

PRACTICE LEARNING ENVIRONMENT PROFILE

Learning Environment (Care Group): **CARDIOVASCULAR AND THORACIC** Division: **D**

GENERAL INFORMATION

Education lead	Brooke Sheath	
Clinical Practice Educator	Jenny Cuthbertson	
Cardiac Education Team	CVTEducation@uhs.nhs.uk	
UHS VALUES	<p>PATIENTS FIRST WORKING TOGETHER ALWAYS IMPROVING</p>	Please reflect on what these values mean to <u>YOU</u>

USEFUL LINKS



LIBRARY



UHS



GETTING HERE



CQC



NMC



WELCOME LETTER



NHS ENGLAND



HCPC

INDUCTION INFORMATION

Trust induction	Your induction may take one of the following formats: Trust induction, divisional induction or placement induction. Please ensure completion of any relevant items in your assessment of practice document linked to induction/orientation.
Orientation / useful documents	Student Handbook and resources in welcome pack from education team. Placement area-specific information
Expectations	<ul style="list-style-type: none"> ▪ Professional behaviour ▪ Willing to learn ▪ Punctuality ▪ Represent university and UHS ▪ Adherence to appearance policy (Below) ▪ Wear ID badge at all times ▪ Theatre induction ▪ Expected to do all types of shifts ▪ Ensure contacted clinical area for details of assigned practice assessor prior to placement ▪ Gaining feedback necessary to be assessed on placement.

PROFILE

WARD / AREA	SERVICE & CLIENT GROUP	LOCATION
D2	Mixed Cardiology and Cardiac Surgery Ward with a Specialist Focus on Heart Failure	D Level, East Wing
D4	Vascular Surgery	D Level, East Wing
CCU	Coronary Care Unit	D Level, East Wing
CHDU	High Dependency Care to Patients with Cardiology and Cardiac Surgery Conditions	D Level, East Wing
E3 Blue	Mixed Cardiology and Cardiac Surgery Ward.	E Level, East Wing
E3 Green	Mixed Cardiology and Cardiac Surgery Ward.	E Level, East Wing
E4	Mixed Cardiology and Cardiac Surgery Ward with a Specialist Focus on Thoracic Surgery	E Level, East Wing
Young Adult Cardiac Unit (YACU)	Mixed Cardiology and Cardiac Surgery Ward with A Specialist Focus on Adult Congenital Heart Disease	E Level, East Wing
Cardiac Catheter Lab and Day Case Unit	Department for Cardiac Interventions that do not require theatre and Day Unit Care for Patients Undergoing Elective Cardiac, Thoracic and Vascular Interventions / Minor Surgery	E Level, North Wing

Cardiac Outpatients	Department offering outpatient appointments, pre-assessment and nurse-led wound clinics for Cardiac, Vascular and Thoracic Patients.	D Level, East Wing Annex
Heart Failure Team	Team providing in-patient and community support to Heart Failure patients within UHS and across the Southampton area	In-patient – E level, East Wing Community – E level North wing offices
Cardiac Rehabilitation Team	Team providing rehabilitation advice to patients recovering from Acute Coronary Syndromes or Heart Surgery	E Level, East Wing
Cardiac Nurse Practitioners / Advanced Nurse Practitioners	Team of specialist nurses who run pre-assessment clinics and who help support patient care on the wards. The advanced nurse practitioners work with the medical teams to support the management of patients in the clinical environment	E Level, East Wing
Specialist Nurses	The CV&T Care Group has a number of specialist nurses who can provide ‘visit days’ to enhance the learning experience. These specialist nurses provide expertise in the following areas: Heart Failure, Cardiac Rhythm Management, Acute Coronary Syndromes, Vascular Management & Wound Care, Adult Congenital Heart Disease & Bed Management	D & E Level East and North Wing

LEARNER INFORMATION

Work pattern (shifts, start and finish times)	<p>Shifts start at different times depending on clinical area – please check at the start of placement. Examples of shift patterns include:</p> <p>Early: 07.15 / 07.30 to 15.15 / 15.30 Late: 12.15 / 12.30 to 20.15 / 20.30 Long Day: 07.15 / 07.30 to 20.15 / 20.30 Night: 19.45 / 20.00 to 07.45 / 08.15</p> <p>Students are expected to work a full range of shifts including nights and weekends to facilitate working with their mentors.</p> <p>The Care Group offer students a main ‘hub’ placement, although two week rotations or ‘spoke placements’ may be built into the total placement time to optimise learning potential and opportunities. These rotations mean that students may gain the opportunity to work in the Outpatient department, the cardiac cath lab department and with the nurse practitioners and rehabilitation team. Students will be informed of these rotations when they contact the main ‘hub’ placement.</p>
IT and resources	Laptops and PC’s in placement areas, hospital library services, Staffnet pages.
Staff room / rest room facilities	Each ward/clinical area has a staff room/rest facilities. Breaks may be taken in these areas at the discretion of the ward sister/charge nurse.

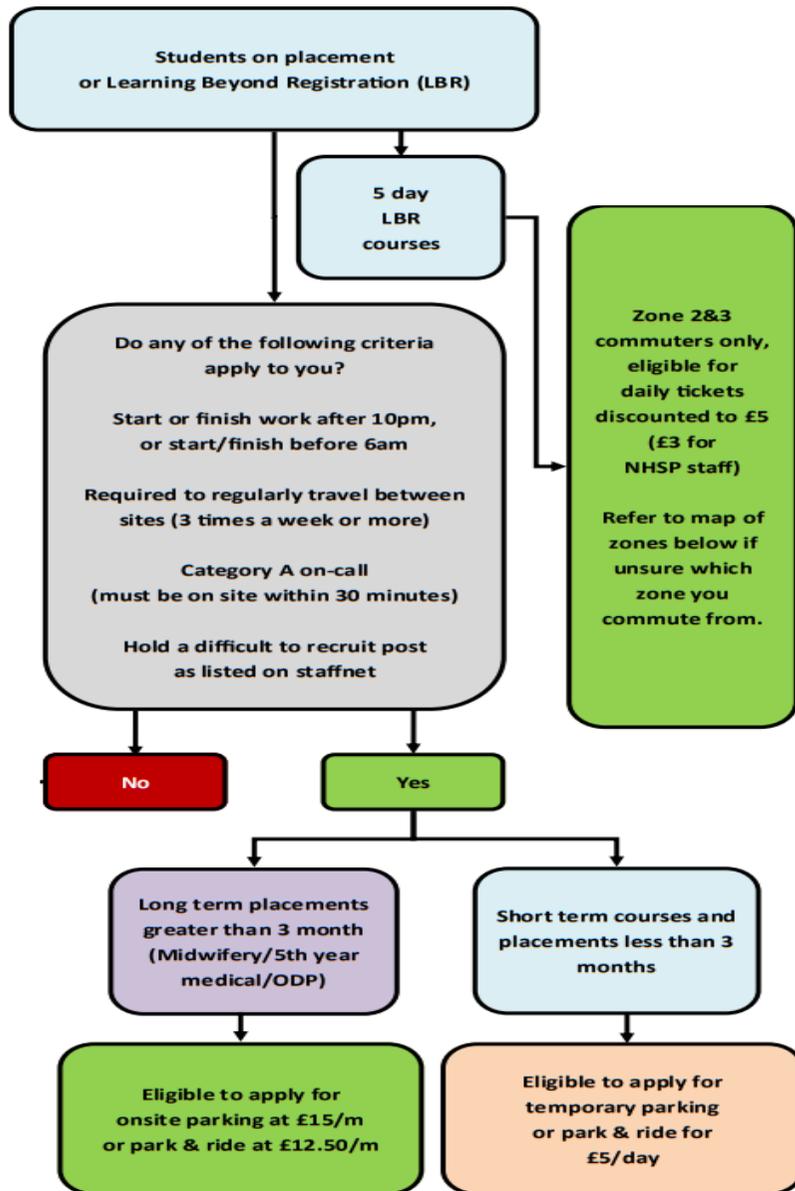
Common conditions and assessments	Please see induction handbook
Common procedures and expertise	Please see induction handbook
Common prescribed medications	Please see induction handbook
Glossary of terms	Please see induction handbook
Abbreviations and short terms	Please see induction handbook
Specific learning opportunities and multiprofessional working opportunities	<ul style="list-style-type: none"> ▪ Matron walkabouts/ health care practitioners ▪ Working with the different nurse practitioners (Cardiology, Thoracic, Vascular, Surgical Care Practitioners (Theatre-based), Adult Congenital Heart Team, Patient Safety Nurse, ANP, Heart Failure, Rehab Team, Nurse Case Managers, Cardiac Rhythm Management Team, ACS, Transfer Coordinators, Pulmonary Hypertension, Essence of Care) ▪ Weekly communication meetings (all attended by a Band 6/7 representative from each ward every Monday and Thursday) ▪ Weekly “Education Tuesdays” ▪ Weekly “Grand Round” (Friday) ▪ Monday MDT meeting ▪ Various specialist conferences ▪ Audits (SSI, RCA, Infection control, etc)
Recommended reading prior to placement	Anatomy and Physiology of the Cardiac, Respiratory and Vascular System recommended.

APPEARANCE

REQUIRED STANDARD	RATIONALE
<p>Clothes/designated uniform: All clothes/uniform should be smart and in good repair. An overall professional appearance which cannot be deemed offensive to patients, colleagues and the public should be maintained e.g. no low necklines, bare midriffs, very short skirts or potentially offensive slogans or tattoos. No denim, leggings, flip flops or strappy vest tops to be worn. The only exception to these standards for clinical environments is where health and safety legislation require a person to wear specialist protective clothing for health and safety purposes.</p>	<p>Professional appearance.</p> <p>Health and safety regulations</p>
<p>Hair: Must be clean, neat, and tidy and tied back off the face and off the collar. Hair must not be able to fall forward onto patients. Hair accessories and fastenings should be discreet. Any headwear worn for religious purposes should be clean and laundered daily and should be in keeping with the overall</p>	<p>Potential for wound contamination from loose hair. Providing hair is clean and tidy the risk of dispersal is minimal. When hair is touched micro-organisms on the hands will transfer to the hair and from hair to hands, potentially increasing risk of infection to staff.</p>

corporate appearance.	
Fingernails: Must be clean and short. Nail varnish, acrylic nails and false nails must NOT be worn.	To avoid transferring bacteria under the fingernails. Reduces the risk of trauma when involved in direct patient contact.
Jewellery: Rings: Only one plain metal band ring may be worn. Watches: No wristwatches are to be worn in any clinical environment. Necklaces: No necklaces are to be worn in the clinical environment. Medic-alert jewellery is not to be worn on the wrist (but could be attached to uniform) and must be cleanable, plain and discreet.	jewellery may be hazardous for the following reasons: Jewellery, even plain gold bands (wedding rings) have been shown to colonise with micro-organisms (Hoffman et al 1985) Rings with stones are hazardous and may cause trauma to patients Stones in jewellery may become dislodged Jewellery that is hanging e.g. necklaces, could be dangerous to staff and patients in potentially violent situations Appropriate hand washing techniques are prevented by the wearing of wristwatches
Piercings: Earrings: one pair of small plain metal studs only should be worn. All new visible body piercings must be covered with a blue plaster until the wound has healed. No other visible piercings are allowed.	New wounds shed high levels of bacteria. Professional appearance is important for patient confidence. Food hygiene regulations
ID Badge: As for all staff Trust ID Badges must be worn at all times in a clearly visible	To conform to Trust Security Policy
Footwear: Must be clean, plain, low heeled, non-porous, enclosed and in a good state of repair and ideally have a non slip tread. Shoe style and colour must be in keeping with the overall uniform style. Only staff wearing scrubs may wear white/black shoes/clogs or 'crocks' (without holes). Theatre footwear may be of various colours Footwear for ward based staff should be soft soled to reduce the level of noise particularly at night. In some areas protective footwear must be worn (as detailed in local policies).	Shoes in a poor state of repair and those with no tread are a safety risk. Staff working in a clinical area must take noise issues into account regarding their footwear. It cannot be decontaminated, and/or does not provide adequate protection from spillages and dropped equipment Health and Safety statutory requirement.
Belts/Epaulettes: Belts should not be worn when involved in direct patient contact/care. Epaulettes should be clean and laundered at least weekly	Risk of trauma to patients. Ease of movement for staff. Reduces risk of cross-infection.
Tights/Stockings/Socks: If not wearing trousers, tights must be worn and be plain black or natural colour. In the case of extreme hot weather, deviations from this policy will be communicated to staff by the appropriate authorising manager / professional lead.	To promote a professional appearance.
Designated uniform: Must be changed daily and laundered at 60 C and ironed prior to wearing.	Reduces the risk of cross-infection. Care of Linen Policy. Professional appearance and patient confidence.
Makeup and Perfume: Discreet makeup may be worn. Perfume and aftershaves must be subtle	To promote a professional appearance. For patient and colleagues comfort.
Additional garments e.g. fleece/cardigan: must not be worn when delivering direct patient care. Fleece/cardigans that are worn must be of a plain dark colour, must not have any non Trust logo's and be of smart appearance. Theatre jackets may be worn when the environmental temperature is low (e.g. cardiac) but must be removed if direct patient care is involved.	Reduces the risk of cross-infection
Personal Hygiene: Staff must ensure their appearance is clean, tidy and they are free from body odour when they are at work.	To promote a professional appearance. For patient and colleagues comfort

PARKING



For the list of hard to recruit roles, please search "Staff car parking and permits" on staffnet, or contact Travelwise on Travelwise@uhs.nhs.uk or 023 8120 4133

