

Learning Environment



Rookwood A

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>



E-roster for Nursing and Midwifery Learners

It is your responsibility to ensure that you access your Healthroster account on a regular basis, to make a note of your rota.

Please note the following;

- You will need to make any specific requests of change to your rota to your placement area, in line with our Trust Healthroster deadlines.
- You will need to make a request to your placement area for study leave to be added to your Healthroster, should study leave be required.

Orientation to your Learning Environment – Adult Nursing

Please complete and present at your initial meeting.

Pre-orientation 2 weeks prior to starting your Learning Environment

- Arrange a pre-visit to your new Learning Environment.
- Visit your Learning Environment; ask to be shown around and ask what to expect on your first day i.e. where do I put my belongings, where can I put my lunch, where should I go on my first day and who should I report to.
- Ask to be shown your Learner Board, where you will find out who your Supervisor and Assessor is.
- Ask to be shown your Learner Resource File.
- Access your Healthroster to ensure you have your off duty and should you have any queries regarding your rota, please direct them to your Ward Manager or Learning Environment Manager.
- Access your learning handbook via the Health Academy webpage and start planning what you want to achieve from your Learning Environment.
- We advise that on your **first day you will be starting at 9am**, please discuss this with your learning environment.

First day on your new Learning Environment

- Introduce yourself and inform them that it's your first day.
- Ask to be shown around again, should you require this.
- Request to be shown the Team Board where the teams for the day are displayed, so you can familiarise yourself with, who is in your team, who you are working alongside and where your break times will be displayed.
- Ask to have the chain of command explained to you on this Learning Environment and ask who oversees this Learning Environment (i.e. Unit/Ward Manager).
- The local fire procedures have been explained and where you can find the equipment needed.
- Resuscitation equipment has been shown and explained.
- You know how to summon help in the event of an emergency.
- Lone working policy has been explained (if applicable).
- Risk assessments/reasonable adjustments relating to disability/learning/pregnancy needs have been discussed (where disclosed).
- You are aware of your professional role in practice.

Within your first week on your Learning Environment

- Resuscitation policy and procedures have been explained.
- You are aware of where to find local policies.
 - Health & Safety
 - Incident reporting procedures
 - Infection control
 - Handling of messages and enquiries
 - Information Governance requirements
 - Other policies
- Policy regarding Safeguarding has been explained.
- Complete your initial meeting with your Practice Supervisor/Assessor and discuss any Inter-professional Learning Sessions that you would like to attend.

If you require any further support with your orientation, please contact your
Unit/Ward Manager or our Clinical Placement Support Team on
01772 528111/placement.support@lthtr.nhs.uk

Please note: Any member of staff can complete this document with you.

Learning Environment

Welcome to Rookwood A! This welcome pack has been designed to familiarise yourself with the ward, to help you to make the most of your learning experience and enjoy your placement.

You will be allocated a Practice Assessor and Practise Supervisor on your first day.

Ward Contact Number: 01257 245982 / 245570

Ward Shifts:

Night: 1900 - 0730

Long day: 0700-19:30- you will have to do an extra 8 hour shift a month to make up hours.

Sickness/absence

If you are unable to get into placement for whatever reason, you must contact the ward prior to your shift starting, and also follow the correct university policy for reporting sickness/absence. You will also need to email

learner.absences@lthtr.nhs.uk

Ward Layout

Rookwood A is a 24 bedded medical ward, specialising in endocrine and elderly care.

We are also a 'dementia friendly ward'. This means that the ward is adapted specifically to meet the needs of patients with dementia. We have a group of dementia champions who take the lead in activities, such as a weekly luncheon club and regular tea parties for all our patients.

The ward is comprised of two medical teams, being Acute Medicine & Elderly Care and Endocrinology.

General Notes:

- The shift time stated is the time you should start- if you are running late you should call the ward. This is good practice for you when you qualify!
- Please arrive in your own clothes and change into uniform on arrival
- Your PARE is your responsibility to keep updated- your first meeting should be completed in the first week- if this is not done, speak to your Practice Assessor, Practice Supervisor or our Learning Environment Manager. You should be completing the sections outlined prior to the meetings, otherwise we cannot complete them.
- Timesheets should reflect your hours on the ward- you will have a 15 minute break in the morning and then a 30 minute break in the afternoon. Please ensure you deduct 30 minutes from your timesheets each shift.

Your role as a learner/trainee:

- Attend to patient's fundamental care needs, such as personal care, vital signs, risk assessments, skin integrity, nutritional requirements and documentation
- Assist with supervised medication rounds
- Assist with serving meals and hot drinks
- Attend placement punctually
- 2 hours enhancing at a time!! Please ensure you have a break from enhancing on the ward after an hour and assist with enhancing duties later in the shift if required. If this is not upheld, please inform the Nurse in Charge
- If you would like to see anything interesting on the ward- such as a scan or catheterisation, please bug people on the ward to go and watch!
- Your pare document is your responsibility- please ensure this is done in a timely manner.
- Utilise the learning folder outside the kitchen and our Learner Board
- ENJOY YOUR PLACEMENT 😊

Student skills

On a scale of 1-10 how confident do you feel in these areas? (1 being not very confident and 10 being very confident). Use this to start your initial meeting, and develop areas to work.

Skill	Confidence									
Tissue Viability and wound care	1	2	3	4	5	6	7	8	9	10
Vital signs- parameters and identifying change	1	2	3	4	5	6	7	8	9	10
Blood sugars- identifying a hypoglycaemic episode and managing this	1	2	3	4	5	6	7	8	9	10
Pressure care- when to increase repositioning and order a better mattress	1	2	3	4	5	6	7	8	9	10
Nutrition for patients- identifying when to refer to dieticians and when to give supplements	1	2	3	4	5	6	7	8	9	10
Fluid balance monitoring and when to escalate	1	2	3	4	5	6	7	8	9	10
Care planning- when to change care plans	1	2	3	4	5	6	7	8	9	10
Personal care of patients	1	2	3	4	5	6	7	8	9	10
Medication management	1	2	3	4	5	6	7	8	9	10
Documentation- how to document safely	1	2	3	4	5	6	7	8	9	10
Infection Control	1	2	3	4	5	6	7	8	9	10
Health conditions and how these affect patients	1	2	3	4	5	6	7	8	9	10
Bowel management/ Stoma care	1	2	3	4	5	6	7	8	9	10
Mouth care- identifying thrush and dehydration	1	2	3	4	5	6	7	8	9	10
ANTT	1	2	3	4	5	6	7	8	9	10
Specimen collection- how to order specimens on Quadramed	1	2	3	4	5	6	7	8	9	10
Safeguarding and how to make a referral	1	2	3	4	5	6	7	8	9	10
Catheter care and when to insert catheters	1	2	3	4	5	6	7	8	9	10
Injection techniques	1	2	3	4	5	6	7	8	9	10
EOL Care and anticipatory medications	1	2	3	4	5	6	7	8	9	10
Oxygen therapy- when to use humidified O2 and venture masks	1	2	3	4	5	6	7	8	9	10
Last Offices	1	2	3	4	5	6	7	8	9	10
A-E assessment	1	2	3	4	5	6	7	8	9	10
Neuro observations	1	2	3	4	5	6	7	8	9	10
Recognising sepsis and how to escalate	1	2	3	4	5	6	7	8	9	10
Blood Transfusion	1	2	3	4	5	6	7	8	9	10
Care of a diabetic patient and insulin	1	2	3	4	5	6	7	8	9	10
Mental Capacity and DOLS	1	2	3	4	5	6	7	8	9	10
Datix and incident writing	1	2	3	4	5	6	7	8	9	10
IV medications and Medusa	1	2	3	4	5	6	7	8	9	10

Ng insertion, nutrition/fluid management	1	2	3	4	5	6	7	8	9	10
Care of PEG/RIGG/NJ tubes	1	2	3	4	5	6	7	8	9	10
Breaking bad news	1	2	3	4	5	6	7	8	9	10
Venepuncture and cannulation	1	2	3	4	5	6	7	8	9	10



Medications

How many of these medications are you familiar with?

Drug	Drug Category	Drug	Drug Category
Aciclovir		Gliclazide	
Adcal		Ibuprofen	
Allopurinol		Isosorbide	
Amitriptyline		Mononitrate	
Amiodarone		Lansoprazole	
Amlodipine		Levetiracetam	
Amoxicillin		Levofloxacin	
Apixiban		Lorazepam	
Aspirin		Magnesium Aspartate	
Atorvastatin		Memantine	
Bisoprolol		Metformin	
Carbocisteine		Metoclopramide	
Chlordiazepoxide		Metronizadole	
Chlorphenamine		Nitrofurantoin	
Citalopram		Omeprazole	
Clarithromycin		Ondansetron	
Clopidogrel		Perindopril	
Co-Amoxiclav		Phosphate Sandoz	
Co-Beneldopa		Pivmecillin	
Codeine		Prednisolone	

Cyclizine	Quinine Sulphate
Dexamethasone	Ramipril
Donepezil	Sando K
Digoxin	Sertraline
Dihydrocodeine	Senna
Docusate Sodium	Simvastatin
Doxycycline	Sodium Bicarbonate
Ferrous Fumarate	Sodium Valproate
Ferrous Sulphate	Spirolactone
Finasteride	Tamsulosin
Fludrocortisone	Thiamine
Flucloxacillin	Trimethoprim
Folic Acid	Warfarin
Furosemide	
Gabapentin	

General Questions you might come across: Please ask nurses and doctors and utilise resources.

What should the PH of an aspirate from an NG tube be before starting a feed or giving medications?

What are the signs of hypernatremia? How do you treat?

For which infusions should you use telemetry?

From the medication list on page 9 which medications can lower blood pressure?

How do you treat hyperkalaemia?

How do you treat hyponatraemia?

When discharging a patient on insulin or anticipatory medications which form would you get completed for the district nurses?

What paperwork would a patient require going to 24 hour care with a DNAR?

What is Medusa?

What does DPD stand for?

What should a patient's pulse rate be before giving Digoxin?

When should you complete an MCA and DOLS?

Who can you call for support if a patient is very unwell?

What would you do if a patient has had 1200mls in and passed 100mls in a day?

Acute and Long-term conditions- How can these affect a patient?

Condition	Acute or chronic?	Symptoms and effect on body
Heart failure/ congestive cardiac failure (CCF)		
Atrial Fibrillation (AF)		
Chronic Kidney Disease Stages 1-4		
Dementia		
Chronic obstructive pulmonary disease (COPD)		
Diabetes		
Pneumonia		
Hyponatraemia		
Hypernatremia		
Hypokalaemia		
Hyperkalaemia		
Hyperglycaemia		
Multiple sclerosis		
Deep vein thrombosis (DVT)		

Cellulitis

Urosepsis

Parkinson's

Hypertension

Haematuria

Lung Cancer

Osteoporosis

Arthritis

Pleural effusion

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



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 your 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/>

Collaborative Learning in Practice (CLiP™)

CLiP™ is an innovative clinical education model designed to enhance the learning experience of healthcare learners by fostering a collaborative and supportive environment. Originating in Amsterdam and introduced to the UK by Charlene Lobo, Senior Lecturer at the University of East Anglia, CLiP™ has been successfully implemented in various NHS trusts, including Royal Preston Hospital and Chorley & South Ribble Hospital.

➤ How CLiP™ Works in a Learning Environment

Learners are assigned to a practice environment and divided into smaller groups. These groups consist of learners from various year levels, promoting peer learning and support.

Each group is supervised by a coach rather than a traditional mentor. The coach is responsible for guiding the learners in delivering holistic patient care, covering essential skills, documentation, ward rounds, and shift handovers. Our coaches;

- Provide guidance and ensure that learners meet their learning objectives.
- Help bridge the gap between theoretical knowledge and practical application. Offer continuous feedback and support to enhance the overall learning experience.

Learners will be encouraged to engage in a comprehensive range of patient care activities, which include performing essential clinical skills, maintaining accurate documentation, participating in ward rounds and conducting handovers. Additionally, learners will have the opportunity to follow their patient's journey through specialist

units, by attending surgeries and also partaking in specialised treatments, therefore gaining a broader practical experience.

An overarching Practice Assessor supports the coach in order to promote the quality of the learning experience. The Practice Assessor is responsible for overseeing the learners practice assessment documentation and providing necessary support to both the coach and learners.

➤ **Benefits of Collaborative Learning in Practice (CLiP™)**

The collaborative environment helps address the challenges of traditional mentoring, such as workload balance and teaching time. This model aims to alleviate stress for both learners and Practice Assessors whilst promoting a supportive and effective learning experience.

By involving Practice Supervisors and Educators, CLiP™ ensures comprehensive support and continuous feedback, leading to richer learning experiences and better-prepared healthcare professionals.

The structured support system and hands-on learning opportunities help mitigate issues related to perceived lack of support, reducing learner dropout rates compared to traditional mentoring models. (not sure I would include this paragraph as it sounds a bit negative and I don't think the learner needs to read this)

LTHTr are dedicated to implementing innovative educational methods, such as CLiP™, to ensure our learners receive high-quality clinical education and are well-prepared to deliver exceptional patient care.

Creating a positive Organisation Culture

LTHTr strive to create a great place to work for every colleague and deliver excellent care with compassion to our patients. We all play a pivotal role, not only in providing services but also in shaping the culture of our organisation.

The attitudes, actions and behaviours we experience from others makes a huge difference, both personally and professionally. We want you to feel safe and supported in work to be able to deliver high quality care to others. We also want you to feel confident, supported and empowered in taking positive action to address and challenge others in situations that may make you or those around you feel uncomfortable.

We take a zero-tolerance approach towards any form of abuse.

You can find out more about this by reading our [Zero-Tolerance Statement](#), or by taking a look at [Creating a Positive Culture Intranet](#) pages.

Here you will find the links to lots of information, resources and training opportunities to help develop your knowledge, skills, and awareness in how to uphold the principles of [zero-tolerance](#), as a colleague at LTHTr. There is also further information available on [Civility](#), our [Best Version of Us Culture Framework](#) and [Supporting Sexual Safety in the Workplace](#).



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 to Friday, 8.00am – 5.00pm 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.

Nursing Directorate monthly meetings are held to share new and innovative ideas as to how we can collaboratively enhance our learning environments, to support both learners, trainees and staff.