**GPN Placement Student Workbook**

**Orientation Document to support the Induction Process for Student Nurse Placements**

It is recognised that Practices may follow a specific Induction Process for all new staff including trainees in accordance with their own Health and Safety regulations and HR processes.

This document is intended to support (not replace) the Induction process for a student on a new placement in line with the Orientation Documentation required to be completed on PARE.

The Orientation should ideally be undertaken on the first day of placement.

This document can be signed off by the following contacts:

* Students Practice Assessor
* Students Practice Supervisor
* Nominated person in the Practice (this is could be a Practice Manager or Training coordinator)

**Once complete this document acts as evidence and will support the Practice Assessor in completing relevant PARE documentation. This should be kept in the students file.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number** | **Task** | **Date / initial** | **Comment** |
| **1** | **A general orientation to the Health Care setting**  **Tour of the building** |  |  |
| **Location of facilities** |  |  |
| **Introduction to staff members** |  |  |
| **2** | **Completion of induction paperwork (see separate sheet)** |  |  |
| **3** | **Fire procedures**  **Alarm sound** |  |  |
| **Call points** |  |  |
| **Extinguishers** |  |  |
| **Fire exits** |  |  |
| **Fire marshals** |  |  |
| **Assembly point** |  |  |
| **4** | **Resuscitation policy and procedures**  **Location of relevant policies** |  |  |
| **5** | **Resuscitation equipment shown and explained**  **CPR bag** |  |  |
| **Defibrillator** |  |  |
| **Oxygen** |  |  |
| **anaphylaxis kit** |  |  |
| **6** | **How to call for help in the event of an emergency (add own emergency system if not using Emis)**  **Emis Red button – double click in top right of screen** |  |  |
| **SHOUT for help!** |  |  |
| **7** | **Aware of where to find local policies**  **Location of Health and Safety documentation / Health and Safety board** |  |  |
| **Incident reporting** |  |  |
| **Infection control** |  |  |
| **Handling of messages and enquiries** |  |  |
| **8** | **Information Governance**  **Confidentiality agreement** |  |  |
| **Information Governance contacts** |  |  |
| **GDPR (privacy policy)** |  |  |
| **9** | **Aware of**  **Shift times** |  |  |
| **Break and meal times** |  |  |
| **Sickness / absence procedure** |  |  |
| **10** | **Professional role in the practice**  **see attachment (under development)** |  |  |
| **11** | **Safeguarding**  **Safeguarding lead** |  |  |
| **Aware of policy and process of raising a concern** |  |  |
| **Location of policy** |  |  |
|  | **Aware of lone worker policy (if applicable)**  **Location of documentation** |  |  |
| **12** | **Risk assessments / reasonable adjustments**  **Health declaration relating to disability, pregnancy** |  |  |
| **Risk assessments including Covid (if required)** |  |  |
| **Learning needs** |  |  |
| **13** | **Demonstration of moving and handling equipment**  **(for example electronic couches / wheelchair)** |  |  |
| **14** | **Demonstration of medical devices**  **Spirometry** |  |  |
| **Pulse oximeter** |  |  |
| **BM machine** |  |  |
| **D-dimer kit** |  |  |
| **Bp machine** |  |  |
| **ECG machine** |  |  |
| **15** | **Other**  **Other questions the student may have** |  |  |
| **Any other relevant policies / procedures etc.** |  |  |

**Document completed**

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Supervisor/Assessor signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Nurse Learning Opportunities and Scenarios in Primary Care**

|  |  |
| --- | --- |
| Placement Opportunities maybe physical or virtual and could include: | Tick |
| Wound Management / Dressing Clinic |  |
| Ear Syringing / Micro-suction |  |
| Cancer Support Nurse |  |
| Cervical Smears |  |
| Sexual health Clinics |  |
| Larc Clinics |  |
| Health Trainers Services |  |
| Mental Health Clinic |  |
| Minor Surgery Procedures |  |
| Over 40’s Health Checks |  |
| Travel Immunisation and Routine Immunisation |  |
| Baby Immunisations |  |
| Baby Clinic |  |
| Weight Management |  |
| Dermatology |  |
| Diabetes Nurse Clinics |  |
| Respiratory Clinic (asthma, COPD) |  |
| Learning Disability Clinic |  |
| Smoking Cessation Support |  |

|  |  |
| --- | --- |
| Spoke placements available (Less than One week) | Tick |
| Partnering GP surgery |  |
| Community Matron |  |
| Fracture Clinic |  |
| Treatment Room |  |
| Phlebotomy |  |
| Social Worker |  |
| Care Home |  |
| District Nurse |  |

|  |  |
| --- | --- |
| Short visits available (morning or afternoon) | Tick |
| Gp |  |
| Reception |  |
| Practice Manager |  |
| Physio |  |
| Coil Clinic |  |
| Medicines Management |  |
| Advanced Clinical Practitioner |  |
| Midwife |  |
| Social Prescriber |  |
| Lab result review |  |
| Anticoagulant clinic |  |
| Pharmacy |  |

Enabling student nurses to rotate between geographically well situated practices within a PCN will broaden & enhance experience of primary care. It supports the learning environment better.

Student Competencies Medical Devices (Optional depending on environment, outcomes)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Level of Student** | **Competency** | **Novice**  **Supervisor to date, comment and sign** | **Advance Beginner**  **Supervisor to date, comment and sign** | **Competent**  **Supervisor to date, comment and sign** |
| **All students** | An introduction to medical devices used within the Practice:   * BP monitor * Thermometer * O2 saturations probe * Auroscope * Ophthalmoscope * Defibrillator machine * Glucose monitor * Urinalysis machine * Medical oxygen * Pregnancy testing kits |  |  |  |
| **All students** | To develop an understanding of the purpose of medical devices and their function in the Practice |  |  |  |
| **All students** | To develop an understanding of how the organisation govern the use of medical device equipment |  |  |  |
| **All students** | To develop skills in using a piece of equipment under supervision and independently |  |  |  |
| **All students** | To develop skills in the decontamination of medical device equipment |  |  |  |
| **All students** | To understand the difference between re-usable and disposable equipment |  |  |  |
| **All students** | To understand the importance of knowing when a piece of equipment is not functioning properly and who to report this to |  |  |  |

Clinical skills achieved during placement (Optional depending on environment, outcomes)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Core Skill*** | ***Supervised Practice*** | ***Requires Training*** | ***Competent*** | ***Comments*** |
| Demonstrates the ability to recognise potential seriously ill patients and respond appropriately |  |  |  |  |
| Demonstrates the ability to  accurately record vital signs and distinguish between normal and abnormal reading responding appropriately |  |  |  |  |
| Communicates the importance of correctly recording and reporting clinical observations |  |  |  |  |
| Demonstrates the ability to navigate a PGD |  |  |  |  |
| Demonstrates the ability to monitor a patients peak flow and record results |  |  |  |  |
| Demonstrates understanding of why consent is necessary |  |  |  |  |
| Demonstrates ability to test a patient’s blood sugar, distinguishing between normal values and responds appropriately |  |  |  |  |
| Demonstrates ability to  complete urinalysis testing/ documenting results |  |  |  |  |
| Demonstrates ability of safe specimen collection such as urine for C&S, chlamydia screening |  |  |  |  |
| Demonstrates ability to test urine for pregnancy |  |  |  |  |
| Acts as chaperone during intimate procedures and responds to patient appropriately |  |  |  |  |
| Demonstrates competent collection of wound swabs |  |  |  |  |
| Demonstrates appropriate disposal of clinical waste in accordance with infection control guidelines |  |  |  |  |
| Demonstrates competency when testing visual acuity and recording of VA |  |  |  |  |
| Demonstrates proficient skills in aseptic/clean techniques |  |  |  |  |

Example Timetable

|  |  |  |  |
| --- | --- | --- | --- |
| **Day** | **AM** | **Lunch with team** | **PM** |
| **Monday** | Induction / Tour  Meet supervisor  Objection setting  Emis | PPE donning/doffing demo  Observation of video/telephone consultation |
| **Tuesday** | Baby clinic  Prep of equipment | GP Nursing home visit, physical or virtual |
| **Wednesday** | GPN clinic / Treatment Room clinic  Observation of new ways of working | Baby immunisations, support with prep, accessing records, completion of consent |
| **Thursday** | Pharmacist, prescription queries, medication reviews.  Medical secretaries, referrals, 2 week wait | GP on-call clinic |
| **Friday** | Chronic disease clinic, asthma, diabetes | Advanced Clinical Practitioner Clinic, compare approach with GP |

The following scenarios, health promotion and patient advice exercises can be undertaken as self-directed learning by the student during designated periods for research and independent learning, or at a time when it isn’t possible for students to shadow physically or join a virtual clinic. This link illustrates the Placement Charter which all learning environments aspire to <https://www.uclan.ac.uk/students/assets/files/HENW-Placement-Charter-Poster1.pdf>

E-Learning for Health has several valuable modules available specifically for student nurses working in the primary care environment. These can be accessed via the student’s Open Exeter account using the following link <https://www.hee.nhs.uk/coronavirus-covid-19/coronavirus-covid-19-information-nurses> and 3 modules can be accessed under the “Student nurses in general practice” tab*: Essential training Covid-19 specific*, *Essential Leaning* and *Additional Learning.*

These can be used to gather evidence which will enable the achievement of proficiencies and the requirements of the Episode of Care or Medicines Management assessments for example.

Scenario based learning

**Scenario 1**

You are delegated as duty nurse for the shift, upon checking the vaccine fridge temperature you note that it is reading as 11C.

* Describe the actions you would take and why.

**Scenario 2**

You are the nurse running the shift. You come into work to start at 08.30hrs and the receptionist informs you that a nurse practitioner colleague has called in sick that morning for her 9-5 shift.

* Describe the issues you would need to consider and prioritise the actions you would take.

**Scenario 3**

You are contacted by a member of reception to say that a patient is in reception and is shouting and being aggressive. You go to reception and the patient is appears irate and says he has been spoken to rudely by reception and he wishes to make a complaint. Consider what could have led to the situation, what the thoughts and feelings of the people involved may be.

* Describe the actions you would take and consider what policies or procedures you could consider following.

**Scenario 4**

You are approached by a colleague who has come to you concerned that she has administered the wrong dose of medication to a patient. The patient has now left the building and gone home.

* Consider what advice you would give and the actions you would take.
* Discuss the policies or procedures you would follow.

**Scenario 5**

You are working as a nurse practitioner you have assessed a patient with acute abdominal pain. Your assessment leads you to suspect that the patient may have appendicitis. You discuss your findings with a Doctor who advises you that the patient is probably just constipated and you should advise them to take laxatives. You still feel that the patient may have appendicitis.

* What would you do and why. What would you need to consider in making your judgement and management plan?

**Scenario 6**

You are the duty nurse, working in the surgery. You are summoned to reception by the emergency buzzer. Upon arrival to reception the receptionist tells you that there is a patient who “won’t wake up”. He is in attendance with his wife and is currently slumped in a chair with his eyes closed.

* Describe the *immediate* actions you would take.
* What information would you want, and where could you get this information from.
* Consider the numerous possible causes for this incident- think about differential diagnoses

**Scenario 7**

“Mary Brown” is 88 years old. She lives alone in a 2 bedroomed house. She has a daughter who is a full time carer for her own disabled child, she lives close by and pops in to see her mum twice a week to bring her some shopping.

Mary has a past medical history of AF, hypertension and osteoporosis. She is on multiple medications, including warfarin and antihypertensives. She is brought in by her daughter to your clinic because she is due a flu jab. Her daughter asks you to look at Mary’s arm because she caught it yesterday on the bedside cabinet after she had “another fall”. You look at the wound and there is a superficial laceration which you feel you can dress, but you also notice multiple bruises on the patient’s legs.

* Consider what more information you would need from the patient/daughter
* What would you consider to be red flags in this case?
* Describe your actions in the examination of this patient
* What risk assessment score would you use
* Considering a holistic approach, what discussions would you have with the patient and her daughter? What next steps would you consider?

**Scenario 8**

You’re a junior nurse in a GP practice. A 55yr old man attends for a new patient check and complains of headaches and some issues with his eyes for 5 days and he is not known to suffer migraines.

His vital signs were: pulse 80 and regular; BP 125/80; temperature 36.5; respiratory rate 14

* What do you do?

**Scenario 9**

A pregnant woman attends for a BP check and she feels well and her BP is 90/60.

* What do you do?

**Scenario 10**

A 25 yr. old comes for a new patient check and her BP is 148/95.

* What do you do?

**Scenario 11**

You are about to administer a vaccination to a patient.

* What things are important to document in the patient’s notes when administering any medication such as an injection or immunisations?
* Think about what you can do to ensure you document accurately before you dispose of the medication in a sharps bin
* Why is this documentation important?

**Scenario 12**

A 19 year old male patient presents for suture removal and tells you that he has had a sore throat for 3 days, looks unwell and has a fever of 38.5, when you check. The patient states they are unable to swallow and feel like their throat is closing over.

* What do you do?
* What is the significance of an inability to swallow in the presentation of a sore throat?

**Scenario 13**

**A woman attends for the whooping cough vaccine. She is 15 weeks plus 5 days pregnant:**

1. What advice would you give her?
2. What documentation would you use to support your advice?

**Thinking of the whooping cough vaccine…**

1. What would you discuss with her in order to obtain informed consent?
2. What would be your rationale for telling her that she needs this vaccine with every pregnancy?

**Scenario 14**

**A 42-year-old man attends for his annual COPD review:**

1. Describe what kind of history you would take from him.
2. Is there anything that would make your ears prick-up?
3. If you notice that his FEV1 has dropped since his previous review, what might you be interested in asking him about?

**Scenario 15**

**A 17 year old asthmatic patient attends after being discharged from hospital following a severe asthma attack.**

1. What would you want to discuss with him?
2. If, after your discussion, you find that he has been using his brother’s inhaler, what advice would you give him?
3. Is there any evidence you have read, or have been made aware of, that could help you to reinforce your message?
4. Can you list three things that you should ensure he is aware of before he leaves the consultation?

**Scenario 16**

**A 58-year-old man is on your list for a diabetic review. You see from the medication screen that he is taking Metformin 500mg, 2 tabs, twice-per-day; Simvastatin 40mg daily; Perindopril 4mg daily. His HbA1c is 60mmols.**

1. What kind of issues would you want to discuss with him?
2. What conclusion might you come to?
3. What other blood test results might you be interested in?

**Scenario 17**

**A baby boy attends for immunisations. He brought in by his Grandmother.**

1. Can the Grandmother consent for the immunisations?
2. What measures might you take so that you can continue with the consultation?
3. What might you advise the Grandmother to do in the future if she wants to bring her Grandson again?

**Scenario 18**

**A 79-year-old lady attends for a rheumatoid arthritis review. As you are talking to her, the receptionist rings and asks about another patient’s medication. You proceed with the consultation, offering a shingles vaccination. As you begin to write-up her notes, you realise that you are still on the notes for the patient that the receptionist called you about and it was she who was entitled to the shingles vaccination - not the patient who was present in the room.**

1. What immediate action would you take?
2. On reflection what would you learn from this?
3. How could you share this learning with the Practice Team?

**Scenario 19**

**A 25-year-old woman attends for her first smear test.**

1. What kind of information do you need to obtain informed consent for the procedure?
2. As it’s her first smear test what other information might you give her?
3. How do you ensure you have the correct information about the patient?

**Scenario 20**

**A patient over 70-years-old, with COPD, calls for advice about COVID 19:**

1. What advice can you give him about using his inhalers?
2. What advice would you give him about how to recognise the symptoms of COVID-19?
3. What general advice could you give him about his long-term condition?

**Scenario 21**

**The surgery is preparing for the changes required to continue operating during the COVID-19 crisis. Considering the following:**

* Patient safety
* Infection control
* Supporting non-clinical staff
* Patient information

**What actions as a practice Nurse could you take?**

**Scenario 22**

**A baby attends for an 8-week-check with a GP. The GP asks if you have prepared the vaccines for her to administer. When you ask which vaccines she needs, and what post-immunisation advice she will give, she doesn’t know. She still wants to deliver the vaccine.**

1. What do you do?
2. What are the ethical and legal implications you need to consider?
3. Which of the 6 C’s might you have to call upon?

**Scenario 23**

**Travel**

*Resources to use: nathnac website, Department of health Green Book, Patient Group Directions*

Patient is going to Thailand, Bali and Vietnam in 4 weeks

* What travel vaccinations are essential/ recommended?

Thailand

Bali

Vietnam

* What travel vaccinations are recommended for high risk travel?

Thailand

Bali

Vietnam

* Would the patient need any antimalarial medication for each country?

Thailand

Bali

Vietnam

**Contraception**

*Resources- FSRH website (UKMEC guidelines 2016) and NHS Choices website*

Describe three methods of long acting contraception and their:

1.

* Method
* Generic name
* How do they work?
* Side effects
* Contraindications

2.

* Method
* Generic name
* How do they work?
* Side effects

* Contraindications

3.

* Method
* Generic name
* How do they work?
* Side effects

Contraindications

Health Promotion **- Waist size and risk of health problems**

You have a higher risk of health problems if your waist size is:

* more than 94cm (37 inches), if you’re a man
* more than 80cm (31.5 inches), if you’re a woman

Your risk of health problems is even higher if your waist size is:

* more than 102cm (40 inches), if you’re a man
* more than 88cm (34.5 inches), if you’re a woman

Normal Adult Vital Signs

|  |  |  |
| --- | --- | --- |
|  | Range | If abnormal : |
| Temperature (tympanic) | 35.0-37.5 degrees C | Report on day to another clinician |
| Pulse | 60-100 beats per minute and regular | Report on day to another clinician |
| BP | Below 140/90  Low :if below 100 or  below 60 (report) | If high-   * check reading again x 3 * check past bp readings * report on day if very high   ( > 150/ >100)   * arrange another check in 1 week if slightly high * If patient feels unwell and has high / low BP- report on day to another clinician |
| Respiration rate | 12-16 per minute | * Check patients normal rate in notes * Ask patient if they are more breathless than normal * Report on day to another clinician |
| O2 saturation | 95%-100% | Report on day to another clinician |

Health Check OSCE

|  |  |
| --- | --- |
| Introduce yourself | notes |
| **Check patients details** – name Dob /mob/ address |  |
| Explain what you are going to do – (**consent** ) |  |
| Use correct **template**  NHS Health Check programme Follow up  Click NHS Health Check in programme  Left band- lifestyle tab |  |
| Complete relevant **observations**  Pulse- rate and rhythm  BP  Weight  BMI  Waist measurement |  |
| **Health promotion** opportunities  Diet  Exercise  Smoking  Alcohol  ? Health Trainer or Smoking Cessation referal |  |
| Arrange correct **investigations** –  U&E  Diabetic lipid screen  Glucose (HBA1C if not fasting)  Other bloods if on pop up eg  ACR urine  LFT only if high alcohol intake / PMH  FBC |  |
| Inform patient of **follow up** process |  |
| Refer patients appropriately if clinical findings abnormal  **Also think about:**  Health Trainer referral  Smoking Cessation  Alcohol support – Di Sedman  Exercise referral – lifestyles gym |  |



You must use this form to record five written reflective accounts on your CPD and/or practice-related feedback and/or an event or experience in your practice and how this relates to the Code. Please fill in a page for each of your reflective accounts, making sure you do not include any information that might identify a specific patient, service user or colleague. Please refer to our guidance on preserving anonymity in the section on non-identifiable information in [**How to revalidate with the NMC**](http://revalidation.nmc.org.uk/download-resources/guidance-and-information/).

|  |
| --- |
| **Reflective account:** |
| **What was the nature of the CPD activity and/or practice-related feedback and/or event or experience in your practice?** |
|  |
| **What did you learn from the CPD activity and/or feedback and/or event or experience in your practice?** |
|  |
| **How did you change or improve your practice as a result?** |
|  |
| **How is this relevant to the Code?**  Select one or more themes: Prioritise people – Practise effectively – Preserve safety – Promote professionalism and trust |
|  |