

# PRACTICE LEARNING ENVIRONMENT PROFILE

Learning Environment (Care Group): TRAUMA & ORTHOPAEDICS Division: D

#### **GENERAL INFORMATION**

Education lead	Lorraine Parker
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UHS VALUES	PATIENTS FIRST WORKING TOGETHER ALWAYS IMPROVING       Please reflect on what these values mean to YOU

# **USEFUL LINKS**



### **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	UHS website	
Expectations	<ul> <li>Professional behaviour</li> <li>Willing to learn</li> <li>Punctuality</li> <li>Represent university and UHS</li> <li>Adherence to appearance policy (below)</li> </ul>	<ul> <li>Wear ID badge always</li> <li>Theatre induction</li> <li>Expected to undertake full shift pattern</li> <li>Ensure the student contacts clinical area for details of assigned mentor and shifts prior to placement</li> </ul>

#### PROFILE

WARD / AREA	SERVICE & CLIENT GROUP	LOCATION
F1	Major Trauma Ward	F level, East Wing, SGH
F2	Male and Female Trauma	F level, East Wing, SGH
TAU	Male and Female - Trauma Assessment Unit	F level, East Wing, SGH
F3	Male and Female Trauma (Dementia friendly)	F level, East Wing, SGH
F4	Elective Orthopaedic Ward	F level, East Wing, SGH
Brooke ward	Orthopaedic step-down unit	H level, Princess Anne Hospital
Outpatients	Orthopaedic Outpatients	Royal South Hants Hospital

### LEARNER INFORMATION

Work pattern (shifts, start and finish	Early: 07:15-15:15 or F1 07:30-15:30	Late: 12:15-20:15 or 12:00-20:00
times)	Night: 19:45-07:45	Long Days: 07:15-20:15
	All students are expected to work a varied working with their mentors.	y of shifts including nights and weekends to facilitate
	5	during your placement, please print off the dates and show duty.
IT and resources	Laptops available on the ward area.	
Staff room / rest room facilities	taff room / rest room facilities Breaks can be taken in the sister office at their discretion, in the meeting room or in the canteen; breaks will be allocated to you.	
Common conditions and assessments	Osteo-arthritis, rheumatoid arthritis, frac	tured neck of femur, fractured lower and upper limbs, e injuries, poly trauma, multi-system injuries, elective

	orthopaedic surgery, plastic surgery.
Common procedures and expertise	Fracture fixation of various bones within the body, hip replacements and knee replacements, ligament surgery, basic head injury care, palliative surgery, plastic surgery, and spinal surgery. As UHS has a major trauma centre, care of the patient with poly-trauma or multiple injuries is also common.
Common prescribed medications	Analgesia, Anticoagulants and Antibiotics.
Abbreviations and short terms	Abbreviations can be found in the induction pack online with the profile. It is advisable to have printed these off and be familiar with them prior to starting your placement.
Specific learning opportunities and multiprofessional working opportunities	Opportunities to spend time on the placement with the bed manager, trauma nurse specialists, major trauma team, advanced nurse practitioners, plaster room, theatres (once theatre induction is complete), pre-assessment, hip and knee school, physiotherapist, and occupational therapy. Also, opportunities to spend time with the spinal nurse specialist, Surgical site surveillance nurse, fragility fracture nurse, elective nurse specialist and to attend the plastics clinic. The placement will enable you to develop the foundations of nursing care whilst enhancing your skills in pre and postoperative care of a Trauma and Orthopaedic patient. It is also an ideal environment for developing acuity skills and dealing with patients with multiple injuries.
Recommended reading prior to	An understanding of the skeletal system is essential. A recommended reading list is in the student
placement	pack.
Additional information	On arrival you will be given the name of your Practice Assessor and Supervisors to support you during your placement. Shifts will be rostered for the whole of your placement. Any additional appointments you may have during the placement need to be highlighted as soon as you are aware of them so that they can be recorded on your off duty. Please bring any paperwork relating to appointments with you.

#### APPEARANCE

REQUIRED STANDARD	RATIONALE
<b>Clothes/designated uniform: All clothes/uniform should</b> <b>be smart and in good repair.</b> 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.	Loolth and actaty regulations
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	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,

purposes should be clean and laundered daily and should be in keeping	potentially increasing risk of infection to staff.
with the overall corporate appearance.	To evolve the reference to a starie we don the first energie. Deduces the risk of
Fingernails: Must be clean and short. Nail varnish, acrylic nails and false	To avoid transferring bacteria under the fingernails. Reduces the risk of
nails must NOT be worn.	trauma when involved in direct patient contact.
Jewellery: Rings: Only one plain metal band ring may be worn.	jewellery may be hazardous for the following reasons: Jewellery, even
Watches: No wristwatches are to be worn in any clinical environment.	plain gold bands (wedding rings) have been shown to colonise with
<b>Necklaces:</b> No necklaces are to be worn in the clinical environment.	micro-organisms (Hoffman et al 1985) Rings with stones are hazardous
Medic-alert jewellery is not to be worn on the wrist (but could be attached	and may cause trauma to patients Stones in jewellery may become
to uniform) and must be cleanable, plain and discreet.	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	New wounds shed high levels of bacteria. Professional appearance is
worn. All new visible body piercings must be covered with a blue plaster	important for patient confidence. Food hygiene regulations
until the wound has healed. No other visible piercings are allowed.	
<b>ID Badge:</b> As for all staff Trust ID Badges must be <b>worn at all times</b> in a	To conform to Trust Security Policy
clearly visible	
Footwear: Must be clean, plain, low heeled, non-porous, enclosed and in	Shoes in a poor state of repair and those with no tread are a safety risk.
a good state of repair and ideally have a non slip tread. Shoe style and	Staff working in a clinical area must take noise issues into account
colour must be in keeping with the overall uniform style. Only staff	regarding their footwear.
wearing scrubs may wear white/black shoes/clogs or 'crocs' (without	It cannot be decontaminated, and/or does not provide adequate
holes). Theatre footwear may be of various colours Footwear for ward	protection from spillages and dropped equipment
based staff should be soft soled to reduce the level of noise particularly at	Health and Safety statutory requirement.
night. In some areas protective footwear must be worn	
Belts/Epaulettes: Belts should not be worn when involved in direct	Risk of trauma to patients. Ease of movement for staff. Reduces risk of
patient contact/care. Epaulettes should be clean and laundered at least	cross-infection.
weekly	
Tights/Stockings/Socks: If not wearing trousers, tights must be worn	To promote a professional appearance.
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.	Deduces the risk of successinfection. Core of Linear Delias. Defending a
<b>Designated uniform:</b> Must be changed daily and laundered at 60 C and	Reduces the risk of cross-infection. Care of Linen Policy. Professional
ironed prior to wearing.	appearance and patient confidence.
Makeup and Perfume: Discreet makeup may be worn. Perfume and	To promote a professional appearance. For patient and colleagues
aftershaves must be subtle	comfort.
Additional garments e.g. fleece/cardigan: must not be worn when	Reduces the risk of cross-infection
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 but must be removed if direct patient care is involved.	
Personal Hygiene: Staff must ensure their appearance is clean, tidy and	To promote a professional appearance. For patient and colleagues

comfort

# PARKING

