

# Learning Environment



**Community Health Care Hub –  
Finney House**

# Learner Booklet

## Welcome

We would like to warmly welcome you to Lancashire Teaching Hospitals NHS Foundation Trust (LTHTR).

We have created this pack as a useful resource to help you to settle in with us. The purpose of this booklet is to provide you with information to help you on your learning environment.

## About LTHTR

### We have three equally important strategic aims:

- To provide outstanding and sustainable healthcare to our local communities
- To offer a range of high-quality specialist services to patients in Lancashire and South Cumbria
- To drive health innovation through world class education, training and research

We provide a range of Hospital based health services for adults and children and cover a range of specialities. These include cancer services such as radiotherapy, drug therapies and surgery, disablement services such as artificial limbs and wheelchair provision. Other specialities include vascular, major trauma, renal, neurosurgery and neurology including brain surgery and nervous system diseases.

### Our five core values:

- Being caring and compassionate
- Recognising individuality
- Seeking to involve
- Building team spirit
- Taking personal responsibility



We deliver care and treatment from three main facilities:

- Royal Preston Hospital
- Chorley and South Ribble Hospital
- Specialist Mobility and Rehabilitation Centre, Preston

In relation to car parking, please refer to your Induction to the Trust, for information regarding car parking. Additional information can be found on our Intranet page.

<https://legacy-intranet.lthtr.nhs.uk/car-parking-documents>



## Learning Environment

Welcome to Lancashire Teaching Hospitals NHS Trust & Team Finney. We hope this document will provide you with relevant information to support your induction and orientation to the workplace. An Induction will be organised for you and a practice assessor/supervisor will be allocated to you to facilitate your orientation at Finney House.

Finney House is a community setting with lots of fantastic opportunities to develop your understanding of community practices and how community plays an important role in our patients journey and nursing care requirements.

As well as receiving support from our Learning Environment Managers, you will be allocated a Practice Supervisor and a Practice Assessor for additional support, guidance and encouragement to help you excel in your placement and feel welcomed.

This Local Induction will be completed on your first shift.

We are a GP led service – all our patients are temporarily registered with ISSA medical centre - there are no Doctors on site. To escalate acutely unwell patients, we dial 999 and 111 for out of hours GP concerns that are not life threatening or serious. There is a resuscitation equipment area outside the nurse's station on each floor.

There are 3 floors at Finney House; all have 32 beds en-suite rooms.

1<sup>st</sup> floor Buttercup Unit - step down discharge facility

2<sup>nd</sup> floor Meadow Unit - step down discharge facility for rehab

3<sup>rd</sup> floor Orchard Unit - residential unit

You will see a variety of different professionals come onto the ward to review patients. Here are some of the common uniforms you may see on a day-to-day basis.



Matron



Sister/Charge Nurse



Staff Nurse



HCA



Occupational  
Therapist



Physiotherapist



Pharmacy



Ward Clerk



Specialist  
Nurse



Dietitian



Clinical Educator



Domestic

Certain rooms require codes to access them, please ask for these codes on your orientation.

### **Off Duty**

Off duty is normally released 4-6 weeks in advance and outlines which shifts you will be working. Shifts are found on Healthroster, and we will explain about this application further on your arrival. Our shift patterns -

**07:00 – 19:30 Day Shift**

**19:00 – 07:30 – Night Shift**

Breaks are allocated by the Nurse in Charge at the beginning of each shift. You are responsible for taking your own break.

### **Parking**

Due to limited spaces all staff must park on the staff car park or on Sainsburys car park near to the entrance to Finney House - there will be no charges from Sainsburys.

### **Staff Sickness**

Please contact and speak to the Site lead of the building. Please give as much notice as possible. You are required to ring daily unless you have a medical

certificate. If your sickness is expected to be prolonged, you will be required to contact your tutors to discuss this further and to inform us of the outcome. You need to ring and notify us once you are fit to resume your shifts, even if this falls on your days off.

### **Handover**

Handover takes place at the MDT Room. We have paper handover sheets where you can note down further information, changes, and reminders. **Please remember this document is confidential and should not be removed from the ward.** At the end of each shift, handover sheets should be placed in confidential waste bins located in numerous places, which we will identify during your induction. Ensure you have completed the Information Governance E – Learning Module.

### **Safety Huddle**

Safety Huddle is completed at the end of Handover, and between the shift at the Nurse in Charges discretion, promptly. This allows the whole team to gather and communicate important information such as highlighting patient safety issues.

### **Ward Meetings**

Ward Meetings are held monthly by senior members of staff to provide useful ward updates, new information and highlight areas of improvement. Any personal issues should be discussed with your Practice Supervisor or Practice Assessor privately. You can read hospital updates via the Trust Intranet, which you are able to access and you can also locate Trust policies and procedures via the Intranet.

### **Personal Belongings**

You can use the lockers provided on the ward for your belongings, but belongings must be removed after each shift. Please be aware you are responsible for your own belongings, and we cannot take responsibility for your property if they are lost, broken, or stolen. Please ensure you do not bring items of value to work. Property including shoes must not be kept on the floor of the locker rooms; please use the hooks and lockers provided. Please change into your own clothes after each shift and please arrive to work in your own clothes and bring your uniform to get changed into.

### **Telephone System**

Any member of staff answering the phone or speak to members of the public must remember to be courteous and introduce yourself stating your designation. Please ensure confidentiality at all times. If unable to answer questions please state you are unable to answer the question, but you will find someone who can. Ensure they are updated in a timely manner. Please see our ward telephone communication guide located at the nurse's station.

In an emergency the Nurse in Charge will ring 999 and state clearly what the emergency is or will call 111 (out of normal GP hours) and if not urgent or life threatening.

### **Training and Development Opportunities**

It is your university's requirement to have exposure to a learning environment, such as Finney House, and whilst you are on this placement take the opportunity to utilise the learning resources available to you.

Below is a list of SPOKE placements available at the Community Healthcare Hub. Please confirm with the Learning Environment Manager when a SPOKE is organised/confirmed so we are aware.

- Can attend the 9am Monday to Friday MDT meetings with the Nurse in Charge.
- Therapy Team (Physiotherapists and Occupational Therapists)
- Speech and Language Therapy
- Dietitian
- GP Ward round (on Wednesdays)
- Home First Assessment Team
- Paramedics - NWAS
- Tissue Viability Team
- Acute Frailty Team

Please also refer to the Learner Resource file located at Finney House, to look at additional resources that will support you in evidencing your proficiencies and which e-learning and policies are available to you.

### **Trust Policies**

Suggested policies to familiarise yourself with the following:

- Hand Hygiene Policy
- Safeguarding (Adult and Children) Policy
- Infection Prevention Control Trust Policies
- Fire Safety Policy (We have our own fire policy and procedure to follow here at the Community Healthcare Hub. During your induction we will discuss this further).

### **Managing issues in practice**

It can be a stressful time for you when you are working in an unfamiliar place. We want to ensure that you have a wonderful placement and are well supported throughout. We believe that it is important that any issues or concerns are dealt with as quickly as possible.

We have summarised below the process you should follow:

- Take your individual concerns directly to either Learning Environment Manager's, your Practice Assessor/Supervisor and /or Clinical Education Team /Unit Manager.
- You may also want to consider contacting your Academic Assessor at University.
- Refer to the LTHTR Trust's 'raising concerns policy' which you can access via the Intranet.

In the Trust we use a Datix system for reporting incidents in practice. You may need support with filling in the form, from any member of staff. You will find the Datix form on the intranet homepage.



**Don't be afraid to speak up if you are  
unsure.**



Approx. Times	Ward Routine
<b>07:00 Prompt</b>	Meet at the Nurses Station & collect handover sheet. Begin bedside handover verbalised in the FORCES format. No confidential information to be discussed at the bedside. All staff to have eyes on each patient as they are discussed, and the patient be involved in the process. End handover at the Performance Board for Safety Huddle.
<b>07:30 – 09:00</b>	Patient Breakfast Morning Coffee/Tea/High Protein drink supplements
<b>10:00</b>	Begin morning Observations if required. Update Food/Fluid Balance Charts
<b>10:30 – 11:30</b>	Staff Breaks Begin
<b>12:00 – 13:00</b>	Begin Lunch Medication Round Lunch is served at 12:20 and all staff to hand out Lunch assist patients to eat. Ensure food/fluid balance charts are updated
<b>13:30 Prompt</b>	Safety Huddle at Performance Board
<b>14:00</b>	Afternoon Coffee/Tea/High Protein drink supplements
<b>17:00</b>	Begin Evening Medication Round Dinner is served at 17:20 and all staff to hand out Evening Meals and assist patient to eat. Ensure food/fluid balance charts are updated
<b>18:00</b>	Begin Evening Observations Complete meal requests and menus for following day. Update fluid balance & rounding charts.
<b>19:00 Prompt</b>	Meet at the Nurses Station & collect handover sheet. Begin bedside handover. End handover at Performance Board for Safety Huddle.
<b>19:30 – 20:00</b>	Evening Coffee/Tea/High Protein drink supplements
<b>20:30</b>	Ensure patients are comfortable and assist with hygiene needs before bed. Collect and wash cups and load in the steriliser.
<b>21:00</b>	Begin Night Medication Round
<b>00:00 Onwards</b>	Calibrate Glucometer. Empty drains & document accurately. Check Temperatures. Check CD's. Tidy Kitchen & Sluice. Offer Tea and Toast to those who require it Check Resuscitation Trolley. Complete and update charts. Tidy the environment noise permitting. Carry out pressure area care where required.
<b>06:00</b>	Begin Morning Medication Round Refill Water Jugs
<b>07:00</b>	Empty Catheters, dispose of bedpans & bottles. Tidy and Clear bedside tables for breakfast. Update charts. Prepare for handover.

<b>Fluid Balance</b>	<b>INPUT &amp; OUTPUT. FLUID BALANCE IN THE LAST 24 HOURS.</b> <ul style="list-style-type: none"> <li>• Dietary Requirements – What type of diet, if any, can this patient have? D+F, LD+FF, SD+FF/ What level of diet/fluids.</li> <li>• Do they have any other supplements? Ensures.</li> <li>• How do they excrete urine? Voiding, Urinary Catheter, Suprapubic catheter, or Nephrostomies. Has UCAM been completed twice daily on Flex.</li> <li>• Describe their urine - amount, colour, or odour.</li> <li>• How do they excrete faeces? Bowel opening or Stoma/Stoma type. Describe their output or highlight the number of days without output. &amp; output. Are they requiring laxatives?</li> <li>• Highlighting which patients require online fluid balance completion (Highlighted on safety huddles and highlight to Nurse in charge if you feel patient needs to be on Blue tray and requires a monitoring of diet and fluid intake)</li> </ul>
<b>Observations</b>	<ul style="list-style-type: none"> <li>• Complete one set on admission then only if concerned or GP requests.</li> <li>• NEWS Score and appropriate interventions.</li> <li>• Are there any Sepsis Amber/Red Flags present?</li> <li>• Pain Score – are they prescribed analgesia.</li> <li>• Nausea Score – Do they require regular antiemetics? Have they vomited?</li> <li>• Do they require Neuro or CSM observations?</li> </ul>
<b>Risk Assessments</b>	<ul style="list-style-type: none"> <li>• Have Online Risk assessments been completed. After admission we complete weekly risk assessments.</li> <li>• Bedside storage</li> <li>• Admission booklet including belongings itemisation. Please inform the nurse in charge regarding large amounts of money or extremely valuable items and please make sure this is documented. (This is particularly important if patient lacks capacity).</li> <li>• Cannulas should be removed prior to admission to us. If patients arrive with cannulas this will require a Datix to be completed and removed ASAP. Some patients may have indwelling medical devices... are they okay to use? Are the dressings in date?</li> </ul>
<b>Care Plans</b>	<ul style="list-style-type: none"> <li>• What has the patient done today? Do they require assistance with their activities of daily living?</li> <li>• Completion of 'Intentional rounding' and inside the 'intentional rounding' there are body maps that needed completing AM and PM each day for each patient. This is vital they are documented each shift for each patient.</li> <li>• What is the care plan going forward?</li> <li>• Have they been seen by the GP?</li> <li>• Do they have blood scheduled or abnormal blood results?</li> <li>• Have you updated their family/NOK?</li> <li>• Complete pressure ulcer care plan 12 hourly.</li> </ul>

<b>Escalation</b>	<ul style="list-style-type: none"> <li>• Has the patient needed to be escalated? Safety huddle/ handover will highlight this.</li> <li>• Are they on increased observation or enhanced levels or care?</li> <li>• Do they have a DNAR?</li> <li>• Infection control status</li> <li>• Isolation status – are they being barrier nursed.</li> <li>• Lastly, specific to CHH- do we need to chase HBS pharmacy or Remedi Solutions for patient medications? Utilise the GP escalation communication, GP medication ordering books.</li> </ul>
<b>Skin Integrity &amp; Mobility</b>	<ul style="list-style-type: none"> <li>• Is the patient mobile? Do they require assistance or mobility aids?</li> <li>• Are they a risk of falls?</li> <li>• Are they ongoing with therapies team?</li> <li>• Do they require referral to PT/OT</li> <li>• Do they have any dressings? Have they been changed if so, when? UpToDate photos taken.</li> <li>• Can they manage their own pressure area care?</li> <li>• Do they have a pressure ulcer?</li> </ul>

### **Visiting**

Each patient can have visitors at any time between 2pm-8pm.

\*Visiting Times can often change. Please check with the charge nurse if unsure\*.

Visitors must park in the visitor car park or on Sainsburys car park.

**Do not give out the door codes if you are unsure.**

## Abbreviations

ABX	Antibiotics
BD	Twice Daily
BM	Blood Sugar Measurement.
C2R	Criteria to Reside
CFF	Clear Free Fluids – no milk
D+F	Diet and Fluids
DPD	Discharge Planning Document
EDD	Estimated Discharge Date
FF	Free Fluids
LD+FF	Light Diet and Free Fluids – Reduced portion sizes avoiding meats and bread.
MC	Mouth Care
NBM	Nil by Mouth
NEWS	National Early Warning Score
NKDA	No Known Drug Allergies
NOK	Next of Kin
OD	Once Daily
PAC	Pressure area care
QDS	Four times a day
S&S	Soup and Sweet – Liquid based diet.
SD+FF	Soft Diet and Free Fluids – Soft Mashable foods.
SFBC	Strict Fluid Balance Chart
Sips	Sips of Water
TDS	Three times a day
D2A	Discharge to Assess
H2A	Home to Assess
POC	Package of Care
HF	Home First
CHC	Continuing Health Care

## Induction

The Local Induction process will take place throughout the first week of your placement.

This will comprise of:

- Trust and department orientation, including housekeeping information
- Location of emergency equipment
- IT access
- Reading & acknowledgement of Mandatory Trust policies such as Health & Safety, Fire Safety, Infection Control, Information Governance, Staff Code of Conduct, Social Networking and Dress Code policies.
- Adult Basic Life Support training if applicable
- Trust Moving & Handling Training if applicable
- COVID-related policies & procedure
- Orientation
- Professional voice: - freedom to speak up, datix, chain of command, open door policy
- An awareness of our Educational Governance Team- evaluation and importance of feedback
- Inter-professional Learning Sessions
- Practice Assessment Record and Evaluation (PARE) training, if applicable
- Collaborative Learning in Practice (CLiP™), if applicable
- How the role of Practice Development Facilitator can support you, where applicable



## What to bring on your first day

- Uniform: All other items in the dress code policy must be adhered to <https://legacy-intranet.lthtr.nhs.uk/search?term=uniform+policy>
- A smallish bag which would fit into a small locker.
- You may wish to bring a packed lunch and a drink on your first day.

## Inter-professional Learning Sessions and eLearning Resources

At our Trust, our Education Team facilitates a yearly programme of Inter-professional Learning (IPL) sessions. This programme consists of various teaching sessions, delivered by our Specialist Teams, to support and enhance our learners and trainees' learning experience with us.

Inter-professional learning is an important part of your development and allows you to build professional relationships and communication skills with the wider multi-disciplinary teams. Our IPL sessions are valuable in supporting you to stretch your knowledge and experiences to enhance your clinical practice. They also help bridge the gap between theory and practice, allowing you to hold a deeper understanding of the topics discussed. Our sessions are open for all learners and trainees on placement at our Trust to attend and these learning opportunities are an extension to your learning environment; therefore, these hours need to be recorded on your timesheets. We encourage our staff to facilitate enabling a learner/trainee to attend these sessions.

**Please note: You must inform your learning environment prior to attending a session.** These IPL sessions need to be discussed in a timely manner with your learning environment.

You are required to complete a reflection on each of your IPL sessions, as well as documenting on your HEI documentation what you have learnt and how this relates to your current placement.

You can book onto our IPL Sessions by accessing this link <https://elearning.lthtr.nhs.uk/login/index.php> and searching for 'IPL'.

You can access our policies and procedures via our Intranet page, which will help expand and stretch your knowledge.

## Support with evidencing your learning outcomes or proficiencies

We encourage you to use the Trust learning logs to collate and evidence your skills, knowledge and abilities achieved. You can then present your completed learning logs to your Practice Assessor/Educator during your assessment meetings. Any staff member who is involved in coaching you can complete your learning log feedback.

You can request time during your placement hours to complete these and request feedback prior to the shift ending. To obtain a copy of our learning logs, please visit our Health Academy Webpage on the link below, where you will see a copy of our CLiP™ Learning Log available for you to download, on the right hand side - <https://healthacademy.lancsteachinghospitals.nhs.uk/support/clinical-placement-support/collaborative-learning-in-practice-clip/>

## Chain of Command

Keeping patients safe, providing the best care that we can and learning in an environment where you feel safe and valued is important to us. Speaking up about any concern you have on your learning environment is also important. In fact, it's vital because it will help us to keep improving our services for all patients.

There may be occasions where we witness, experience or are asked to do something that causes us concern. Often, these concerns can be easily resolved, but sometimes it can be difficult to know what to do.

Our Clinical Placement Support Team are available Monday – Friday, 8.00am – 4.00pm should you need to contact them in relation to any concerns regarding your learning environment. If your concern relates to patient safety and/or your concerns are outside of these hours, please follow the chain of command in your learning environment and speak with the person in charge.

Please visit our Freedom to Speak Up page on the Intranet for more details.



## We value your feedback

Our Trust values your feedback. To continuously improve, we offer opportunities for our learners and trainees to provide feedback regarding both your learner experience and your learning environment. We would encourage you to kindly complete your end of placement evaluation, within your clinical hours.

We will keep you updated with the improvements that we make based on the feedback you provide us with.