



*Paediatric
Ambulatory
Service*

The Paediatric Ambulatory Service (PAS)

The Paediatric Ambulatory Service at Hutt Valley District Health Board provides a professional and dynamic service to the children and families of Lower Hutt, Upper Hutt, Wainuiomata and occasionally the Wairarapa. We provide care to children aged 0-14 years. We also offer a regional service (lower North Island and the top of the South Island) for children requiring management of burns or plastic surgery.

Children's Health Philosophy

- ❑ We believe children should be treated as individuals with a right to dignity, privacy, safety and confidentiality.
- ❑ Children have the right to be involved in their own care, learn about their own health, and receive professional nursing care.
- ❑ We believe a family's social and financial factors, education, knowledge and cultural beliefs influence a child's perception of health.
- ❑ As nurses we can influence knowledge and attitudes to health through our roles as health educators/teachers.
- ❑ We see the family as an essential part of a child's life, and as a result the focus of our care is on the family.

Day 1 Checklist

- ❑ Provide PAS with emergency contact details (form in student folder)
- ❑ Locate roster folder and allocation book
- ❑ Locate resus trolley and car emergency kit
- ❑ Familiarise self with emergency procedures
- ❑ Familiarise self with the layout of the Children's Outpatients

Who to Contact

- ❖ For roster enquiries – Student Liaison
- ❖ For advice, education and resources – Nurse Educator
- ❖ For day to day patient queries – Preceptor or ACNM
- ❖ For complaints or issues - Nurse Educator, CNM, or Student Liaison
- ❖ To discuss future employment process – CNM

Clinical Nurse Manager – Sagni Prasad

Associate Clinical Nurse Manager – Tracy Paddock

Clinical Nurse Educator – Gabrielle Redmond

Student Liaison – Kath Grant

Children's Outpatients: (04) 570 9077

Welcome!!

We look forward to working with you!

Developed by: Gabrielle Redmond & Amy Brooks

Adapted for Paediatric Ambulatory Service by: Natalie Chiu

16-Oct-17

Your Preceptor

Hutt Valley District Health Board recognises that starting a new clinical placement can be a stressful and sometimes overwhelming experience. To help alleviate this, we aim to provide you with an individualized orientation programme where you and your preceptor(s) work together to identify your learning needs and plan to meet them within your clinical placement.

Your preceptor(s) will be the main people responsible for your orientation and your placement experience, and you will be allocated 1 or 2 main preceptors during your placement. We also have part time staff so although we try our very best to allocate you with the same preceptors, this may not always be possible due to individual and staffing needs.

Your roster can be found in the roster folder in the community nurse office. Your shifts will be highlighted along with the nurse you are working with that shift. You are responsible for familiarizing your roster and attending your rostered shifts. If there are any problems with your roster, or if you have specific requests please discuss them with the student liaison as soon as possible.

If you have any concerns or questions, do not hesitate to contact the above people.

Your Preceptors are:

Sickness

If you are sick and you need the day off, this is okay. You will be able to make up the time later. Please call the Children's Outpatients on **04 570 9077** to let us know you will be off sick, and how long for.

If you are feeling unwell during your shift, please let your preceptor or the ACNM know as soon as possible.

Expectations of the Student Nurse while on placement at PAS

There is only one shift in PAS: **Monday-Friday 0800-1630**

However there are a few shift codes that we use for the various roles we do:

V= Community Visits

NLA (P)= Nurse Led Activities Paediatric Day Procedures

NLA (E)= Nurse Led Activities Eczema Clinic

C= Clinic

L= Leave/day off

- It is expected that you arrive on time for your shift and if you are going to be late, or if you are unwell, please ring the receptionist on **5709077** and speak to your preceptor or leave a message.
- You must complete the full shift that you are allocated to work. If you are unable to do so please discuss this with your nurse, preceptor or nurse educator.
- We endeavor to give you a fair roster with continuity of preceptor(s). If you are unable to work the shifts you have been rostered you need to discuss this with the student liaison before any changes can be made.
- We do not expect you to have paediatric specific knowledge when you start this placement. Your preceptor will work with you to help you learn about assessment and management of a variety of paediatric conditions.
- Your preceptor or the nurse you're working with should be aware of your learning objectives. Please discuss these at the start of each day.
- If you are not achieving your objectives please see the Nurse Educator, your preceptor, or the student liaison before your last week on the ward.
- Third year students that are commencing their final placement need to identify early in their placement which preceptor will be fulfilling their documentation requirements and ensure their preceptor has an adequate time frame to complete these.
- Please ensure your uniform meets your institution standards and for infection control reasons that your uniform is clean, jewellery is removed and long hair tied back.

Safety Measures in PAS

Because PAS encompasses multiple services (i.e. Paediatric Day procedures, community visits and clinic), please apply these measures with common sense to each area.

- ❑ Never leave a baby/small child unattended on a bed.
- ❑ Always ensure cot / bed sides are up.
- ❑ Never leave drugs or other dangerous substances within reach of children.
- ❑ All medicines, both IV and oral, must be double checked by two registered nurses.
- ❑ All documentation must be kept up to date. If you are completing documentation yourself this needs to be double signed by the registered nurse you are working with.
- ❑ Patients, parents and visitors are not permitted in the staff only areas, i.e. staffroom, store and equipment cupboards, office and work station, due to safety and confidentiality issues.
- ❑ No hot drinks in the Day Procedure area or office – we must remind parents of this safety.
- ❑ Ensure the main door to Children’s Outpatients is kept shut.
- ❑ Use the appropriate sharps disposal system.
- ❑ Use discretion when giving information over the phone. There is also a book into which phone enquiries from people wanting medical advice are written.
- ❑ Know where all fire exits extinguishers and fire hoses are.
- ❑ Know what to do in an emergency situation or arrest – raise the alarm, dial 777, get the resuscitation trolley/emergency kit out of the car. Your CPR training should be recent and up to date.
- ❑ The resuscitation trolley is located near the clinic rooms.
- ❑ The resuscitation trolley is checked weekly to ensure it is stocked appropriately. This is done by a registered nurse, although it is a good idea for you to help check it regularly so that you familiarize yourself with its layout and the equipment inside.
- ❑ Keep equipment in the correct places and try to keep the store room uncluttered.
- ❑ Ensure all bed spaces have emergency equipment available – suction, oxygen, masks that are appropriate for the child’s age and size (Day Procedures).
- ❑ Ensure personal safety when out on community visits. This includes being aware of hazards such as dogs on properties, situations where you may feel unsafe or out of your comfort zone. Please ensure you have cellphone access with you when out on visits- either a personal cellphone or the community nurse will have a phone on them that has GPS tracking. If you feel unsafe when out on a community visit, please advise your preceptor.
- ❑ Personal cellphone use should be limited to break times only, or in a case of emergency as above.
- ❑ Wear appropriate uniform and covered shoes, particularly when out on visits.

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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.

- | | |
|---|---|
| <input type="checkbox"/> Controlled Drug Prescriptions | <input type="checkbox"/> Volumetric pumps |
| <input type="checkbox"/> Linen supplies | <input type="checkbox"/> Nappy store room |
| <input type="checkbox"/> CNM/ACNM/NE/Drs Office's | <input type="checkbox"/> Medication Resources |
| <input type="checkbox"/> Referral forms (MRI, ECG, ECHO etc) | <input type="checkbox"/> Sterile and non-sterile gloves |
| <input type="checkbox"/> Scales (chair, baby) | <input type="checkbox"/> Benzanthine Benzylpenicillin |
| <input type="checkbox"/> Staff tea room | <input type="checkbox"/> Student folder |
| <input type="checkbox"/> Blood tubes | <input type="checkbox"/> Bio-hazard bags |
| <input type="checkbox"/> X-ray facilities | <input type="checkbox"/> thermometer covers (tympanic and baby) |
| <input type="checkbox"/> Specimen bags | <input type="checkbox"/> Stationery supplies |
| <input type="checkbox"/> Specimen containers (urine/faeces) | <input type="checkbox"/> Photocopier |
| <input type="checkbox"/> Paediatric Day Stay (DSU/SAU) | <input type="checkbox"/> Patient charts/notes |
| <input type="checkbox"/> Dressing Supplies | <input type="checkbox"/> Laboratory forms |
| <input type="checkbox"/> Play room/Play therapists | <input type="checkbox"/> Sexual Abuse Kit |
| <input type="checkbox"/> Roster | <input type="checkbox"/> CAU |
| <input type="checkbox"/> Monitors and Saturation probes | <input type="checkbox"/> Resuscitation trolley |
| <input type="checkbox"/> Eczema resource trolley | <input type="checkbox"/> Education Board |
| <input type="checkbox"/> Urine dipsticks and specimen bags | <input type="checkbox"/> IV Fluids |
| <input type="checkbox"/> DCA Machine and equipment | <input type="checkbox"/> Doctors trays |
| <input type="checkbox"/> Reception in tray | <input type="checkbox"/> IV Trolley |
| <input type="checkbox"/> Blood sugar and ketone strips | <input type="checkbox"/> Oxygen supplies (tubing/masks etc) |
| <input type="checkbox"/> Laundry bags | <input type="checkbox"/> Dressing packs |
| <input type="checkbox"/> Incontinence pads (blueies) | <input type="checkbox"/> Portable suction |
| <input type="checkbox"/> Catheters | <input type="checkbox"/> Homecare referral slot |
| <input type="checkbox"/> Feeding Tubes | <input type="checkbox"/> Otoscope and Auriscope |
| <input type="checkbox"/> Education Pamphlets | <input type="checkbox"/> Nasogastric Tube Bag |
| <input type="checkbox"/> Cupboard for parents to pick up supplies | <input type="checkbox"/> Non sterile gloves |
| <input type="checkbox"/> Massimo Machine | <input type="checkbox"/> Road maps |
| <input type="checkbox"/> Gastrostomy Doll | <input type="checkbox"/> Oxygen cylinders |
| <input type="checkbox"/> Pregnancy tests | <input type="checkbox"/> Flow meters |

Common Presentations and referrals to PAS

Children are referred to the service for a variety of conditions/treatments, which include:

Paediatric Day Procedures

- Hormone testing
- Intravenous infusions
- Immunisations
- Food allergy testing
- Medication administration

Paediatric Community Service

- Wound care and dressings e.g. burns, surgical wounds
- Blood tests
- Continence support
- Eczema care and treatment
- Nutriton and enteral feeding support (including NGT and gastrostomy feeding)
- Rheumatic Fever medications (Monthly Benzathine Benzylpenicillin IM injections)
- Complex care at home support (home oxygen, suction)
- Home intravenous care (e.g. PICC line antibiotics)

Home Care Service (a division of the Paediatric Community Service)

- Respiratory Assessment
- Post-ward follow-up (phone or home-visit)
- General nursing assessment
- Equipment supply e.g. apnoea monitors

Paediatric Outpatients (Clinic): Referrals are made by GPs, Plunket Nurses, other DHB paediatricians, Child Development Service and community health services. Our paediatricians may see children for these various reasons:

- Behavioural and associated learning disability needs
- Medical diagnoses e.g. respiratory, renal, endocrine, cardiac and neurological disorders
- Sleep disorders
- Adolescent mental and physical health
- Congenital disorders (Genetics clinics are also run by Wellington Genetics)

Common Medications

Administration of drugs is an important factor in nursing. Administering drugs to children is different than adults. Drug doses are calculated by the child's weight, therefore it is important to check a child's weight with the most recent visit. It's the PAS policy that EVERY drug (IV, oral, PR, inhalers, nebs etc) is checked by two registered nurses prior administration. It is vital that you know these drug calculation formulas.

PILLS/TABLETS:

$\frac{\text{Want}}{\text{Got}} = \text{Dosage required}$

Got

LIQUIDS:

$\frac{\text{Want}}{\text{Got}} \times \text{mls} = \text{Dosage required}$

Got

Remember to check the 5 R's when administering any medications:

- Right patient
- Right drug
- Right dose
- Right route
- Right time

Drug charts should routinely be checked to ensure they are correct and up to date. This includes the child's correct details, their most recent weight, and whether the child has any allergies. If you are unsure about any of the medicines a child is prescribed, the red Paediatric Pharmacopoeia is a good guide to check dosages and administration routes.

Common medications used in PAS include:

- IV antibiotics e.g. Flucloxacillin
- IM antibiotics e.g. Benzathine Benzylpenicillin
- Oral and IV steroids e.g. Prednisolone, Methylprednisolone
- Oral medications e.g. paracetamol, loratadine
- IV infusions e.g. Infliximab
- IV fluids e.g. 0.9% Sodium Chloride
- Blood products e.g. Intragam P
- Topical treatments e.g. silver nitrate, fucicort, viaderm, fatty cream, hydrocortisone

References

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Kaviani, N. & Stillwell, Y. (2000). An evaluative study of clinical preceptorship. Nurse Education Today, 20, 218-226.

Redmond, G. (2009). *Children's Ward Orientation Package for Ward Nurses*. Lower Hutt: Hutt Valley District Health Board

Upchurch, A. (2008). *Burns and Plastics Unit Orientation Package for Ward Nurses*. Lower Hutt: Hutt Valley District Health Board

Evaluation of your Clinical Preceptor

Please return your evaluation to Gabrielle (Nurse Educator)

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: _____

Cut along line

Notes