

Older Persons and Rehabilitation Services

Contact Number: 045709050 (West); 045709051 (East)



Student Name:

Student Contact Details for Older Persons and Rehabilitation Service

Contact details

The staff on the ward care about your well-being as well as your education. They will notice and be concerned if you don't arrive for a planned shift, if there is illness on the ward or in the 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 shifts.

Please could you provide the ward with your contact details and an emergency contact using the form below?

Your Name	
Your Home Phone number	
Your mobile phone number	
Name of emergency contact	
Phone number of emergency contact	

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.

Contacting your Tutor/CTA

From time to time the staff on the ward 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 complete a new form before each new placement and give it to the senior staff at the beginning of your placement.

Thank you

Older Persons and Rehabilitation Service

Philosophy

To provide a high quality assessment, treatment and rehabilitation service, so that optimum levels of independence for patients can be achieved, wherever possible.

We work to maintain patients in their own community environment, aiming to restore maximum functional ability so lifestyle and independence is maintained.

The multidisciplinary team works closely with support services and ACC to ensure that people returning to the community are well supported.

Family/Whanau are encouraged to become involved with goal planning to assist their family/Whanau member to return to a safe environment.

Assessment, treatment and rehabilitation services are provided in our inpatient unit, in the community and through our day services.

Welcome to the Older Persons and Rehabilitation Service

We hope that you enjoy working as part of a multi-disciplinary team and will find your time here both rewarding and challenging.

Older Persons and Rehabilitation Service (OPRS) has two wards – the east wing and the west wing. While you will primarily be assigned to one ward, you will be working on both wards. Our multidisciplinary team includes:

The Medical team

- **Clinical Head of Department (CHOD)**- Dr Teresa Thompson
- Consultants: Dr Teresa Thompson, Dr. Jo Rodwell , Dr. Andrew Linton, Dr Jo Williams, and Dr Charul Barapatre, Dr.Mike Liu, Dr.Kimberley Horton
- Two Registrars (one for both east and west wings)
- Two House surgeons (one for both east and west wings)

The Nursing team

- Clinical Nurse Manager (CNM) Joycelyn Go
- Associate Clinical Nurse Manager (ACNM)
West wing Cathie Verkade
- Associate Clinical Nurse Manager (ACNM)
East wing Cheryl D'Costa
- Older Persons Mental Health Team Leader Lisa Stuart
- Clinical Nurse Educator (CNE) Imee Carmella Saplagio
- Complex Discharge Liaison/RN Devika Ashaid
- Registered Nurses
- Enrolled Nurses
- Health Care Assistants

Allied Health professionals

- Speech Language Therapists
- Occupational Therapist
- Physiotherapists
- Social workers
- Dietician
- Pharmacist

Administrative staff

- Ward clerk west wing Margaret Uriarau
- Ward clerk east wing Kathy James

The Older Persons and Rehabilitation Service (OPRS West and OPRS East)

The Older Persons and Rehabilitation Service provide a coordinated interdisciplinary service for people 16 years and upwards within the Hutt Valley. It is customised to meet the complexity of needs of people with disability and/or aged related disorders in order to restore their functional ability and enable them to live as independently as possible. These services should be provided in the setting that will be most suitable for the client.

Services provided are:

- Inpatient services.
- Resource of expertise and advice to acute medical / surgical and other hospital services, General Practitioner, home and community care providers, residential care and voluntary groups.
- Community Team and community services.
- Psychogeriatric services.
- Services for people under 65 years with physical disabilities.

Access to the service:

- Referrals are received from other departments within the hospital including Hutt Valley residents who have been treated in Wellington/other regions.
- General Practitioners and other health professional groups and Medical Specialists.
- Patients residing in residential facilities must be referred by their General Practitioner.
- There are no acute admissions directly to the service unless the patients have been seen in the Emergency Department or by the Community Team or seen by the Consultants at various locations and have been assessed as requiring Specialist Rehabilitation.

OPRS admits those who:

- Are not safe at home and have been seen by a Geriatrician
- Are medically stable but have multiple age related morbidities which require Geriatrician input
- Have significant functional loss inhibiting independence
- Require multidisciplinary input

The aim of the Older Persons and Rehabilitation Service process is to:

- Identify and treat potentially reversible conditions and the potential for rehabilitation
- Manage symptoms
- Restore the client to their maximum possible level of function
- Teach adaptive and compensatory skills
- Increase the level of safety for self and others
- Increase capacity for self care or assistance with self care
- Provide assistance for maintaining life roles
- Promote a greater understanding/clarification for the client and the family/whanau to assist them to adjust to the impact of their disability
- Provide input into the assessment of support needs of people
- Providing information, education and support for caregivers
- Ensure that all processes consider and meet the needs of Maori

OPRS East

The types of patients commonly admitted here are those with age related Dementia and mental health needs. Clients with Parkinson's disease are also admitted into OPRS East.

OPRS- Students

OPRS West

The types of patients most commonly seen here are those having suffered a cerebral event, such as a Stroke or Motor Neuron disease,

Both wards also admit ACC patients (fractures and lacerations), post surgical patients or those recovering from a respiratory or cardiac event that requires the input of a multidisciplinary team. We also admit clients who require complex discharge planning.

Each ward runs as independent units, but staff is often shared across the floor.

Visitors

We have 2 dayrooms – one each end of the ward. There is a small kitchenette next to these which the families can help themselves to drinks provided. They may use the milk from the fridge but no other food or drinks as these are for the patients. They may use the toilet outside the ward only.

Family members may stay with a patient overnight but this must have permission from the ACNM / Coordinator. We prefer 2 patients at a bedside at one time and encourage the families to rotate visitors for large families by using the dayroom; this is to support the well-being of the other patients.

There may be times when it is appropriate to ask the visitors to leave e.g. for personal cares or at 20:00 when the ward closes to all those not staying overnight. Support for managing this should be sought from your preceptor or ACNM / Coordinator or After hours. It is important to be culturally and spiritually mindful in these situations.

The Multidisciplinary Team

We use multidisciplinary team approach and continuity of care is maintained as much as possible. The team consists of but is not limited to:

Medical Staff

There are two teams of medical staff in West and one team in East. Each team consists of a Consultant, Registrar and House Surgeon.

Outside normal hours the service is covered by Second On and Night Float.

The Speech Language Therapist

A Speech Language Therapist (SLT) assesses patients that may have a speech or swallowing problem. The SLT's instructions will be written on the communication board at the patient's bedside, patient notes and on the handover sheet. Appointments will be written on the patient allocation whiteboard in the nurses station. Rehabilitation is about being generally well so eating in the dining room is an expectation. All meals are supervised and a RN/EN/HCA must be present at all times.

The Physiotherapist

A Physiotherapist assesses all patients and instructions on mobility and correct positioning of limbs. These will be written in patient notes and handover sheet. Appointments will be written on the yellow chart at the bedside and on the patient allocation whiteboard in the nurse's station. Sliding boards, frames, hoists and are available for transferring.

The Occupational Therapist

The Occupational Therapists assesses and assists patients to improve their ability to perform tasks in their daily living. They help to develop, recover or maintain daily living skills, improve

OPRS- Students

their basic motor functions and abilities as well as to compensate for permanent loss of function.

Daily living activities such as showering, toileting, dressing, kitchen skills, cooking and eating, and home visits are involved in assessment process.

The Social Worker

All patients are seen by a Social worker on OPRS and an assessment of their social situations in assisting them to maximise their health and wellbeing is completed. This assessment focuses on people and their social environment. This assessment may identify the need for referrals to be made to other agencies and organizations - e.g. Stroke foundation, WINZ, Total Mobility applications, Nurse Maude, Life Unlimited etc.

Dietitian - Assess patients' nutritional requirements and provide appropriate education.

Pharmacist - Ensure correct charting of drugs, no contraindications, and provide education to patients about drugs as appropriate.

Maori Health and Pacific Island Health Teams - Meet with Maori/Pacific patients as appropriate to provide for their cultural needs.

Registered Nurse

Registered Nurses utilise nursing knowledge and complex nursing judgment to assess health needs, provide care, and to advise and support people to manage their health. They practice independently and in collaboration with other health professionals, perform general nursing functions and delegate and direct Enrolled Nurses and Health Care Assistants. They provide comprehensive nursing assessments to develop, implement, and evaluate an integrated plan of health care, and provide nursing interventions that require substantial scientific and professional knowledge and skills. This occurs in a range of settings in partnership with individuals, families, whanau and communities.

Enrolled Nurse

Enrolled nurses practise under the direction of a Registered Nurse to implement nursing care for people who have stable and predictable health outcomes in situations that do not call for complex nursing judgment. The responsibilities of Enrolled nurses include assisting clients with the activities of daily living, recognising the changing needs of clients and performing delegated interventions from the nursing or midwifery care plan.

Health Care Assistant

The role of the Health Assistant is to provide support to Registered Nurses by assisting them with patient care as directed and by completing housekeeping and clerical tasks.

Welcome!!
We are looking forward to working with you

Contacts

This should contain information on all the key contacts for the ward/unit

OPRS West OPRS East		DD 5709050 DD 5709051
Clinical Nurse Educator	Imee Carmella Saplagio	Imee.saplagio@huttvalleydhb.org.nz DD 5709966 0272068339
Clinical Nurse Manager	Joycelyn Go	9233
Associate Clinical Nurse Managers	Cathie Verkade Cheryl D'Costa	DD 5709050 DD 5709051
Complex discharge liaison coordinator	Devika Ashaid	9966

Imee Carmella Saplagio (CNE) is responsible for overseeing all student placements in OPRS. Cathie Verkade (ACNM) and Cheryl D'Costa (ACNM) co-ordinates the day to day running of the wards.

Your Preceptor

You will be allocated one main preceptor; this preceptor will be responsible for helping you complete your objectives. We will endeavor to ensure that you mainly work with this preceptor; however, due to shift work this is not always 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!!).

If you have any concerns or questions do not hesitate to contact Imee Carmella Saplagio, Clinical Nurse Educator.

Expectations of the Student Nurse while in OPRS

The shifts in OPRS are:

AM shift: 0700-1530

PM shift: 1445-2315

Nocte shift: 2245-0715

- It is expected that you arrive on time to your shift and if you are going to be late or unwell and can not come in please ring the ward on **570 9050 (West) or 570 9051 (East)** and speak to the ACNM or coordinator
- You must complete the full shift that you are allocated to work. If you are unable to do so, please discuss this with the Clinical Nurse Educator.
- We endeavor to give you a fair roster with continuity of preceptor(s) wherever able. If you are unable to work the shifts that you have been rostered, you need to discuss this with the Clinical Nurse Educator.
- On the first day please provide Student contact details (form at back)
And give it to either the CNE or the Shift Coordinator.
- We do not expect you to have specific rehabilitation or care of the older person's knowledge. Your preceptor will work with you to help you learn about assessment and management of a variety of conditions relevant to OPRS.
- The preceptor you are working with should be aware of your learning objectives. Please discuss these at the start of your shift.
- If you are not achieving your objectives, please see the Clinical Nurse Educator.
- Third year nursing students that are commencing their final placement need to identify early in their placement which preceptor will be completing their documentation requirements and ensure their preceptor has an adequate timeframe to complete this.
- Please ensure that your uniform meets your institution standards and for infection control reasons that your uniform is clean, jewellery removed and long hair tied back and ID worn.

Safety Measures in OPRS

The emergency number for Fire, Cardiac Arrest and Security is 777

Please familiarise yourself with

- The emergency exits
- Location of the fire manual call points
- Fire Hoses
- Emergency Trolley
- Defibrillator
- Emergency call bell system

In an emergency situation, please follow the direction of the medical and nursing staff.

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.

- CNM/ CNE Office /Nurses Office
- Doctors office
- Roster
- Nursing equipment room
- Physiotherapist equipment room:
Mobility aides (frames,
stroller,wheelchairs)
- Occupational therapist equipment
room
- Staff tea room, Cloak room
- Staff and Public Toilet
- Commode and shower chair store
room
- Linen supplies, Sluice room,
- Patient Dining Room
- Drug room
- Dangerous Drug Cupboard
- Dressing Materials
- "Notes on Injectable Drugs"
- BGL and Ketone machine
- Emergency Trolley; Defibrillator
- IV supplies and infusion pumps
- Civil Defense cupboard
- Clinical policies & procedures
- Suction Equipment
- Weighing Scales
- Observation machine, thermometer
probes
- Bladder scanner
- ECG machine
- Infection control trolleys
- Patient's safety cupboard
- Pressure preventing equipment
- Sling Hoist; Standing; Ceiling hoist,
Sara Steady
- Laboratory forms and specimen
bottles
- Patient Notes and Charts
- Portable Phone, Photocopy/Fax
machine
- Bio-hazard bags
- Alginate linen bags
- Oxygen isolation "shut off" valve,
oxygen cylinder
- Emergency Exits

Objectives

These are examples of some skills/competencies that you may develop while on this clinical placement under the supervision of a Registered Nurse.

Please remember to discuss specific learning objectives with your preceptor/ACNM/CNE

- Observation, listening and communication skills
- The provision of appropriate care to the patient and Whanau and the professional, ethical and legal responsibilities this involves.
- Time Management
- Daily hygiene cares
- Recordings including temperature, pulse, blood pressure (manual and automated), SpO₂, and respiratory rates
- An understanding of interpreting the results of the above recording and the importance of the Early Warning Score (EWS)
- Nursing Documentation and Careplanning
- Understand the importance of monitoring blood sugar levels for those patients with Diabetes
- Attend ward rounds and case conferences
- Accompany patients for diagnostic procedures (with patient and ACNM permission)
- Administer oral medications under the direct supervision of a Registered Nurse. Please note that students are not permitted to check, administer or monitor IV drugs, fluids or blood products
- Complete admission and discharge procedures
- Have an understanding of the nursing assessment tools used in OPRS including the Nursing assessment form, Falls risk assessment, Malnutrition Screening Tool and Braden Scale
- Fluid management/Fluid balance
- Practice correct infection control measures
- Know the importance of setting goals with patients in OPRS
- Have an understanding of Stroke rehabilitation (OPRS west)
- Have a understanding of and the challenges faced by those patients who have a cognitive impairment or mental illness
- Familiarize yourself with the Bristol Stool chart and the importance of bowel monitoring/cares
- Learn to safely transfer and mobilise patients including the use of sliding boards/sheets, hoists and mobility aids
- Recognize the roles and functions of the wider MDT e.gs. Doctors, Dietician, Social worker, Physiotherapist, Occupational therapist, Speech and language therapist, Diabetes Clinical Nurse Specialist, Palliative Clinical Nurse Specialist, Stoma Clinical Nurse Specialist, Respiratory Nurse Specialist, Maori Health Unit, Pacific Health Unit, Interpreter Services, Chaplain / Priest, PAR Nurse.
- Referrals
- Gain an understanding of risk factors associated with dysphagia

OPRS- Students

- Know the importance of regular pressure area monitoring and the prevention equipment that is available
- Gain an understanding of wound care and the products available

Common Presentations to OPRS

Patients in OPRS have been admitted to hospital with a wide range of medical conditions including

- CVA/Stroke- Ischemic and Hemorrhagic Stroke
- TIA
- Motor Neuron Disease (Multiple Sclerosis, Guillian Barre Syndrome)
- Falls resulting in fractures
- UTI (Urinary tract Infection)
- Amputation
- Cellulitis
- Respiratory Conditions: (Exacerbation of COPD, Pneumonia, Asthma)
- Diabetes Mellitus- Type 1 and 2
- Renal Conditions (Acute/Chronic Kidney Injury)
- Cardiac Conditions: (Congestive Heart Failure, Atrial Fibrillation)
- Hypertension
- Deconditioning
- Mental Health Conditions
- Parkinson's Disease
- Dementia and Delirium
- Cognitive Impairment, Memory Loss
- Confusion
- Anxiety
- Depression, Suicidal Ideation
- Bipolar Affective Disorder

Common Medications

Patients in OPRS are taking a wide range of medications. Below is a list of common medications you may like to familiarise yourself with.

Drug Group	Examples	Purpose, Action, Side Effects
Beta Blockers	Metoprolol Bisoprolol	
Calcium Channel Blockers	Diltiazem Felodipine Amlodipine	
Ace Inhibitors	Cilazapril	
Diuretics	Frusemide Spironolactone	
Analgesia	Gabapentin	
Controlled Drug Analgesia	Morphine Fentanyl Sevredol Pregabalin	
Statins	Atorvastatin Simvastatin	
Anti-Platelets	Aspirin Clopidogrel	
Anticoagulants	Clexane Warfarin Dabigatran Rivaroxaban	
Nitrates	Duride GTN spray	
Oral Hypoglycemic Agent	Metformin	
Laxatives	Bisacodyl Laxsol Lactulose	
Antidepressants	Citalopram Mirtrazapine	
Antipsychotic	Haloperidol Olanzapine Risperidone	
Mood stabilizer	Lithium Carbonate Sodium Valproate	

Commonly Used Abbreviations in OPRS:

#	Fracture	FG	Fluid Goal
ACP	Advanced Care Planning	FWB	Full Weight Bear
ADLs	Activities of Daily Living	GCS	Glasgow Coma Scale
AF	Atrial Fibrillation	G/F	Gutter Frame
AFO Splint	Ankle Foot Orthosis Splint	GOC	Goals of care
AKA	Above Knee Amputation	GTN	Glyceryl Trinitrate
BD/BID	Twice a day	H/H	Hand held
BKA	Below Knee Amputation	HTN	Hypertension
BM	Bowel Motion	IDC	Indwelling Catheter
BP	Blood Pressure	IHD	Ischemic Heart Disease
BPAD	Bipolar Affective Disorder	IVAB	Intravenous Antibiotic
BPSD	Behavioral and psychological symptoms of dementia	IVC	Intravenous Cannula
BSL	Blood sugar level	IVF	Intravenous Fluids
CHF	Congestive Heart Failure	L/S BP	Lying and standing Blood Pressure
COPD	Chronic Obstructive Pulmonary Disease	MRI	Magnetic Resonance Imaging
CPAP	Continuous positive airway pressure	MS	Multiple Sclerosis
CT Scan	Computed Tomography Scan	MUST	Malnutrition Screening Tool
CXR	Chest X Ray	NAD	No Abnormality detected
D/C	Discharge	NBM	Nil By mouth
DHS	Dynamic Hip Screw	NGT	Nasogastric tube
DM	Diabetes Mellitus	NOF	Neck of femur
DVT	Deep Vein Thrombosis	NRT	Nicotine Replacement Therapy
Dx	Diagnosis	NSTEMI	Non ST Elevation Myocardial Infarction
ECG	Electrocardiograph	NWB	Non weight bearing
EWS	Early Warning Score	OA	Osteoarthritis
FBC	Fluid Balance Chart (nursing) Full Blood Count (medical)	OD	Once a day
O/N	Overnight	U/A	Urine Analysis
OT	Occupational Therapist	VF	Ventricular Fibrillation

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PARS	Patient at risk Service	VT	Ventricular Tachycardia
PE	Pulmonary Embolism	WBAT	Weight bear as tolerated
PEG	Percutaneous Endoscopic Gastrostomy	W/F	Walking Frame
PICC	Peripherally Inserted Central Catheter	WOB	Work of breathing
POABs	Oral Antibiotics	W/S	Walking stick
PPPR	Protection of Personal and Property Rights	WT	Weight
PWB	Partial Weight bear	Buc	Buccal
QID/qds	Four times a day	IM	Intramuscular
Q/S	Quadstick	Inh	Inhalation
ROM	Range of motion	Mane	Morning
ROS	Removal of suture	Midi	Midday
s/c	Subcutaneous	arvo	afternoon
SCD	Sequential Compression Device	nocte	night
SLT	Speech language Therapist	Neb	nebuliser
SOBOE	Short of breath on exertion	PO	Oral
SPC	Suprapubic catheter	PRN	As needed
S/S	Sara steady; signs and symptoms	PR	Per rectum
STEMI	ST Elevation Myocardial Infarction	PV	Per Vagina
STML	Short Term Memory Loss	q4h	Every 4 hours
TD2M	Type 2 Diabetes Mellitus	q6h	Every 6 hours
TDS/TID	Three times a day	q8h	Every 8 hours
TIA	Transient Ischemic attack	Subling/SL	Sublingual
TKJR	Total Knee Joint Replacement	STAT	immediately
TROC	Trial Removal of Catheter	TOP	Topical
URTI	Upper Respiratory Tract Infection		
USS	Ultrasound scan		
UTC	Up to commode		
UTT	Up to toilet		
VAC	Vacuum assisted closure		

Pre-reading / Resources:

- Stroke Foundation New Zealand website

<https://www.stroke.org.nz/>

- Dementia New Zealand website

<https://dementia.nz/get-information/>

- Mental Health Foundation New Zealand

<https://mentalhealth.org.nz/conditions>

DEPARTMENTAL HEALTH & SAFETY INDUCTION CHECKLIST



This form is to be completed by the worker in conjunction with their Health & Safety Rep/Manager
within 7 days of starting employment/placement

Name of Worker:			
Worker Type:	<input type="checkbox"/> HVDHB <input type="checkbox"/> Agency Nurse <input type="checkbox"/> Visitor with Special Staff Status (e.g. <input type="checkbox"/> Student on Clinical Placement		
Employee Number (if applicable):		Position:	
Department/Area:		Start Date:	
SECTION 1 – ALL WORKERS (All information contained in the Departmental H&S Information Notice and Health & Safety Guide Folder)			✓ – To Show Completed or N/A if not applicable
H&S Rep	<ul style="list-style-type: none"> • Knows who is the H&S Rep is and where to find them 		<input type="checkbox"/>
First Aid (if applicable)	<ul style="list-style-type: none"> • Knows who is the designated First Aider 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Knows where first aid supplies are kept 		<input type="checkbox"/>
Risk Management	<ul style="list-style-type: none"> • Local hazards & controls for each hazard discussed 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Knows what hazardous substances are used in the work area and the location of hazardous substances inventory and Safety Data Sheets (SDS) 		<input type="checkbox"/>
H&S Incident Reporting (SQuARE)	<ul style="list-style-type: none"> • Reporting procedure for H&S Incidents/near misses discussed (SQuARE) 		<input type="checkbox"/>
Blood & Body Exposure	<ul style="list-style-type: none"> • Reporting procedures for BBFE discussed 		<input type="checkbox"/>
H&S Information	<ul style="list-style-type: none"> • Location of H&S noticeboard/information discussed 		<input type="checkbox"/>
Emergency Management (to be completed in conjunction with Fire Warden)	<ul style="list-style-type: none"> • Shown the location and use of Emergency Response Procedures Flipcharts 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Shown the location of Emergency Equipment (e.g. extinguishers, hoses, defibrillators) 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Knows who the designated fire warden is 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Understands fire alarm procedures & sounds i.e. intermittent & constant alarms & shown and understands the mimic panels 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Shown and understands emergency evacuation routes and procedures 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Knows how to summon assistance in an emergency (777 / 570 9777 from mobile phone) 		<input type="checkbox"/>
Personal Safety	<ul style="list-style-type: none"> • Fire extinguisher types, locations and uses 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Has completed a workplace familiarisation and walk around (including work area, hazards, emergency exits, amenities, kitchen and other facilities) 		<input type="checkbox"/>
Personal Protective Equipment (PPE)	<ul style="list-style-type: none"> • Personal safety precautions and departmental/service safety procedures discussed with worker 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Requirements for use of PPE discussed and agreed 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Location, storage, maintenance, replenishment and reporting of faults discussed 		<input type="checkbox"/>
Duress Alarms If applicable	<ul style="list-style-type: none"> • Worker knows how to locate and activate emergency (duress) alarms 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Worker knows when alarm should be activated 		<input type="checkbox"/>
	<ul style="list-style-type: none"> • Worker aware of how to respond when an alarm is activated 		<input type="checkbox"/>

SECTION 2 – Employee’s New to HVDHB Only (not required for employees moving departments)		✓ – To Show Completed or N/A if not applicable
H&S Incident Reporting	<ul style="list-style-type: none"> Familiarisation with the SQUARE Reportable Events system and how to report an incident (especially Staff and Others H&S) 	<input type="checkbox"/>
H&S Intranet	<ul style="list-style-type: none"> Employee introduced to H&S intranet site including pages on Injury Management, H&S Incident Reporting etc. 	<input type="checkbox"/>
Mandatory Training	<ul style="list-style-type: none"> Employee introduced to MyPay and Ko Awatea LEARN (e-learning) and the mandatory training requirements for their role. Any in-house training must be booked and attended i.e. Nurse Mandatory Training Day which includes Moving & Handling, CPR, Infection Control 	<input type="checkbox"/>
EAP Services	<ul style="list-style-type: none"> Explain services available to employee Show employee where contact information is and how to access the services 	<input type="checkbox"/>
Mask Fit Testing (MFT)	<ul style="list-style-type: none"> Has the employee undergone Mask Fit Testing in the last 12 months? <input type="checkbox"/>No <input type="checkbox"/>Yes <input type="checkbox"/> If yes – What mask type was prescribed _____ Date Tested _____ If not, do they meet the requirements for MFT? <input type="checkbox"/>No <input type="checkbox"/>Yes - If yes, book an appointment for MFT http://intranet.huttvalleydhb.org.nz/policies-guidelines/workplace-health-and-safety/mask-fit-testing-mft/ 	

To be Completed by Employee/Student/Visitor with Special Status:	
Acknowledgement of Induction (Please tick if you agree):	
<input type="checkbox"/>	I agree to comply with HVDHB health and safety requirements including safety policies and procedures to ensure my own safety and that of others in the workplace.
<input type="checkbox"/>	I agree that if there is anything in the workplace that I do not understand, I will seek help from the person in charge of the workplace
<input type="checkbox"/>	I agree to immediately report any incident or hazard to the person in charge of the workplace
<input type="checkbox"/>	I agree to wear Personal Protective Equipment as required
<input type="checkbox"/>	I will not perform work tasks or operate equipment for which I do not have training or experience to safely do/operate
Signature:	<input type="text"/>
Date:	<input type="text"/>

To be Completed by Health & Safety Rep or Manager Delivering Induction:	
Name:	<input type="text"/>
Designation:	<input type="text"/>
Date of Induction:	<input type="text"/>

To be Completed by the Manager within 14 days of start date:
<p>For HVDHB Employees Only – Please email a copy of the completed document to Workplace Health and Safety as evidence that the person named above has completed their Health and Safety induction to the workplace. This will be followed up by Workplace Health & Safety if not received within 14 days of an employee’s start date. A copy will then be sent to HR to be filed on their personnel file.</p>

Evaluation of your Clinical Preceptor

Please return your evaluation to the Clinical Nurse Educators

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				

Describe what your preceptor did well

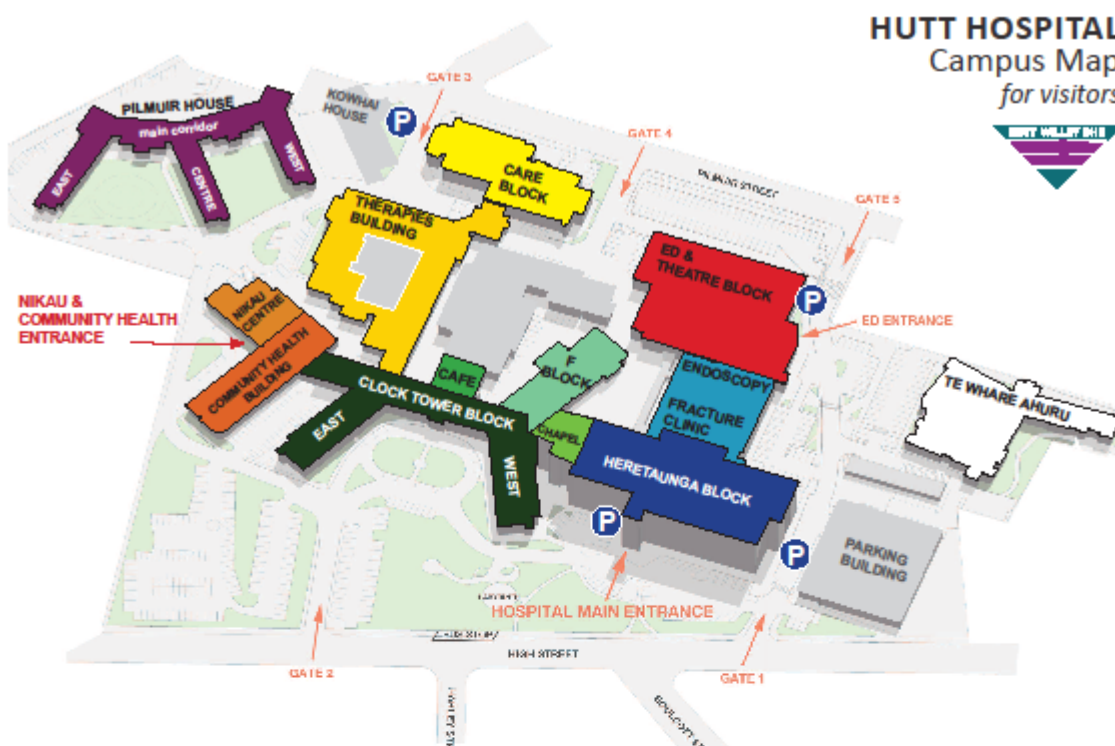
Describe anything you would like done differently

Signed: _____ Name: _____

Notes

Please use this space for notes.

Hospital Map



HUTT HOSPITAL
Campus Map
for visitors



NIKAOU CENTRE	
G	Infant, Child, Adolescent & Family Services (ICAFS)
COMMUNITY HEALTH BUILDING	
3	Community Health Service – District Nursing Social Work Service Community Physiotherapy Community Occupational Therapy
2	Regional Public Health
1	Regional Public Health
G	Paediatric Outpatients District Nursing – Dressings Clinic Plunket & Care Seat Rental Antenatal Room Transport office
CARE BLOCK	
1	Older Persons & Rehabilitation Service (OPRS) East & West Wards
G	OPRS Mental Health OPRS Outpatient Services
G	Breast Centre
THERAPIES BUILDING	
G	Physiotherapy Speech Therapy Occupational Therapy Child Development Service
PILMUIR HOUSE office block	

F BLOCK	
G	Equipment Store (collection and return)
CLOCK TOWER BLOCK	
1 EAST	Diabetes Dietitians Respiratory
1 WEST	Plastic, Maxillofacial & Burns Outpatients (Plastics and Burns Ward see Heretaunga Block)
G EAST	Dental
G Main corridor	Coffee Shop
G WEST	Ear, Nose, Throat (ENT) Audiology
KOWHAI HOUSE Accommodation	
TE WHARE AHURU (TWA)	
i	ENQUIRIES Ground Heretaunga Block at General Outpatients
P	PARKING PAY MACHINES • Main Entrance - Heretaunga Block • Gate 3 • ED Entrance • Parking building

THEATRE & ED BLOCK	
1	Operating Theatres Intensive Care Unit (ICU) Day Surgery Unit
G	EMERGENCY DEPARTMENT Medical Assessment & Planning Unit (MAPU) Orderlies
G	Fracture Clinic
G	Endoscopy & Medical Day Stay
HERETAUNGA BLOCK	
7	Building and property service
6	Coronary Care Unit (CCU) Cardiology Rheumatology Outpatients
5	Medical Ward
4	General Surgery & Gynaecology Ward (GSG) Orthopaedic Ward
3	Children's Ward Plastics & Burns Unit (Plastics Outpatients see CLOCK TOWER BLOCK)
2	Maternity & Post Natal Services Special Care Baby Unit (SCBU)
1	Laboratory Outpatients Pharmacy
G	General Outpatients & ENQUIRIES General Outpatients – Suite 2 Hutt Hospital Radiology MRI & CT Imaging Suites

Campus Map for Visitors