backgrounds.

These are the family reunification and asylum seeker categories. The PHN will arrange to visit a person who has arrived in NZ to offer fully funded TB screening.

## Well homes

Well homes is a housing coordination service working across the Wellington region. Tu Kotahi Māori Asthma Trust, Sustainability Trust, He Kāinga Oranga, and Regional Public Health work in partnership to deliver this service.



Referrals are received from health professionals, and social providers who have identified that clients are experiencing housing issues which may be impacting negatively on their health. Upon receipt of referral the whānau are contacted by the Well Homes team about their specific housing needs. They are then linked with the most appropriate housing service. At Regional Public Health, we have two public health nurses who conduct healthy housing assessments, and work with whānau to make a plan to help ensure their home is warm, dry and safe. The nurses focus on education in the first instance, but can take on an advocacy role where necessary and can support eligible whānau with housing transfers. Whānau can also be assisted to obtain housing interventions such as insulation, curtains, draught stopping, and heating (dependant on need). Well Homes has strong working relationships with Housing New Zealand, Work and Income and other community organisations.

## PRE-READING/RESOURCES

<http://www.rph.org.nz/content/f2f97f8e-8f80-4543-9bc8-af943ef940b5.html>

New Zealand Health Strategy

[http://www.kokiri.org.nz/affiliates/tu\\_kotahi.html](http://www.kokiri.org.nz/affiliates/tu_kotahi.html)

<http://www.sustaintrust.org.nz/>

<http://www.healthyhousing.org.nz/>

<http://www.rph.org.nz/housing>

<http://www.health.govt.nz/our-work/populations/maori-health/he-korowai-oranga>

<https://www.health.govt.nz>

[www.cochranelibrary.com](http://www.cochranelibrary.com)

[www.immune.org](http://www.immune.org)

<http://www.who.int/healthpromotion/conferences/previous/ottawa/en/>

<http://www.health.govt.nz/our-work/regulation-health-and-disability-system/section-125-health-act-1956-medical-examination-children>

<http://www.pha.org.nz>

### Immunisation resources:

<http://www.health.govt.nz/system/files/documents/publications/immunisation-handbook-2014-2nd-edn-apr16.pdf>

<https://www.healthed.govt.nz/resource/year-7-immunisation-tetanus-diphtheria-and-whooping-cough-pertussis-booster%20vaccine>

<https://www.healthed.govt.nz/resource/human-papillomavirus-hpv-vaccine-school-consent-form-%20english-version>

<https://www.healthed.govt.nz/resource/bcg-vaccine-information-parents---english-version>

<http://www.health.govt.nz/our-work/preventative-health-wellness/immunisation/new-zealand-immunisation-schedule>

## NOTES

Please use this space for notes.

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## EVALUATION OF YOUR CLINICAL PRECEPTOR

Name of Preceptor \_\_\_\_\_ Date \_\_\_\_\_

**E = Excellent    VG = Very Good    S = Satisfactory    NI = Needs Improvement**

Please read the following statements then tick the box that best indicates your experience

MY PRECEPTOR:	E	VG	S	NI
Was welcoming and expecting me on the first day				
Was a good role model and demonstrated safe and competent clinical practice				
Was approachable and supportive				
Acknowledged my previous life skills and knowledge				
Provided me with feedback in relation to my clinical development				
Provided me with formal and informal learning opportunities				
Applied adult teaching principals when teaching in the clinical environment				

Cut along line

Describe what your preceptor did well

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Describe anything you would like done differently

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Signed: \_\_\_\_\_ Name: \_\_\_\_\_