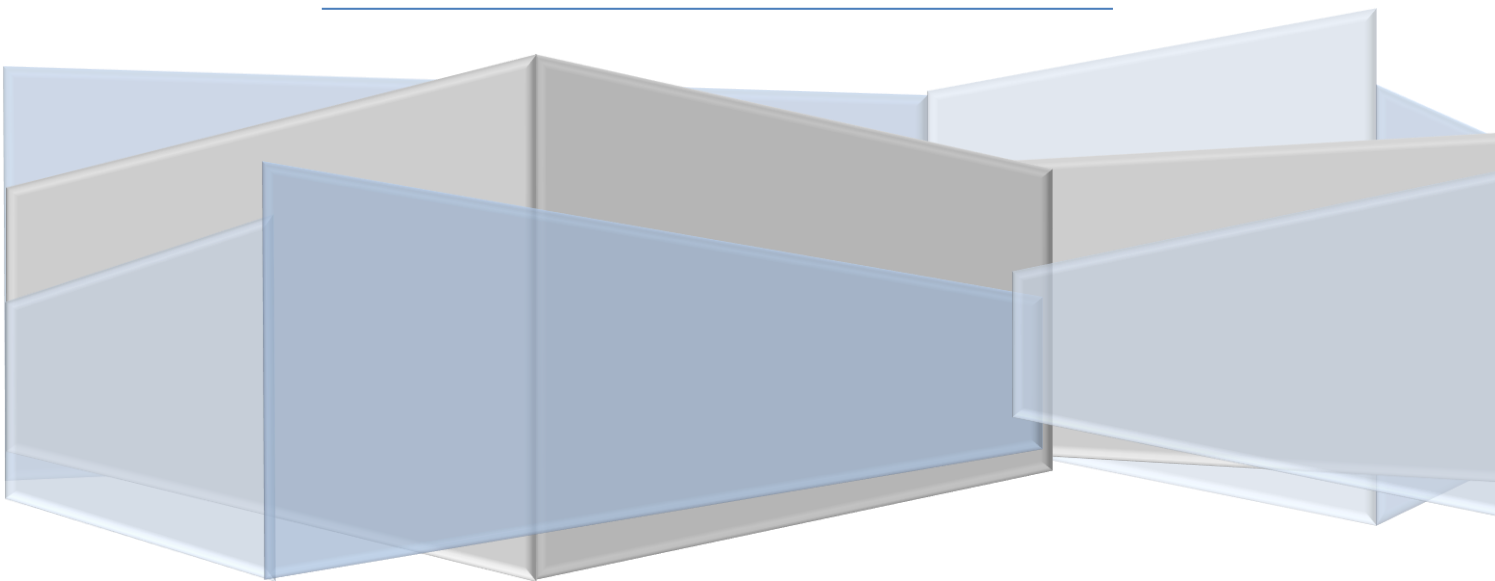
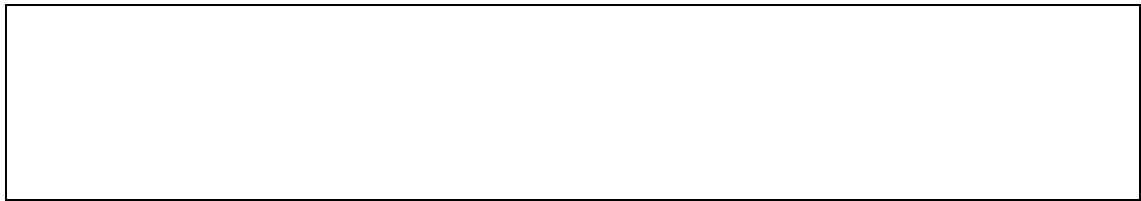




STUDENT ODP HANDBOOK



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Our Mission

To work in partnership to provide safe and effective care that patients expect and deserve.
This enables confident and competent staff to provide the highest standards of care and services.
To lead improvements in healthcare through innovation, research and education.

Our Core Values

These were developed in consultation with staff in 2010 and underpin our care delivery.
They define the actions, behaviours and attitudes that we expect from every member of staff.
Living by these values will ensure that colleagues, patients, families and others are always treated in the right way. Our Core Values are:-

Being Caring and Compassionate:

Being caring and compassionate is at the heart of everything we do, it is about understanding what each person needs and striving to make a positive difference in whatever way we can.

Recognising individuality:

Appreciating differences, making staff and patients feel respected and valued.

Seeking to involve:

Actively gets involved and encourages others to contribute and share their ideas, information, knowledge and skills in order to provide a joined up service.

Building Team spirit:

Working together as one team with shared goals, doing what it takes to ensure we provide the best possible service

Taking personal responsibility:

Individuals are accountable for achieving improvements to obtain the highest standards of care in the most professional way, resulting in a service we can all be proud of.

Summary of departments

The theatre department at Royal Preston Hospital covers a wide range of specialities. Individual Clinical managers have responsibility for one or more of these specialities. The clinical managers are:-

Department Manager	Sister Vicky Ives
Anaesthetics and Recovery	Sister Julie Fursman
Plastics, ENT and Ophthalmic Urology and General Surgery	Sister Sandra Riley
Emergency and Vascular	SODP Vicky Harrison
Neurosurgery and Orthopaedics	Sister Sabitta Nuttaki
Theatre Co-ordinator	Sister Ros Aspinall and Sister Eileen Burbridge

These clinical managers are supported by Team leaders within each speciality.

They are:

Anaesthetics/ recovery

CN Ivan Haskell
Sister Elizabeth Keane
Senior ODP Katie Parker
Senior ODP Jo-Ann Johnson
CN Marlon Benn
Sister Anna Barton
Sister Amita Gill

Sister Linzi Smith
Senior ODP Karrie Hawkins
Senior ODP Megan Bowen-Fell

Sister Emma Pool
Sister Mary Sherman

Scrub Practitioners

Plastics Sister Lauren Wasp
Sister Julie Smith

ENT Sister Catherine Walsh
Sister Lekha Joy

Emergencies

Sister Naseem Barnard
Charge Nurse Amir Tabassum
Charge Nurse Andrew Mills
Sister Sali Biju
Sister Katie Evans

General Surgery/Urology/Upper GI

Senior ODP Donna Lee-Dawson
Sister Rhian Heaton
Charge Nurse Biju Joseph

Vascular

SODP Matt Wilkinson
Sister Janet Gorse

Orthopaedics

Sister Mary Clark
Sister Luan McNamara

Neuro Surgery

Sister Beena Bibin
Sister Lotika Thakur Das
Sister Ludovica Menon
CN Ipe Ninan

Sharoe Green Unit**Anaesthetics**

Sister Laura Mateous
SODP Menisa Ali
Sister Jo Chadwick

Scrub Sister Carole Heaton
Sister Imelda Howlett
Sister Nadia Hutchinson

Chorley Theatres**Clinical Manager**

Sister Lesley Perkins
Sister Nicola O'Bierne

Anaesthetics Team Leaders

Sister Debbie Pugh
Charge Nurse Andrew Shirtcliffe
Sister Sarah Melling
SODP Wendy Hodge

Scrub Sister Yvonne Twentyman
Sister Sam Howard
Sister Dot Jackson
Sister Claire Kerr
Senior ODP Bonnie Unsworth
Sister Joanne McClean
Charge Nurse Darren Morris

Day Case Unit**Clinical Manager**

Sister Joanne frimson

Anaesthetics Team Leader

ODP Stephanie Dean

Scrub Sister Hayley Ashton
Sister Monica Raj

Ward Sister Danielle Marginson
Charge Nurse Andrew Eaves

Off Duty

Whilst you are on a Theatre placement your off duty will be done by the Training & Development Team and your placement area. You will work a variety of shifts, which will generally fall between 8am and 6 pm. But if your mentor/ team are working out of hours shifts then you may be expected to work these hours. If you anticipate any problems with off duty please let the training team know as soon as possible.

You will have designated mentors and also an associate mentor for the duration of your placement.

LOCAL PROCEDURE FOR REPORTING SICKNESS / ABSENCE

Reporting Sickness

We have a strict policy in the department regarding the reporting of sickness and absence.

If you are sick or are going to be absent for **ANY** reason you must ring the Training and Development office on **01772 522355** and speak to a member of the training team. If we are not in the office you may leave us a message on our voice mail

You must ring after 8 am on the **first day** of absence and inform us how long you will be off and when you will return to placement.

If you are unsure how long you are going to be absent then you must ensure that you maintain contact with us and update us **daily** of your continuing absence.

If you do not turn up for placement and we have not been informed that this will be the case then you will be marked as absent without reason and UCLan will be informed of this.

If your period of sickness is longer than 4 days you must provide a self-certificate. If it continues past 7 calendar days you must provide a medical certificate from your Doctor.

Other contact numbers to- REPORTING SICKNESS TO YOUR PLACEMENT AREA

Royal Preston Hospital Main Theatres

Ring the hospital switchboard (01772) 716565 and ask them to bleep the theatre coordinator on 2360 OR call 01772 522360 which is the theatre co-ordinator phone number

Chorley Hospital Lythgoe theatres,

Ring 01257 245701 after 0800 and ask to speak to the theatre coordinator.

Royal Preston Sharoe Green Unit

Ring the hospital switchboard (01772) 716565 and ask them to connect you to Ext 4872 ask to speak to the theatre coordinator

Royal Preston Hospital Day Case Unit

Ring 01772 523405 which is the theatre Clinical Manager phone number in the sisters office.

Please note that failure to comply with the sickness absence reporting procedure is subject the trusts general disciplinary rules and may lead to a termination of your training contract.

Policies and Procedures

Trust policies and procedures can be found and accessed on the intranet. Theatre policies and procedures are the rules and guidelines set out to establish good patient care. They are reviewed and updated on a regular basis usually when new working practices are implemented or new research warrants change. These policies and procedures should be adhered to by all staff and can be used as supporting evidence within academic work.

On your first day in placement you will be oriented to the department and be given an induction into the Health and Safety and Fire procedures within Theatres.

Reporting Accidents and Occurrences

Any accident or occurrence affecting a member of staff, a patient, a relative or any visitor to the department must be recorded and documented via the Datix online incident reporting system. Always report any incident to the senior nurse in charge of the department and they will guide you through the incident reporting process.

Training and Development Department

Sandra Pryme
Training and Development Clinical Educator
Phone 01772 522355 Ext: 2355
Sandra. pryme@lthtr.nhs.uk

Emma Donaldson
Training and Development Clinical Educator
01772 523536 or 522355 Ext 2355
Emma.donaldson@lthtr.nhs.uk

Sarah Haskell
Training and Development Clinical Educator
01772 522355 ext 2355
Sarah.haskell@lthtr.nhs.uk

Alex Dowling
Training and Development Clinical Educator
Phone 01772 522355 Ext: 2355
Alexander.dowling@lthtr.nhs.uk

Mick Lowe
Training assistant
01772 522355 ext 2355
Michael.lowe@lthtr.nhs.uk

Lorraine McLaughlin
Training assistant
01772 522355 ext 2355
Lorraine.mclaughlin@lthtr.nhs.uk

The training and development office –

Is situated next to theatre 1 and we operate an open door policy. Students are encouraged to ‘drop in’ with any queries or problems they may have.

We also have an office in CDH based in the anaesthetic offices.

The Training and Development team is responsible for student theatre placements, staff induction, theatre rotation, mandatory training, in-house study days and training sessions as well as facilitating staff access to external courses and promoting ongoing professional development.

In main theatres there is a student notice board. Please familiarise yourself with this as it contains details of study sessions that you may be interested in. If there are any of these study sessions you would like to attend, please see training and development team and they will book you on them.

If you give your email address we will endeavour to email you your off duty for at least 3 weeks in advance. We will ask for emergency contact details and keep a folder with you for information- any details you give us will be kept confidential.

Whilst on placement in theatres you will have access to a regular student meetings with the practice educators. This is your time to discuss progress, address issues or just to meet up with the other students and discuss your experiences.

Clinical Placement Support Team

The Clinical Placement Support Team provides advice and support to clinical placements, mentors and all health care students.

The Clinical Placement Support Team at Lancashire Teaching Hospital are available via:

Email – placement.support@lthtr.nhs.uk
--

01772 528111

Please contact them if you feel you need any assistance.

Uniform Policy

The uniform policy must be adhered to at all times.

Surgical scrubs and clogs are provided and available in the changing rooms.

Students wear yellow hats in theatres so they can easily be identified. If there are none in the changing room then please obtain them from the store.

Any jewellery must be kept to a minimum and is limited to one pair of plain studded earrings and a plain wedding band. No other jewellery should be worn. False nails are also not allowed in the department.

Hair should be tied back neatly so that it can fit comfortably under your theatre hat.

If you leave the department to go outside the building for any reason i.e. to go the library, you must change into your outdoor clothing.

Break Facilities

There are two rest rooms provided for staff at RPH, 1 situated outside theatre 11 and another rest room situated opposite theatre 2.

There are 2 kitchens which provide tea and coffee making facilities.

Tea, coffee and cold drinking water are provided for you free of charge.

The kitchens contain microwaves, a toaster and a fridge to store food in from home. If you bring your own lunch please ensure it is labelled with your name and date prior to placing it in the fridge.

Jacket potatoes, with hot fillings, soup, salads, sandwiches and other sundry food items are available to buy in the department between 12.00 and 13.45 in the room next to the kitchen near Theatre 1

CAFÉ MAISON

Mon – Fri 8.30- 13.15
Sat – Sun 1.45- 1.15 am
Take Away Only - 8.00 - 13.15

CHARTERS

Breakfast Mon- Fri 8.00 -11.00
Lunch Mon – Fri 11.45 till 14.00
Sat- Sun 8.00 - 13.45

Achieving excellence in learning and care...



Placement Charter

This Charter demonstrates the Placement's commitment to provide a safe and high quality learning environment for all learners to prepare them for their future roles working collaboratively in multi-professional teams. The 'Placement Pledges' and the 'Rights, Roles and Responsibilities of learners' instil the values embedded within the NHS Constitution (DH 2013) and Health Education England's NHS Education Outcomes Framework (DH 2012).

Placement Pledges	Rights, Roles and Responsibilities of learners
Ensure all learners are welcomed, valued and provided with an inclusive, safe, stimulating and supportive learning experience.	Prepare adequately for the placement, including contact with the placement in advance. Disclose any health or learning needs that may impact on the placement, or the achievement of learning outcomes.
Promote a healthy and 'just' workplace culture built on openness and accountability, encouraging all learners to raise any concerns they may have about poor practice or 'risk', including unacceptable behaviours and attitudes they observe at the earliest reasonable opportunity. Respond appropriately when concerns are raised.	Raise any serious concerns about poor practice or 'risk', including unacceptable behaviours and attitudes observed at the earliest opportunity. Be clear who to report any concerns to in order to ensure that high quality, safe care to patients / service users and carers is delivered by all staff.
Provide all learners with a named and appropriately qualified / suitably prepared mentor / placement educator to supervise support and assess all learners during their placement experience.	Actively engage as an independent learner, discuss learning outcomes with an identified named mentor / placement educator, and maximise all available learning opportunities.
Provide role modelling and leadership in learning and working, including the demonstration of core NHS 'values and behaviours' of care and compassion, equality, respect and dignity, promoting and fostering those values in others.	Observe effective leadership behaviour of healthcare workers, and learn the required NHS 'values and behaviours' of care and compassion, equality, respect and dignity, promoting and fostering those values in others.
Facilitate a learner's development, including respect for diversity of culture and values around collaborative planning, prioritisation and delivery of care, with the learner as an integral part of the multi-disciplinary team.	Be proactive and willing to learn with, from and about other professions, other learners and with service users and carers in the placement. Demonstrate respect for diversity of culture and values, learning and working as part of the multi-disciplinary team.
Facilitate breadth of experience and inter-professional learning in placements, structured with the patient, service user and carer at the centre of care delivery, e.g. patient care pathways and commissioning frameworks.	Maximise the opportunity to experience the delivery of care in a variety of practice settings, and seek opportunities to learn with and from patients, service users and carers.
Adopt a flexible approach, utilising generic models of learner support, information, guidance, feedback and assessment across the placement circuit in order to support the achievement of placement learning outcomes for all learners.	Ensure effective use of available support, information and guidance, reflect on all learning experiences, including feedback given, and be open and willing to change and develop on a personal and professional level.
Offer a learning infrastructure and resources to meet the needs of all learners, ensuring that all staff who supervise learners undertake their responsibilities with the due care and diligence expected by their respective professional and regulatory body and organisation.	Comply with placement policies, guidelines and procedures, and uphold the standards of conduct, performance and ethics expected by respective professional and regulatory bodies and organisations.
Respond to feedback from all learners on the quality of the placement experience to make improvements for all learners.	Evaluate the placement to inform realistic improvements, ensuring that informal and formal feedback is provided in an open and constructive manner.
<ul style="list-style-type: none"> • 'Learner' refers to all health, education and social care students, trainees, hosted learners • 'Placement' relates to all learning environments / work based learning experiences • 'Mentor' / 'placement educator' relates to all trainers / supervisors / coordinators appropriately qualified / suitably prepared to support learners • 'Professional and regulatory body and organisation' relates to standards required to ensure patient and public safety, and professional behaviours 	



Developed in the North West by healthcare learners, service users, carers, and health and social care staff from all professions in the North West region.



Health Education North West

Who's Who?

Co-Ordinator-

They are responsible for coordinating the service, making optimal use of operating sessions. They will identify potential bottlenecks and facilitate smooth patient flow through the department and communicate all relevant information to the multidisciplinary teams.

Clinical Manager (Band 7)-

All specialities have a clinical manager who is responsible for ensuring that their team are adequately supported, resourced and organised. They are responsible for ensuring the safe practice of their specialities through the monitoring and maintenance of standards. (This is more of a non-clinical role)

Team Leader (Band 6) - Sister/ Charge nurse/ senior ODP/ SODP/ Scrub sister/ anaesthetic sister

They will support their line manager in the effective management of the team along with keeping a clinical role. The team leaders are responsible for staff rotas, carrying out staff appraisals and staff development along with support junior members within the team. They lead on new initiatives within their speciality and have strong links with the consultants in providing and resourcing the equipment that they require.

Scrub Practitioner (Band 5) – Scrub nurse/ scrub ODP

Works in a team to co-ordinate the theatre list, maintain communication within the team and ensure equipment is available for the procedures. They are responsible for maintaining a sterile field and managing the instruments, swabs and sharps during a procedure. A scrub practitioner ensures safe practice is delivered and that standards are met.

Anaesthetic practitioner (Band 5) – Anaesthetic ODP/ anaesthetic nurse

They are responsible for setting up the anaesthetic room and ensuring the safety checks have been done on the ventilation equipment. They work alongside the anaesthetist to deliver a high standard of care whilst the patient under goes an anaesthetic. The anaesthetic practitioner will stay with the patient in theatre throughout the procedure.

Recovery Practitioner (Band 5)- Recovery nurse/ recovery ODP

They are responsible for setting up and co-ordinating the recovery area and ensuring all the safety checks are maintained on the equipment. The recovery practitioner monitors and delivers a high standard of care for patients who have under gone a procedure under anaesthetic. Once the patient is recovered to a safe level the recovery practitioner is responsible for communicating with the ward staff and transferring the patient to the relevant area.

Theatre assistant practitioner (Band 4)- A.P, T.A.P

Their role is similar to a band 5 scrub practitioner but they cannot do swab sharp or instrument counts or procedures without the support of a registered practitioner. Also the procedures they can scrub for are more limited to those of a registered band 5 practitioner.

Theatre support worker (Band 3/ band 2)- TSW

The theatre support worker delivers support to the whole team. They will assist the team in setting theatre/ recovery area up and test the equipment before the operating list commences. They will collect all the equipment needed for the day and make sure the areas are stocked up. They will collect and transfer the patient from the ward to the theatre/ theatre waiting area. It is the responsibility of the theatre support worker to support the scrub practitioner during procedures and complete documentation when needed.

Student Limitations

It is understood that while you are here on placement that there will be questions as to what you can and cannot do in practice. We have made a list of guidelines here to help you and your mentors but if there are any other areas that you are unsure about please contact the training and development team.

Student ODPs-

- **Cannot independently double check medications with another trained member of staff.**
- **Cannot independently check controlled medications with another trained member of staff.**
- **Can run through but cannot connect drips.**
- **Can only independently be second count once deemed as competent.**
- **Can only do moving and handling once training has been received.**
- **Cannot do venepuncture and cannulation on patients.**
- **Can only be a 2nd check for specimens once deemed competent and is aware of issues surrounding specimens and usage of formal saline.**
- **Can double scrub.**
- **Can scrub independently if supported from the floor and deemed competent to do so (mentors are not accountable for the students practice but the mentor is accountable for their own delegation).**
- **Can carry out work independently once deemed competent but must be observed at all times by the mentor.**

- **All documentation must be counter signed.**

Mentors and Student Learning Needs

A mentor is a healthcare professional that works in the trust, and who has developed their own knowledge, skills and competencies. They will have completed an approved mentorship/ supervision programme and it is their role to supervise you in practice, assist you to achieve your competencies and to facilitate progression.

Roles and responsibilities of your mentor

Guide Support
Encourage
Teach
Facilitate
Support
Encourage
Inspire

Be aware that your mentor will want you to have underpinning evidence as well as being able to do a practical assessment.

A planned timeframe for you to complete outcomes is important for both mentor and student

Ensure you complete documentation in timely manner when practice has been demonstrated and knowledge shown- not 3 months later- student and mentor responsibility

Once you have been on Quadramed (computer system) training you are able to fill in patient's details with your mentor's supervision.

Team approach-

Whilst you will be assigned a mentor during your placement the whole team that you are in will support you and the training and development team will offer help when needed.

Your off duty (the hours that you are working) will always be matched to your mentors off duty as much as possible but there will be times when this is not always possible. On these days another member or members of the team will be available for you to work with.

Theatres

Student /Mentor checklist



Theatre student/ mentor checklist

This Schedule has been designed to guide you through your placement. It provides a means of recording knowledge and skills and ensures that development of skills is comprehensive and consistent across all areas. It can also be used as evidence of skills gained while on placement.

Mentor / Assessors should sign and date the levels for each identified task as they are achieved and greyed out areas may be left blank.

TASK	Has observed/discussed	Has demonstrated	Independent.
Completed Theatre Etiquette blended learning package Date:			
<u>Theatre operating lights</u> <ul style="list-style-type: none"> • Knows how to turn theatre lights on/off. • Knows how to adjust the brightness. • Knows what to do if lights are not working correctly. 			
<u>Theatre Ventilation</u> <ul style="list-style-type: none"> • Knows how to check the theatre ventilation • Knows what to do if it is not working or if it fails. 			
<u>Theatre Temperature</u> <ul style="list-style-type: none"> • Can check the temperature of the theatre • Knows how to adjust the temperature • Knows what to do if theatre too hot / too cold 			
<u>Alarm system</u> <ul style="list-style-type: none"> • Where is the fire alarm and how would you activate it? • Can identify the different types of fire alarms • Can identify the procedure in the event of a fire alarm sounding 			

<ul style="list-style-type: none"> • Can discuss how to evacuate theatres in the event of a fire • Can locate and discuss different types of fire extinguisher • Can identify the theatre emergency alarm system and how to activate it 			
<u>Equipment storage</u> <ul style="list-style-type: none"> • Can locate and access the equipment storage areas • Can identify how to safely store own specialities equipment. 			
<u>Theatre Doors</u> <ul style="list-style-type: none"> • Do they open and close easily? • Do they close properly? • Can describe why theatre doors closing properly is important 			
TASK	Has observed/discussed	Has demonstrated	Independent.
<u>Air flow</u> <ul style="list-style-type: none"> • What is laminar flow? • What is ultra clean? 			
<u>Overhead gas pipe line/ Vacuum supply (Boom)</u> <ul style="list-style-type: none"> • Can safely connect and disconnect equipment from the boom. • Able to perform a 'tug test'. 			

<u>Plug sockets</u> <ul style="list-style-type: none"> • Are they safe and intact? • Able to discuss the importance UPS/ IPS marked plugs for medical equipment. 			
<ul style="list-style-type: none"> • Can discuss the importance of keeping the noise level to a minimum while surgery is in progress. 			
<u>Waste management</u> Can discuss and demonstrate the correct use and disposal of, <ul style="list-style-type: none"> • Clear bags • Yellow bags • Green/white bags • Red alginate bags • Used suction canister • Empty IV bags, vials and bottle containing non-hazardous medicinal products 			
TASK	Has observed/discussed	Has demonstrated	Independent.
<u>Personal Protective equipment</u> Can locate and discuss the importance of <ul style="list-style-type: none"> • Surgical face mask • Laser face mask • FFP 3 Mask • Eye protection • Lead aprons/ thyroid protection • Theatre specific Footwear 			

<u>Hand washing</u> <ul style="list-style-type: none"> • Can discuss the difference between social and surgical handwashing (commensurate with role). • Can identify the WHO 5 moments of hand hygiene 			
<u>Sharps safety</u> <ul style="list-style-type: none"> • Able to discuss the procedure undertaken in the event of a needle stick injury 			
<u>Electrosurgery</u> <ul style="list-style-type: none"> • Can describe the main risks associated with the use diathermy and how these can be reduced. • Can describe the differences between monopolar and bipolar. 			
TASK	Has observed/discussed	Has demonstrated	Independent.
<u>Patient positioning</u> Can identify and describe the following patient positions; <ul style="list-style-type: none"> • Supine • Prone • Lithotomy/Lloyd Davies • Trendelenburg • Reverse Trendelenburg 			
Able to demonstrate/discuss measures used to prevent pressure ulcer development in patients positioned within your specialty.			

<p>Able to discuss the special considerations required when positioning patients with:</p> <ul style="list-style-type: none"> • IV cannulas • Urinary Catheters • Drains <p>Able to discuss the aids used to secure and protect patients limbs during surgery</p>			
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TASK	Has observed / discussed	Has demonstrated	Independent.
<p>Able to name and discuss the importance of the 5 steps to safer surgery</p> <ul style="list-style-type: none"> • Team brief • WHO surgical site check list • Time out • Sign out • Debrief 			
<p>Can discuss risks and contra-indications of different types of skin prep</p> <p><u>Aqueous</u></p> <ul style="list-style-type: none"> • Chlorohexadine gluconate • Iodinated Povidone <p><u>Alcoholic</u></p> <ul style="list-style-type: none"> • Chlorohexadine gluconate • Iodinated Povidone 			
<ul style="list-style-type: none"> • Can describe how to move around theatre during surgery to preserve the sterile field. 			
<ul style="list-style-type: none"> • How do you know if a set is sterile? 			

<ul style="list-style-type: none"> How long after processing is a set sterile for? 			
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TASK	Has observed /discussed	Has demonstrated	Independent.
<ul style="list-style-type: none"> Can locate and has read Principles of checking surgical implants. Date: 			
<ul style="list-style-type: none"> Can open sets and other sterile equipment aseptically 			
<ul style="list-style-type: none"> Can discuss the importance of checking with the scrub practitioner before pouring any fluids or opening any medication on to the sterile field. Can discuss the importance of putting the date and time on fluids/medications when they are opened. 			
<ul style="list-style-type: none"> Can locate and has read the specimen handling policy Date: 			
<ul style="list-style-type: none"> Is aware of the procedure if Quadramed system is down. 			

1st year ODP scrub placement objectives*

Learning objective (with support from mentor)	Timescale	Learning reflections
Setting up of theatre	3 weeks	
Speciality specific paperwork	3 weeks	
Theatre specific paperwork (eg WHO checklist)	3 weeks	
Collecting a patient from the ward and bringing to theatre	3 weeks	
Speciality specific basic tray/instrument knowledge	6 weeks	
Quadramed (basic knowledge)	6 weeks	
Surgical hand washing (complete competency)	6 weeks	
Gloving and gowning (complete competency)	6 weeks	
Double scrubbing for a procedure with your mentor	6 weeks	

***Not inclusive**

Contact Details

For the duration of your placement, we ask that students supply us with emergency contact details.

In addition to this if you provide us with an email address we can email your off duty to you in advance. This is not mandatory.

Please complete the following details and return to the Practice Educators on the first day of placement.

Name of student

Emergency Contact Name

Emergency Number

Relationship

Email Address of student-

Please sign below to confirm that you have read and understood the policy for reporting sickness and absence whilst on this placement.

Name

Signature

Date