



Profile of Learning Opportunities (PoLO)

for nursing and midwifery students in practice



Practice Placement: Coptcoat ward



Introduction to the Ward / Unit

Welcome to: Coptcoat ward, at King's College Hospital, Denmark Hill, a friendly multidisciplinary team, who share the same goal to provide excellent patient care.

The ward was named after Mr Malcolm John Coptcoat, a Consultant Urologist, who served as Director of Surgery from 1992 to 1994. As a specialist in laparoscopic surgery he performed the first laparoscopic nephrectomy for renal carcinoma.

Coptcoat is a 15 bedded Elective Surgical Ward caring for patients during the pre and post-operative stages of surgery. The ward is closely linked with a Short Stay Surgical Unit - a 10 trolley bedded, 48 hour maximum stay unit - where you will also spend some time with your mentor.

Patients may be admitted to the ward from: the admissions lounge, via the Out Patients Department, transferred from other wards, other hospital Trusts or as 'step down' from the Intensive Care Unit. In following the patient's surgical pathway, from pre-assessment to post op care and on to discharge, you will gain a diverse experience in caring for patients within the following specialities for a variety of surgical procedures:

- Bariatric
- Upper gastrointestinal
- Liver
- Urology
- Orthopaedic
- Hepatobiliary
- Colorectal
- Maxillofacial

Location

We are located: on the 4th Floor Centenary Wing, accessed via 2nd Floor Cheyne Wing.

Ward / Unit telephone: 020 3299 9000 extension 5362

Welcome to the team

Ward / Unit Manager is: Matron Regina Steer reginasteer@nhs.net

Modern Matron is: Matron Regina Steer reginasteer@nhs.net

Student co-ordinator is: Claire Hayzer clairehayzer@nhs.net

Practice Development Nurse is: Dhawali Ogletree dhawaliogletree@nhs.net and Sylvie Leung Sylvie.leung@nhs.net

The ward team consists of:

- Registered Nurses
- Health Care Assistants
- Volunteers
- Chaplaincy
- Domestic / Housekeeper
- Surgical Consultant teams
- Medical Consultant teams
- Physiotherapists
- Pharmacist
- Occupational therapists
- Dieticians
- Social workers
- Speech and language therapists

Clinical nurse specialists for example:

- Continence
- Diabetes
- Discharge co-ordinator
- Tissue viability
- Stoma nurse
- ERAS (enhanced recovery)
- Early discharge
- Colorectal CNS
- Palliative care team
- Pharmacist

Coptcoat Ward Philosophy - *“To provide excellence in care”*

“Here on Coptcoat ward we strive for excellence in care. We endeavour to provide quality care for our patients, and we continuously aim to better ourselves and the environment we work in. We do this through our BIG 4 as part of our safer care initiative, and as a student and a valued member of our team, we encourage you to be part of this”

Shift pattern students may follow

5 day week 7 day week Weekends

12 hour shift: Early start 07.30 to 20.15hrs

Night shift 19.30 to 08.15hrs

Staffing establishment

Registered Nurses – Early shift = 5 (4 at w/end)

Night shift = 3 (3 at w/end)

Health care assistants – Early shift = 1 (1 at w/end)

Night shift = 1 (0 at w/end)

Meal breaks

You are permitted a 2 x 45 minute break on a 12 hour shift (includes coffee break)

To contact colleagues:

Bleeping:

Dial 736 followed by the bleep number and the extension you wish to be called back on. Wait for the long tone and replace the receiver

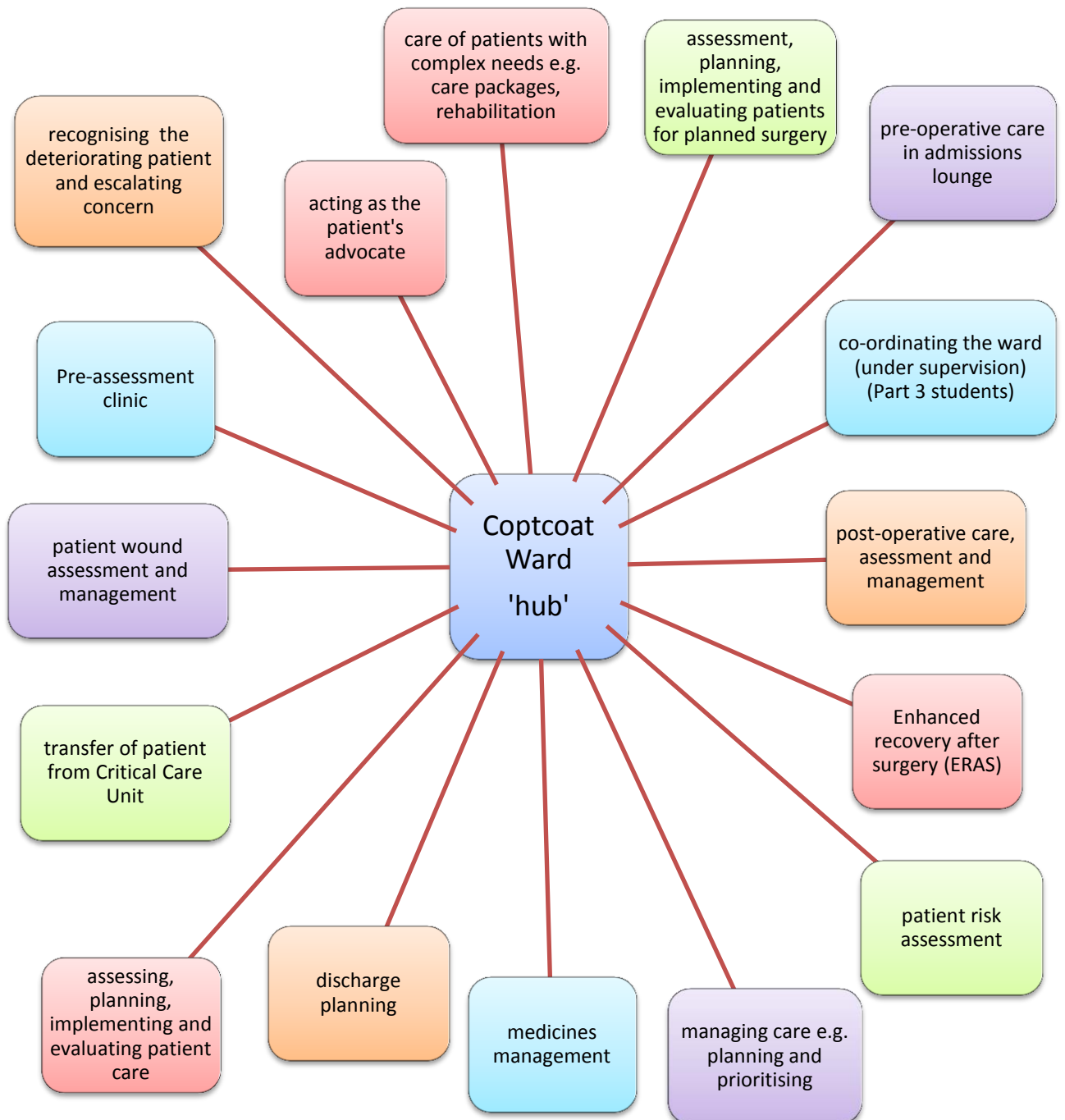
Air calling and Paging:

Dial *736 -the operator will ask for your 'call sign' (i.e. page number e.g. KH 6789) and your message. This is then sent to the person you are trying to contact

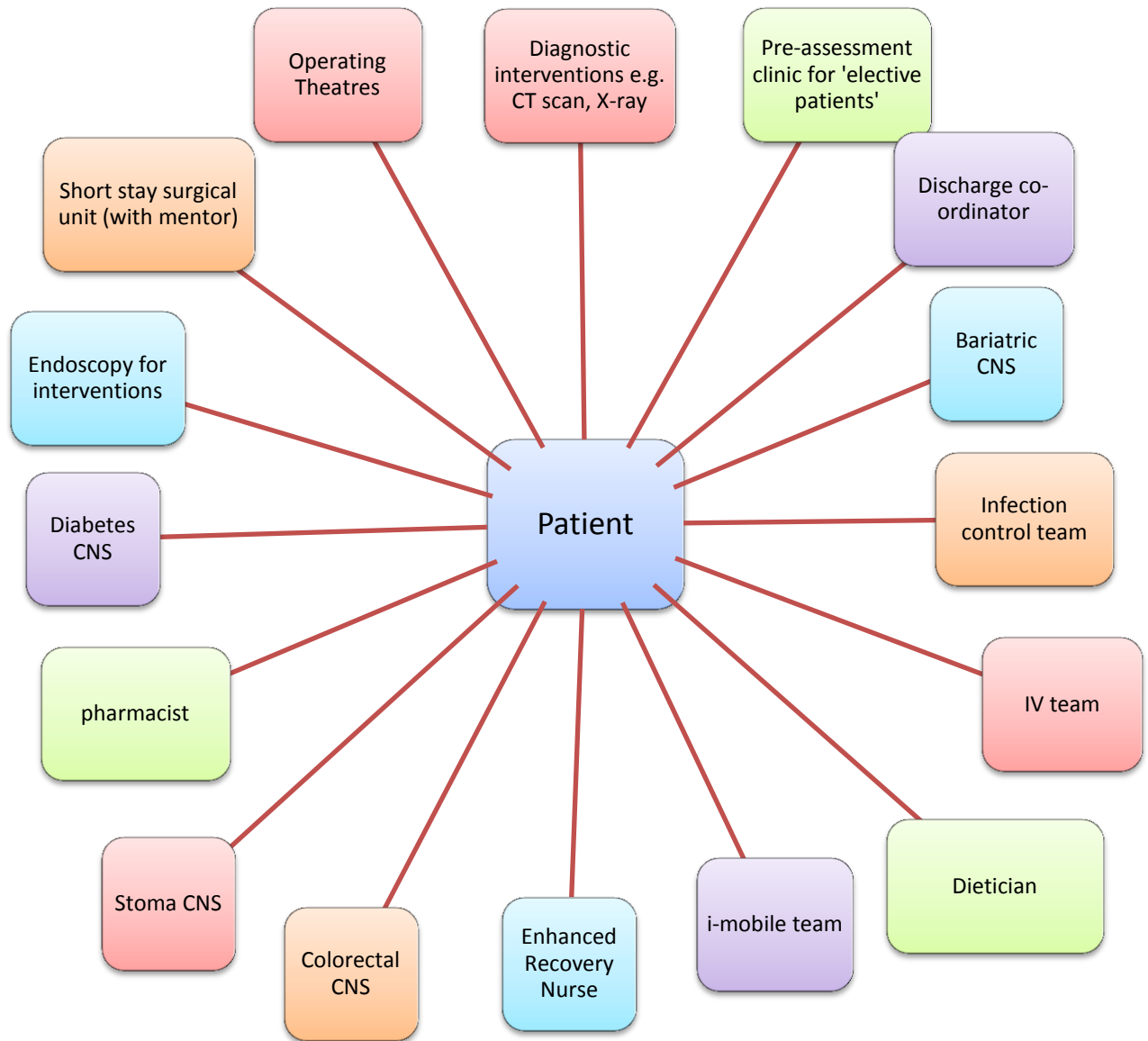
Useful numbers

Cardiac arrest	2222
Fire	2222
Security	2444
Senior Nurse Surgery	Bleep 143
Bed Manager	Bleep 390
Clinical Site Practitioner	Bleep 333

Hub and Spokes for Coptcoat ward



Hub and Spokes following the patient journey



Core Learning Opportunities for Surgery (Under Supervision): ward based

Participate in the assessment of individuals requiring elective surgery pre and post op for example:

- ❖ Nephrectomy e.g. renal tumour
- ❖ Colorectal e.g. bowel resection
- ❖ Bariatric e.g. metabolic related
- ❖ Orthopaedic surgery/procedures e.g. arthroscopy

You may participate in /observe /identify (with context related examples):

- Applying / measuring and interpreting clinical observations e.g. pain, weight
- Recognising the deteriorating patient e.g. pyrexia, abnormal respiratory rate, NEWS
- Developing skills in the use of related equipment under supervision e.g. dynamap
- Observing diagnostic procedures e.g. X-ray, venepuncture, bladder scan
- Developing / enhancing communication skills e.g. questioning skills, listening skills
- Obtaining specific specimens as required e.g. MSU, stool, wound swabs, MRSA screening
- Attending pre-assessment clinic
- Risk assessment e.g. venous thromboembolism (VTE) prevention
- Documentation e.g. admission procedure, confidentiality
- Identifying the patient's health & social care needs for discharge

The learning opportunities above are mapped against the Professional Values, Essential Skills and Practice Assessments in your PLPAD and presented in the box below. This will assist you to identify and plan for what you could achieve.

Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 4, 5, 6, 8-10, 12, 13	1-4, 6-9, 12, 13, 19, 20, 21, 22, 25-27, 30 Part 1 Practice Assessment 'Episode of Care'
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 4, 5, 7, 9, 10, 11, 18, 22, and Part 2 Practice Assessment 'Episode of Care'
BSc Part 3 and PGDip Part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	1, 2, 13, 16, 17, 18, 23, 24, 27, 29, 43, 49, 52, 53, 54, 55, 62, 66, 69 Part 3 Practice Assessment 'Episode of Care' and 'Medicines Management'

Core Learning Opportunities (Under Supervision):

Participate in the assessment of patients with complex needs – for example:

- ❖ Patients with co-morbidities e.g. chronic kidney disease/cardiovascular disease
- ❖ Patients who require life changing surgery e.g. stoma formation/limb reconstruction

You may participate in/ observe/identify (with context related examples):

- Developing / enhancing observational skills e.g. pain assessment
- Applying / measuring and interpreting clinical observations e.g. blood glucose, blood pressure
- Psychological assessment e.g. change of body image, end of life care, inability to sleep adequately, ability to cope with surgery and post op care
- Developing / enhancing communication skills e.g. breaking bad news
- Analysing situations e.g. deteriorating patient
- Prioritising patient need e.g. 'fast track' discharge, ERAS
- Decision making e.g. criteria for discharge
- Risk assessment e.g. mobility / pressure ulcer
- Identifying the patient's health & social care needs
- Reason for surgery and different procedures

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BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 4, 5, 7, 9, 10, 11, 18, 22, and Part 2 Practice Assessment 'Episode of Care'
BSc Part 3 and PGDip part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	1, 2, 13, 16, 17, 18, 23, 24, 27, 29, 43, 49, 52, 53, 54, 55, 62, 66, 69 and Part 3 Practice Assessment 'Episode of Care' and 'Medicines Management'

Core learning Opportunities (Under Supervision): ward based

Participate in the planning of individualised patient centred care for example:

- ❖ Pre-operative e.g. pre-op procedure, anticipate patient need post op
- ❖ Post-operative e.g. changes to anticipated plan of care due to patient's immediate needs
- ❖ Anticipated patient's length of stay e.g. one day to one week

You may participate in/ observe/identify (with context related examples)

- Prioritisation of patient need e.g. deteriorating patient, escalating concern
- Preparation for surgery e.g. procedure, transfer of care
- Preparation of bed space for patient returning post operatively
- Decision making e.g. MDT working/involving patient and family
- Patient inclusion e.g. informed consent / capacity
- Patient centred care e.g. determine patient's priorities / preferences
- Documentation e.g. confidentiality, pre-op checklist
- Multi-disciplinary working e.g. discussion during ward rounds
- Communication e.g. cultural / ethnic diversity, listening to patient / family
- Discharge / care transfer planning

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BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 4, 5, 16, 17, 18, 22, 43, and Part 2 practice Assessment 'Episode of Care'
BSc Part 3 and PGDip Part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	2, 8, 11, 13, 16, 17, 23, 24, 28, 41, 53, 67, 70 and Part 3 Practice Assessment 'Episode of Care'

Core learning Opportunities: (Under Supervision) – ward based

Participate in implementing patient centred care (pre and post op), and nursing interventions, promoting identity and inclusion for example:

- ❖ Pre-operative: preparing for bowel surgery, orthopaedic surgery
- ❖ Post-operatively: following hemi-colectomy, trans urethral resection of prostate (TURP) and trans urethral resection bladder tumour(TURBT)
- ❖ Enhanced recovery

You may participate in/ observe/identify (with context related examples)

- Functional needs e.g. transferring patient from bed to chair following major abdominal surgery
- Meeting hygiene needs e.g. providing full personal care, maintaining privacy and dignity, skin integrity
- Meeting elimination needs e.g. stoma care, urethral and supra-pubic catheter, incontinence (urine or faecal), related equipment
- Meeting mobility needs e.g. pain management, post op instructions e.g. non weight bearing
- Meeting psychological needs e.g. pre-op anxiety, change of body image (stoma formation)
- Meeting nutritional needs e.g. pre-op fasting, assisting with meals, total parenteral nutrition, referring to Dietician, protecting meal times
- Maintaining fluid balance e.g. IV infusion , wound drains, monitoring fluid input and output
- Care specific to identified risk e.g. deteriorating patient, haemorrhage, skin integrity
- Care evaluation, re-assessment and review e.g. acute / recovery with patients / family
- Communication e.g. with MDT (stoma nurse), explaining procedure to patient pre-op, receiving handover of from other department/colleague, maintaining confidentiality
- Palliative care e.g. referral to external agencies, palliative care team
- Documentation and record keeping e.g. fluid balance chart, observations pre and post op
- Performing clinical observations post operatively e.g. during blood transfusion
- Medicines administration e.g. analgesia, bowel preparation
- Infection prevention and control
- Manual handling e.g. bariatric care, equipment
- Wound care e.g. Aseptic Non Touch techniques (ANTT)

- Patient education e.g. nutrition, stoma care
- Reducing risks post – surgery e.g. wearing anti-embolic stockings, VTE prevention, PPE requirements

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BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	1, 3, 5- 7, 9, 10, 12, 13, 16- 18, 22, 27, 28, 32-36, 38, 41, 42- 43, 49, 50, 51 and Part 2 Practice Assessment 'Episode of Care'
BSc Part 3 and PGDip Part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	1, 2, 3, 7, 8, 13, 14, 16-18, 20-22, 24, 25, 27, 29, 43, 46, 47, 49, 52, 53, 56, 59, 60, 62, 67, 70, 71, 76-78, 84, 82, 84, 87-89 and Part 3 Practice Assessment 'Episode of Care' and 'Medicines Management'

Core Learning Opportunities (Under Supervision) – ward based:

Participate in the administration of prescribed medication using a variety of routes.

You may participate in administering/observe (with context related examples)

- Oral e.g. tablets, liquids
- Injections subcutaneous and intra-muscular e.g. VTE prophylaxis
- Medication dose calculations
- Observation only of IV drug administration and checking intravenous cannula site
- Syringe drivers/Patient Controlled Analgesia (PCA)
- Management of patient with an epidural
- Observe blood transfusion procedure and monitor patient during transfusion
- Pre-operative e.g. bowel preparation (enema)
- Access British National Formulary (BNF)
- Correct medicines administration procedure e.g. '5 rights'

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BSc Part 1 and PGDip Part 1	1, 2, 5- 10, 12, 13	35, 36, 37
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 12, 13	49, 50, 51 Part 2 'Medicines Management'
BSc Part 3 and PGDip Part 3	1, 2, 4, 5- 14	78, 79, 82, 83, 84, 87, 88 and Practice Assessment Part 3 'Medicines Management'

Core Learning Opportunities (Under Supervision) – ward based:

Participate in the assessment of patient risk for example:

- ❖ Pre-operatively
- ❖ Post operatively

You may participate in/ observe/identify (with context related examples)

- Tissue viability e.g. preventing pressure ulcer, skin assessment
- Deteriorating patient e.g. NEWS score
- Falls e.g. guard rails assessment, using mobilisation aids
- Nutrition / Hydration e.g. nil by mouth status
- Mobility e.g. walking with crutches, Venous Thromboembolism (VTE)
- Continence e.g. restricted mobility
- Manual Handling e.g. equipment, hoist
- Infection control e.g. MRSA screening
- Disability e.g. learning disability and specific needs
- Safe guarding e.g. mental capacity
- Health and Safety
- Medicine management

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BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 11, 12, 13	4, 7, 10, 13, 22, 37, 41, 44, 48
BSc Part 3 and PGDip Part 3	1, 2, 4, 6, 7, 9, 10, 13, 14	5, 23, 29, 42, 43, 46, 47, 53, 55, 62, 66, 69, 73, 76, 90

Core Learning Opportunities (Under Supervision) – ward / unit based

Participate in preparing for patient discharge /care transfer /handover for example:

- ❖ Patient transfer to and from Theatres
- ❖ Preparing for patient to be discharged home
- ❖ Patient transfer from Out Patient Clinics
- ❖ Patient transfer from Critical Care ‘step down’

You may participate in/ observe/identify (with context related examples)

- management of complex discharge
- effective handover at shift change e.g. using ‘dictaphone model’
- transfer to and from another clinical area e.g. giving and receiving information
- documentation process
- discharge process e.g. referrals to external agencies
- MDT and other agencies working
- Early discharge team
- Patient/family support / involvement
- District nurse referrals
- CNS referrals

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BSc Part 1 and PGDip Part 1	1, 2, 5, 8, 9, 12,13,	1, 2, 4, 6, 8, 9, 19,
BSc Part 2 and PGDip Part 2	1,8, 9, 12, 13	1, 3, 4, 5, 16, 17, 18,
BSc Part 3 and PGDip Part 3	1, 2, 6, 9, 10, 13, 14	1, 2, 3, 7, 8, 9, 10, 11, 13, 16, 17, 24 and Part 3 Practice Assessment ‘Episode of Care’

Specific Learning Opportunities (Under Supervision) ward based

Care and management of a patient's wound for example:

- ❖ Abdominal wound following bowel surgery
- ❖ Pressure ulcer
- ❖ Management of wound drains

You may participate in / observe /identify (with context related examples):

- Post op wounds (surgical wound)
- Pressure ulcer e.g. assessment/prevention
- Aseptic Non Touch Technique (ANNT)
- VAC pump treatment
- PICO treatment
- Wound drains e.g. 'Readvac' (abdominal)
- Pain assessment / management
- Wound assessment e.g. stage of healing/infection
- Patient psychological support
- Contributory factors for wound healing e.g. nutrition
- Tissue Viability Nurse (TVN)

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BSc Part 1 and PGDip Part 1	1, 2, 4-12	1, 4, 6, 25-29
BSc Part 2 and PGDip Part 2	1, 2, 4-12	6, 9, 10, 11, 12, 27, 32, 33
BSc Part 3 and PGDip Part 3	1, 2, 4-14	1, 2, 13, 52, 59, 60, 62, 78, 82, 84

Specific Learning Opportunities (Under Supervision) ward based:

Skills / strategies to communicate with patients with cognitive, and / or sensory impairment

You may participate in/ observe (with context related examples):

- Patients with a hearing impairment/wearing hearing aid/fitting hearing aid
- Patients with a visual impairment
- Non-English speaker e.g. interpretation service
- Non-verbal communication
- Alternative forms of communication e.g. word boards
- Patient with specific communication needs
- Patient who have learning disability e.g. liaise with carer/family

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BSc Part 1 and PGDip Part 1	1, 2, 5, 6, 8, 9, 12, 13	1, 2, 3, 4, 7, 8
BSc Part 2 and PGDip Part 2	1, 2, 5, 6, 8, 9, 12, 13	1, 5
BSc Part 3 and PGDip Part 3	1, 2, 6, 7, 9, 10, 13, 14	1, 2, 3, 13, 14, 16, 18, 19, 24

Core Learning Opportunities (Under Supervision) – ward based

Participate in working within a multi-disciplinary team for example

You may participate in (with context related examples)

- Working alongside colleagues during patient interventions e.g. physiotherapist
- Multidisciplinary Team (MDT) board meeting
- Ward rounds with Consultant
- Bed management meetings (part 3)

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BSc Part 1 and PGDip Part 1	1, 2, 5, 4, 6, 12, 13	1, 8, 14
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 12, 13	1, 5, 18,
BSc Part 3 and PG Dip Part 3	1, 2, 4, 5, 6, 7, 9, 11, 13, 14	1, 2, 3, 16, 17, 20, 24, 35, 43

Specific Learning Opportunities (Under Supervision) ward based:

Preparing a patient for and observing diagnostic procedures

You may participate in and / or observe (with context related examples):

- Procedure for preparing patient e.g. checklist, providing information to the patient, and transferring care of the patient to the relevant team
- CT scan
- Ultrasound scan (USS)
- Electrocardiogram (ECG)
- X-ray
- Endoscopy
- Observe role of health professional

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BSc Part 1 and PGDip Part 1	1, 2, 5, 6, 8, 9, 12, 13	1, 4, 7, 8, 12, 21, 23, 25
BSc Part 2 and PGDip Part 2	1, 2, 5, 6, 8, 9, 12, 13	1, 6, 12, 16, 17, 18
BSc Part 3 and PGDip Part 3	1, 2, 6, 7, 8, 9, 10, 13, 14	1, 2, 7, 20, 24

Specific Learning Opportunities ward based:

'Shadowing' to observe the role of other health and social care professionals within the context of individual patient need:

You may participate in / observe activities undertaken by (with context related examples):

- Contenance CNS
- Tissue Viability CNS
- Diabetes CNS
- Falls Prevention team
- Stoma nurse
- Early recovery nurse
- Bariatric CNS
- Physiotherapist
- Occupational Therapist
- Dietician
- Chaplaincy
- Early discharge team

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BSc Part 1 and PGDip Part 1	N/A	N/A for part 1 students
BSc Part 2 and PGDip Part 2	1, 2, 4, 5, 6, 8, 9, 12, 13	1, 18
BSc Part 3 and PGDip Part 3	1, 2, 4, 5, 6, 7, 9, 10, 12, 14	1, 2, 16, 24

Specific Learning Opportunities (Under Supervision) ward based:

Management of a group of patients under supervision: including assessing, planning, implementing and evaluating care – depending on patient need/acuity.

- ❖ Part 2 students the opportunity to develop/enhance skills and contribute to Part 2 Practice Assessment Episode of Care
- ❖ Part 3 students the opportunity to enhance skills and contribute to Part 3 Practice Assessment Episode of Care

You may participate in and develop/enhance skills in (with context related examples):

- Prioritisation of patient needs
- Problem solving
- Decision making
- Communication e.g. MDT
- Team working e.g. role limitation
- Leadership e.g. raising concerns
- Delegation
- Supervising others

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BSc Part 2 and PGDip Part 2	1-13	1, 3, 4-13, 16-19, 22, 26, 27, 28, 33, 34-37, 38- 44, 49-51
BSc Part 3 and PGDip Part 3	1-14	1, 2, 7-14, 16-25, 27, 31, 34, 35, 39 - 41, 53, 56-59, 63, 64, 66-73, 75-78, 81, 82-84, 88, 89

Specific Learning Opportunities (Under Supervision) ward based:

Participating in co-ordinating the ward / patients need for a shift (Part 3 only) – developing / enhancing skills in:

- Analysing situations e.g. deteriorating patient, patient progress and planned discharge
- Prioritisation e.g. time of patient planned operation, planning discharge/transfer/need and action to take
- Problem solving e.g. skill mix of team
- Decision making e.g. liaising with bed manager
- Communication e.g. dealing with telephone enquiries
- Team working e.g. MDT working, skill mix
- Leadership e.g. raising concerns and escalation process, observing leadership styles/role model
- Delegation
- Participating in clinical audit (when undertaken)
- Supervising others e.g. ensuring staff rest time

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BSc Part 2 and PGDip Part 2	N/A	N/A
BSc Part 3 and PGDip Part 3	1-14	1, 2, 12, 17, 19 ,28, 29, 34-42, 45, 48, 56, 57, 79, 80, 85, 86 and Part 3 Practice Assessment 'Episode of Care'

Specific Learning Opportunities (Under Supervision) ward based:

Care of patient with enteral feeding requirements for example:

- ❖ Following bowel surgery

You may participate in / observe/identify (with context related examples):

- Percutaneous Endoscopic Gastrostomy (PEG)
- Naso Gastric (NG) tube and Nasojejunal (NJ) tube e.g. following best practice/ correct checking procedure, patient comfort, pressure relief from tube
- Total Parenteral Nutrition (TPN) e.g. participating in calculating rate
- Developing awareness of equipment to set up
- Fluid balance e.g. recording input and output
- Psychological support
- Providing mouth care (if patient nil by mouth)

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BSc Part 2 and PGDip Part 2	1, 2, 4-9, 11-13	11, 35, 36-38, 40, 41
BSc Part 3 and PGDip Part 3	1, 2, 4-11, 13, 14	63, 64, 66, 67, 68, 69, 70, 72, 74

Specific Learning Opportunities (Under Supervision): ward based

Assessment and management of the deteriorating patient for example:

You may participate in /observe skills relating to (with context related examples):

- A-E assessment
- Recognising the deteriorating patient e.g. NEWS
- Escalating concern
- Application of observational assessment skills e.g. observing for pallor
- Measuring vital signs e.g. blood pressure, respiratory rate
- Participating in administration of prescribed medication e.g. intravenous fluids infusion
- Observe for sign of haemorrhage e.g. wound drains, pain, tachycardia, wound dressing intact
- Monitoring patient response to treatment
- Communicating with the Multi- Disciplinary Team e.g. SBAR
- Maintaining patient safety
- Psychological patient support

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BSc Part 2 and PGDip Part 2	1, 2, 5-13	5, 7, 10, 12, 18, 41, 49, 51
BSc Part 3 and PGDip Part 3	1, 2, 6-7, 9-11, 13	2, 7, 11, 13, 16, 17, 19, 24, 27, 29, 36, 39, 59, 75, 76, 78

Specific Learning Opportunities (Under Supervision): ward based

Participate in the care of the patient post formation of stoma for example: colostomy, ileostomy

You may participate in/ observe/identify (with context related examples):

- Identify reasons for stoma formation
- Identify stoma position relating to surgical operation performed
- Application of associated anatomy and physiology
- Observe and monitor drainage/faeces passing stoma
- Care of stoma and surrounding tissue
- Record and document stoma action
- Provide psychological support for patient in relation to change of body image
- Identify stoma appliances/drainage bags available
- Application of stoma appliances
- Patient support and guidance to develop self- care
- Referral to Stoma Nurse
- Identify role of Stoma Nurse

The learning opportunities above are mapped against the Professional Values, Essential Skills and Practice Assessments in your PLPAD and presented in the box below. This will assist you to identify and plan for what you could achieve.

Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 5, 8, 9	1, 3, 4, 6, 8, 24, 25, 30, 31 and Part 1 Episode of Care
BSc Part 2 and PGDip Part 2	1, 2, 5, 8, 9	4, 10, 11, 12, 24, 26, 27, 31, 32, 33, 35, 36
BSc Part 3 and PGDip Part 3	2, 6, 9, 10	1, 7, 9, 11, 23, 24, 25, 59, 67, 70

Specific Learning Opportunities (Under Supervision): ward based

Participate in the care and management of the patient requiring Continuous Positive Airway Pressure for example for:

- ❖ Post- surgery respiratory failure
- ❖ Acute respiratory failure

You may participate in/ observe/identify (with context related examples):

- Reason for treatment
- Application of related anatomy and physiology
- Assessing, measuring and monitoring cardio-respiratory observations e.g. oxygen saturation, patient conscious level, NEWS, skin colour
- Providing psychological support e.g. patient feeling isolated, anxious
- Communication e.g. enhancing non-verbal skills
- Observing taking arterial blood gases – baseline and subsequent
- Recognise relevance of blood gases assessment and monitoring
- Providing patient education and guidance
- Preparation and correct fitting of equipment e.g. face mask, nasal cannula
- Medication administration e.g. Oxygen prescription, monitoring flow rate
- Assessing for and managing side effects e.g. loss of appetite, abdominal distension
- Meeting nutritional needs e.g. consider meal size, refer to dietician, supplements
- Fluid balance e.g. ensuring adequate intake
- Documentation
- Management of oxygen therapy side effects e.g.
 - drying of nasal/oral mucosa
 - provide mouth care
 - pressure relief from mask/nasal cannula
 - humidification skin protection
 - liaise with physiotherapist

The learning opportunities above are mapped against the Professional Values, Essential Skills and Practice Assessments in your PLPAD and presented in the box below. This will assist you to identify and plan for what you could achieve.

Adult Programme and Part 1, 2 or 3 as per PLPAD	Professional Values statements in PLPAD	Essential Skills PLPAD Outcome Number
BSc Part 1 and PGDip Part 1	1, 2, 5, 8, 9, 11, 12	1, 2, 4, 6-8, 12, 13, 19, 22, 23, 25, 30, 32-34, 36, 37 and Part 1 Episode of Care
BSc Part 2 and PGDip Part 2	1, 2, 5, 8, 9, 11, 12	1, 3, 5, 7, 9-12, 26, 27, 35, 37, 40, 41, 43-46, 49, 51 and Part 2 Episode of Care
BSc Part 3 and PGDip Part 3	1, 2, 6, 8, 9, 10, 12, 13	1, 2, 7, 13, 14, 16-18, 23, 24, 27, 29, 43, 46, 49, 51, 52, 59, 63, 64, 66-72, 79, 82, 87, 88 and Part 3 Episode of Care

Reflective learning log

This reflective learning log may be used (**optional**) by you to record learning activity undertaken during a spoke visit / learning opportunity. It provides you with additional evidence on which to focus discussion with your mentor as part of formative feedback. Additionally it serves as a reminder for your personal reflection.

Spoke learning opportunity: _____

Date / time: _____

Learning opportunities identified:

Comments / feed forward from practitioner in area:

Practitioner's signature: _____

Student Reflection Comments:

Student name / signature: _____

Student Placement Evaluation

Please provide the practice team with feedback on your learning experience by answering the questions below, and make any comments you wish to be considered. Please give this to your mentor/ward manager/PDN/CPF or PDM/MPF before you leave. Thank you.

Domain 1 - Establishing effective working relationships (NMC 2008)

Did you receive an orientation to the practice placement?

Domain 2 – Facilitation of learning (NMC 2008)

How did you identify and select appropriate learning opportunities?

Domain 3 – Assessment and accountability (NMC 2008)

How were you provided with feedback on your development and progress?

Domain 4 – Evaluation of learning (NMC 2008)

Were you allocated a mentor and how much time did you spend with them?

Domain 5 – Create an environment for learning (NMC 2008)

How did your mentor and the practice team facilitate your learning?

Domain 6 – Context of practice (NMC 2008)

What did you learn about the specific nature of care provided in the placement?

Domain 7 – Evidence-based practice (NMC 2008)

How were you supported in applying an evidence base to your practice learning?

Domain 8 – Leadership (NMC 2008)

How well were your learning needs met?

How could we enhance your learning experience?

Please make any further comments in the box below.

Thank you for taking the time to complete this evaluation

Reference: Nursing and Midwifery Council (2008). *Standards to support learning and assessment in practice*. Online available from www.nmc-uk.org

Suggested reading:

Department of Health 2009 'Enhanced recovery for elective surgery' online available from: www.evidence.nhs.uk/qualityandproductivity accessed December 2016

Lapham, R. and Agar, H. (2009) *Drug Calculations For Nurses* (3rd Edition). Hodder and Arnold: London

Royal College of Nursing (2007) *Helping students get the best from their practice placements*. Online available from www.rcn.org.uk/publications/pdf

The National Institute for Health and Care Excellence (NICE) (2010) *Venous thromboembolism in adults admitted to hospital: reducing the risk*. Online available from <https://www.nice.org.uk/guidance/cg92>

Useful sites:

European Association of Urology (EUA) www.uroweb.org

The National Institute for Health and Care Excellence (NICE)
<http://www.nice.org.uk/guidance/>

www.doh.gov.uk for Discharge Planning Guidelines

