This document is an adaptation of the Fremantle Campus, School of Nursing, Clinical Practicum Information Booklet for Students. The original document was created for the use of undergradtate nursing students at the School of Nursing, the University of Notre Dame, Australia (Femantle campus). Use of this document outside of this purpose must be approved by the Clinical Placements Coordinator.

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Created by:  Kylie Russell
Date:  January 2010
Reviewed:  December 2010
Version:  Three

Adapted with permission by: Sally Clark
Date: April 2013
Version: Br three
# CONTENTS PAGE

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>WELCOME</td>
<td>6</td>
</tr>
<tr>
<td>PROGRAMS</td>
<td>7</td>
</tr>
<tr>
<td>CLINICAL PLACEMENTS TEAM</td>
<td>8</td>
</tr>
<tr>
<td>WHAT IS CLINICAL PRACTICUM?</td>
<td>9</td>
</tr>
<tr>
<td>PRE-REQUISITES FOR ATTENDENCE</td>
<td>10</td>
</tr>
<tr>
<td>MEDICAL CLEARANCE</td>
<td>10</td>
</tr>
<tr>
<td>SICK LEAVE/ABSENCE DURING PRAC</td>
<td>11</td>
</tr>
<tr>
<td>CLINICAL PRACTICUM ALLOCATIONS</td>
<td>11</td>
</tr>
<tr>
<td>MAKE UP TIME</td>
<td>11</td>
</tr>
<tr>
<td>CLINICAL REQUEST PROCESS</td>
<td>12</td>
</tr>
<tr>
<td>Bachelor of Nursing Clinical Practicum Program 2013</td>
<td>12</td>
</tr>
<tr>
<td>Diploma of Nursing Clinical Practicum Program 2012</td>
<td>13</td>
</tr>
<tr>
<td>LEAVE OF ABSENCE</td>
<td>14</td>
</tr>
<tr>
<td>PERTH PRACTICUM</td>
<td>14</td>
</tr>
<tr>
<td>CLINICAL SUPERVISOR VS CELO ROLE</td>
<td>15</td>
</tr>
<tr>
<td>ROLE OF THE CLINICAL SUPERVISOR AND CELO</td>
<td>15</td>
</tr>
<tr>
<td>ROLE OF THE MENTOR</td>
<td>16</td>
</tr>
<tr>
<td>WHAT IS MENTORSHIP?</td>
<td>16</td>
</tr>
<tr>
<td>CLINICAL PLACEMENT ASSESSMENT TOOL (CPAT)</td>
<td>19</td>
</tr>
<tr>
<td>RESPONSIBILITIES:</td>
<td>21</td>
</tr>
<tr>
<td>Formative and Summative Assessments (Bachelor of Nursing)</td>
<td>22</td>
</tr>
<tr>
<td>Formative Assessment (Diploma of Nursing)</td>
<td>22</td>
</tr>
<tr>
<td>Summative Assessment (Diploma of Nursing)</td>
<td>22</td>
</tr>
<tr>
<td>Exemplars</td>
<td>22</td>
</tr>
<tr>
<td>INTERVENTION REPORT (page 34-35 of the Diploma CPAT and page 36 of the BN CPAT)</td>
<td>23</td>
</tr>
<tr>
<td>COMMON QUESTIONS AND THEIR ANSWERS?????</td>
<td>26</td>
</tr>
<tr>
<td>Submitting CPATs</td>
<td>27</td>
</tr>
<tr>
<td>REFLECTIVE PAPERS</td>
<td>27</td>
</tr>
<tr>
<td>WHAT IS A REFLECTIVE PAPER?</td>
<td>27</td>
</tr>
<tr>
<td>WHAT TO DO</td>
<td>28</td>
</tr>
<tr>
<td>STARTING PRACTICUM, WHAT NOW?</td>
<td>32</td>
</tr>
<tr>
<td>MAKE SURE YOU HAVE</td>
<td>32</td>
</tr>
</tbody>
</table>
Welcome to clinical placements for UNDA Broome students for Semester 1 2013.

We look forward to working alongside you as we prepare you for the exciting world of nursing practice.

This manual is designed to assist you with your orientation to clinical placement. It includes general information on our clinical practicum program, our clinical placements team, the differences between the role of the CELO and supervisor, assessment criteria for clinical practicum, what is a learning contract, and a list of our policies, guidelines, skill list and year level objectives. The final section outlines our Emeritus Professor Doreen McCarthy Mentor award.

We hope that you find the information in this manual helpful. Please remember to refer to your unit outline and delivery, assessment strategies and any messages posted to you via email and Blackboard for any changes as they occur.

If you have any queries at anytime please do not hesitate to contact a member of the School of Nursing, as outlined in the Broome CPAT.

Sally Clark
Assistant Dean
PROGRAMS

The three-year **Bachelor of Nursing course** offers a formal curriculum, which contains all of the subjects mandated for nursing accreditation in Australia, while placing strong emphasis on clinical and hospital experience. The course focuses on the nurse-patient relationship and is highly practical in its orientation.

The **Diploma of Enrolled Nursing** provides students with the qualifications for registration with the Nurses Board as an Enrolled Nurse. This 18 month program meets the requirements of the VET (Vocational Education Training) sector.

**RPL pathways** into the Diploma and Bachelor of Nursing also have clinical placements and students need to be guided by the course coordinator.

Nursing student on placement in Kalumburu

**Changes for 2013 Curriculum**

Students who commenced in Feb2013 began the newly accredited Bachelor of Nursing program. For students enrolled in the Bachelor of Nursing prior to Feb 2013 you will continue with your current program until completion.
CLINICAL PLACEMENTS TEAM

The Clinical Placements Team primary role is the placement and management of students on clinical practicum.

When contacting the clinical placements team for non clinical issues please contact the Administration Officer. For clinical issues please contact Sally Clark.

Clinical Staff

<table>
<thead>
<tr>
<th>Staff</th>
<th>Position</th>
<th>Contact Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sally Clark</td>
<td>Assistant Dean/Senior Lecturer/Clinical Coordinator</td>
<td><a href="mailto:Sally.clark@nd.edu.au">Sally.clark@nd.edu.au</a></td>
</tr>
<tr>
<td></td>
<td>Unit Lecturer NSP 1st 2nd and 3rd year units</td>
<td>08 91920646</td>
</tr>
<tr>
<td></td>
<td></td>
<td>0417184964</td>
</tr>
<tr>
<td>Sr Jennifer Farrell</td>
<td>Senior Lecturer/Coordinator of Diploma of Nursing</td>
<td><a href="mailto:Jennifer.Farrell@nd.edu.au">Jennifer.Farrell@nd.edu.au</a></td>
</tr>
<tr>
<td></td>
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<td>08 91920629</td>
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Administrative Staff

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<tbody>
<tr>
<td>Uweinna Albert</td>
<td>Senior Administration Officer</td>
<td><a href="mailto:Uweinna.albert@nd.edu.au">Uweinna.albert@nd.edu.au</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>91920622</td>
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</tbody>
</table>

FAX (08) 91920690

IF UNSURE OF WHOM TO CALL PLEASE DIRECT YOUR CALL TO THE SENIOR ADMINISTRATION OFFICER ON 91920622 WHO WILL REDIRECT YOUR CALL
WHAT IS CLINICAL PRACTICUM?
Throughout your nursing program you are required to attend clinical practicum to develop the knowledge, skills and attitude of a Registered or Enrolled Nurse.

The clinical practicum that you are allocated each semester relates to the units of study you have completed.

Bachelor of nursing students complete at least 1240 hours of clinical practicum

Students enrolled in the Bachelor of nursing (and have completed a Diploma of nursing previously) complete at least 840 hours of clinical practicum.

Diploma of nursing students complete at least 600 hours of clinical practicum.

Please refer to the calendar related to your studies which is available in your School of Nursing student handbook. There is opportunity for makeup time during January and February.

To support you in the clinical practicum environment you are allocated a university clinical supervisor (or CELO if you are on placement in Perth) who will meet or telephone you weekly. Whilst in the clinical area a mentor will be allocated to you.

Assessment on clinical practicum occurs in a number of ways. These are outlined later in this manual. This manual has been designed to inform you of everything you need to know about your clinical practicum. Please ensure that you also read this manual in conjunction with your unit outline, delivery, assessment strategy. The text The Clinical Placement (2nd Ed) by Tracey Levet Jones and Sharon Bourgeois available in the library is also an excellent resource.

Cultural Sensitivity
You have come to UNDA Broome campus for a different experience in you Bachelor of Nursing program. Whether you are a permanent Broome student or cross campus student it is important that you increase your knowledge of the area and region.

What is cultural sensitivity, ‘the provider possesses some basic knowledge of and constructive attitudes toward the health/HEALTH traditions observed among the diverse cultural groups found in the setting in which he or she practicing.’ Spector, R. (2009)

For you in your clinical placement this could mean being aware of the way you speak, dress or your manner.

Listen and hear the staff around you and if you still need help talk to your clinical supervisor.
PRE-REQUISITES FOR ATTENDENCE

To attend clinical practicum Bachelor of nursing students must pass the prerequisites units as outlined in your NSP unit outline. Diploma of nursing students must have satisfactorily completed all assessments required prior to the clinical practicum as stated in the Delivery and assessment strategies for the associated stage of study. Students must be well and able to perform all nursing duties (please refer to medical clearance).

Prior to the first clinical placement all students must complete all pre clinical requirements

- Immunisation requirements
- criminal clearance screenings (Including National police screening, Health department screening and Working with Children's check)
- completion/signed Confidentially Statement
- completion/signed Nursing Clinical Practicum Policy
- Hand Hygiene Self Directed Learning Package
- Senior First Aid, with current Basic Life Support
- Completion of Manual Handling program

Pre clinical requirements are required by week 5 to enable the clinical placements team to finalise placements with facilities. **A failure to hand in your completed pack by the due date will result in your placement being cancelled.**

Students in semester/stage two must ensure that all multi dose vaccinations have been completed and details submitted to the clinical coordinator (Hepatitis A and B).

Students must then complete an annual update of their Basic Life Support training and Manual Handling.

MEDICAL CLEARANCE

Prior to commencing your Nursing program you are required to declare any medical condition/s that could impact on your clinical practicum. **It is essential that if during the program there is a change in your medical status you must inform the clinical coordinator.** A failure to do so may result in your inability to attend clinical practicum. The clinical coordinator will require a medical clearance for any student that has been unwell (requiring hospitalisation or an extended period away from the university) or suffered an injury. Please note a medical clearance to attend practicum during pregnancy is also required. Students who require support due to an injury/illness/health concern must inform the clinical coordinator as soon as possible so that we can ensure the medical clearances required are obtained and practicum can be organised according to your/the university's/medical clearance requirements.
Students who attend clinical practicum with an illness/condition and do not inform the clinical coordinator may place themselves and their patients at risk. Not only may this impact on your ability to complete the practicum, and care for your patients safely, you may also risk further injury/illness to yourself that has not been declared and recorded for insurance purposes.

SICK LEAVE/ABSENCE DURING PRAC
If you are required to take days off during your clinical prac, you will need to attach to your CPAT supporting documentation. This may be a medical certificate, certificate from a treating health professional, chemist certificate, visit to the clinical coordinator for approval or a statutory declaration. Students who are sent home for illness/urgent matter (e.g. picking a sick child up from school) can ask their clinical supervisor/placement mentor to provide an email to the clinical coordinator to clarify the illness/need to leave.

Students missing more than two days per clinical practicum time must meet with the clinical coordinator to arrange extra time or an IP “In progress” grade may be allocated for the associated clinical practicum.

Your time sheet in your CPAT must clearly state time taken off, and these hours are not to be counted in your practicum hours.

CLINICAL PRACTICUM ALLOCATIONS
At the conclusion of each academic semester students are allocated clinical practicum in accordance with the requirements of the NSP unit you are enrolled in or the stage relevant for Diploma of Nursing students.

Refer to the nursing calendar for the practicum times for your course. It is essential that students ensure they are available to attend practicum during all of this time as clinical placements will be booked accordingly. If students have a specific request perhaps due to workplace requirements for availability a meeting must be arranged with the clinical coordinator and a clinical practicum request sheet completed.

MAKE UP TIME
Students may be required to attend ‘make –up’ practicum in the January/February holidays. This is for special circumstances as approved by the Dean and/or clinical coordinator. Please be aware that this may result in your NSP unit having a grade of ‘In Progress’ on your academic transcript until the practicum is completed.
CLINICAL REQUEST PROCESS

Students have the opportunity to submit preferences for clinical experience and must complete a clinical practicum request form prior to the semester commencing. Whilst every effort will be made to satisfy a student’s request, placements are allocated using the priorities of: availability of placement requested, student learning needs, student special circumstances including family circumstances and usual place of residence and finally student preference. It must also be noted that clinical placement opportunities are at the discretion of clinical placement sites. Students are encouraged to contact the Clinical coordinator if they have concerns re clinical placement opportunities.

Students need to be prepared to travel to clinical placement sites for practicum. There is some provision for reimbursement of travel costs once clinical placement times are complete. The School of Nursing will endeavour to provide students with at least 4 weeks’ notice of where clinical placement will take place, however this is often contingent on the clinical placement site.

Bachelor of Nursing Clinical Practicum Program 2013

<table>
<thead>
<tr>
<th>Semester</th>
<th>Min Hrs</th>
<th>Types of Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Semester 1 – NSP 101</strong> (EN Conversion excluded)</td>
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</table>
| Aged Care         | 200 = 5 weeks | Aged Care Facilities  
                      |                     | General medical wards of regional hospitals |
|                   |         |                                                          |
| **Semester 2 – NSP 102** (EN conversion excluded) |         |                                                          |
| Maternity/Paeds   | 200 = 5 weeks | Maternity or Paediatric Wards  
                      |                     | Schools, child health centre’s  
                      |                     | Child Health Clinics, School Nurse clinics,  
                      |                     | Hospital based Outpatient Services,  
                      |                     | Community health Agencies, Medical Centres |
| Community         |         |                                                          |
|                   |         |                                                          |
| **Semester 3 – NSP 201** |         |                                                          |
| General Medical   | 160 = 5 weeks | General, Medical wards, Prison, Dialysis,  
                      |                     | Remote area clinics |
|                   |         |                                                          |
| **Semester 4 – NSP 202** |         |                                                          |
| Peri-operative    | 240 = 6 weeks | Operating room/Procedure Units  
                      |                     | General Surgical or Paediatric Wards,  
                      |                     | Day Surgical Units, Dialysis, AMS clinics,  
                      |                     | Prison |
| Gen Surgical      |         |                                                          |
|                   |         |                                                          |
| **Semester 5 – NSP 301** |         |                                                          |
| Mental health     | 200 = 5 weeks | Acute Mental health Units, Community Mental Health Agencies,  
                      |                     | General Surgical or Paediatric Wards Day |
| Gen Surgical      |         |                                                          |
### Surgical Units
RFDS, Prison, AMS clinics, Remote area clinics

<table>
<thead>
<tr>
<th>Semester 6 – NSP 302</th>
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</thead>
<tbody>
<tr>
<td>Critical or Acute Care</td>
<td>200 = 5 weeks</td>
</tr>
<tr>
<td>General Medical or Surgical</td>
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</tr>
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<td><strong>Total Hours</strong></td>
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## Diploma of Nursing Clinical Practicum Program 2012

<table>
<thead>
<tr>
<th>Stage</th>
<th>Min Hrs</th>
<th>Types of Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Stage 1 – DCP1</strong></td>
<td></td>
<td>Aged Care Facilities</td>
</tr>
<tr>
<td>Aged Care</td>
<td>80 = 2 weeks</td>
<td></td>
</tr>
</tbody>
</table>

| Stage 2 – DCP2 | | General wards, Paediatric Wards, Schools, child health centres, Child Health Clinic's, School Nurse clinic's, Hospital based Outpatient Services, Community health Agencies, Aged Care, Medical Centre's, Dialysis, Prison |
| Paediatrics, General medical/surgical and Aged Care | 240 = 6 weeks | |

| Stage 2 – DCP2 | | General wards, Paediatric Wards, Schools, child health centres, Child Health Clinic's, School Nurse clinic's, Hospital based Outpatient Services, Community health Agencies, Aged Care, Medical Centre's, Dialysis, Prison, Surgical, Day Surgical Units |
| General Medical and surgical, Mental health, Maternity | 280 = 7 weeks | |

| **Total Hours** | **600** | |

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13
**LEAVE OF ABSENCE**

Please be aware that there is limited time to attend practicum and that if you do not attend you may not pass the unit. This may prevent you from progressing to the following semester. This may result in your course duration being extended.

Students will be allocated a practicum within the dates allocated per the university calendar.

If you are unable to attend your practicum this will be cancelled and you will be required to organise a meeting with the clinical coordinator. If available you will be given another practicum, however this will be dependent on what placements remain available. Please be aware this may be some distance from your place of residence.

**PERTH PRACTICUM**

The opportunity exists for students to attend their clinical practicum within the Perth Metropolitan area. Students are advised to complete the Practicum request form available on Blackboard as early as possible to ensure a request is sent to the Fremantle Clinical Team in a timely manner. Students are required to have their own accommodation; however there are reimbursement opportunities for travel.

**INTERSTATE AND INTERNATIONAL PLACEMENTS**

Students wishing to have a clinical placement outside of Western Australia must organise a meeting with the Clinical Coordinator. There are very limited opportunities for interstate placements. These placements must be organised by the student in conjunction with the Clinical Coordinator. Students are responsible for all transport and accommodation costs. It takes many months to organise a placement and therefore one semester notification is required.

The Nurses Board of Australia allows nursing students to complete an international placement when organised by the University only. Individual placements cannot be accepted. Presently Notre Dame provides opportunities for students in their second year of study to attend Vietnam or Tanzania. Details of these trips are forwarded to students at the commencement of their second year of study by the Clinical Coordinator.
CORE UNITS and PRACTICUM

Students enrolled in a core unit during the semester may be allocated clinical practicum during the last few weeks of your core unit semester. If your practicum is in Broome the expectation is that you will request your roster so you can still attend lectures and tutorials. If your placement is away from Broome then you are expected to attend lectures and tutorials by Collaborate. Students must notify their lecturer/tutor as soon as they know their allocated clinical placement to advise them of your continued study arrangements. The clinical coordinator will liaise with the examination coordinator to ensure an appropriate venue is allocated for your final examination. It is advised that if you are required to give a in-class presentation that you do this in the first 8 weeks, prior to your nursing exams and clinical practicum. Please ensure you discuss this with your lecturer/tutor early in the semester. Do not wait for your clinical placement to be allocated.

Students are able to swap shifts if necessary to attend their core unit lectures and exams. This must be coordinated with your clinical site and your Clinical Supervisor.

CLINICAL SUPERVISOR VS CELO ROLE

The Fremantle Notre Dame Undergraduate Nursing students are supervised by two different supervisor roles, these being the Clinical Supervisor and the CELO. Broome students on placement in Perth will be allocated a Clinical Supervisor or CELO by the Fremantle Clinical Team. All other Broome students on placement will be allocated a University Clinical Supervisor.

CLINICAL SUPERVISORS

Clinical Supervisors hold a contract with the University of Notre Dame.

CELO – Clinical Education Liaison Officer

CELO positions are created between the University of Notre Dame and the facility. CELOs are often members of staff who within their job description include the role of CELO for the University of Notre Dame Undergraduate Nursing Students.

ROLE OF THE CLINICAL SUPERVISOR AND CELO

The role of the Clinical Supervisor and CELO is to:

- Visit/communicate with students
- Assist and complete documentation in the CPAT
- Recommend Pass/Fail/Unsatisfactory progress of Clinical Practicum
STUDENT/FACILITY VISITS

- Every effort is made to visit each student directly once per week
- If direct contact cannot be made then telephone or email contact will be required

CPAT DOCUMENTATION

Clinical Supervisors and CELOs are to ensure that students CPATs are completed as per the University requirements. This includes:

- Ensuring exemplars are of an appropriate standard for the year level/stage of the student
- Providing assistance and feedback where students are struggling to complete the CPAT to an appropriate standard
- Providing assistance to nursing staff seeking assistance with the CPAT
- Completing the front page of the CPAT and formative and summative assessment sections where relevant. Specifically page 19 of the Bachelor CPAT and page 30 of the Diploma CPAT.

REFLECTIVE PAPERS

- All students are required to complete a pre and post practicum reflective papers.
- Please read the relevant Unit outline or Delivery and assessment strategy for more detail.

ROLE OF THE MENTOR

The role of the mentor will depend on the way the organisation places students within the work environment. Students may work the same roster as one allocated staff member or you may work with multiple staff.

WHAT IS MENTORSHIP?

Mentorship can be divided into two types, primary and secondary.

*Primary mentorships* are those that are between a single mentor and mentee and the relationship is enduring and bonded in friendship.

*Secondary mentors* are of a shorter duration, to help the mentee through a particular stage or cycle in their career development, they are less intense and less comprehensive.

It is this secondary level of mentorship that students on their clinical practicum are provided with.
Mentors support Mentees

- The mentor challenges the mentee to develop new skills and realise their own strengths
- Mentors seek to bring out excellence without demanding perfection
- They act as a role model through their own continual professional development and encourage open communication that allows the mentee to discuss issues
- They ensure that the mentee has a real life approach and understanding of how the workplace works

These functions can be described as the ability to “inspire, to support, and to invest” (Bhagia & Tinsley, 2000, p.2).

- An inspirer identifies the mentee’s potential and encourages the mentee to realise these.
- A supporter can provide both practical and emotional support. Practical support is through the teaching of technical skills whilst the emotional support is through reducing stress and providing a sense of belonging to the team. This psychosocial support aids the mentee to enhance their sense of competence, effectiveness and identity as a health professional.
- An investor encourages the mentee to draw on their abilities and places trust in them by providing work opportunities.

It is important that while taking on this role that the mentor does not solve the mentee’s problems and thereby reduce the challenges that they face in order to develop their confidence and career.

The mentor also acts as an advocate for the mentee, when others question their level of experience to complete a task the mentor can provide reassurance of the mentee’s capabilities. This should not imply that the mentor will comprise their own position and responsibilities to the organisation. Instead when and where appropriate they act as a referee of their abilities and performance.
**Mentee attributes (our students)**

Mentee characteristics are alike to that of the mentor, they have a keen commitment to their job and profession, they display loyalty to the organisation and their mentor and they possess personal attributes of honesty, sincerity and empathy. They have a commitment to learn, they believe that a mentor will provide them with a support mechanism to work towards achieving their professional goals and aspirations.

(Bhagia & Tinsley, 2000; Fawcett, 2002; Hill & Boone, 2002; Johnson, 2002; Smith, McAllister & Crawford, 2001; Watson, 1999).

**Completion of the CPAT**

Mentors are asked to contribute to the students CPAT.

Mentors (for only one shift or the entire placement) can sign any element that you have demonstrated through your signed exemplars and practice. This person does not have to be a Registered Nurse it could be an EN, AHW, Dr or PCA dependent on your competencies and placement site. If your Mentor believes that further practice is required this information will be provided to you. Once you have outlined further exemplars and these are sufficient then you will be signed as achieved.

**Page 17 of the Bachelor CPAT and Page 33 of the Diploma CPAT is the final ‘sign off’.** This page must be signed by a Registered Nurse who may or may not have been your mentor. When this page is signed it is stating that the entries in the CPAT are appropriate and that all of the elements have been signed as achieved.
The CPAT is your evidence of attending clinical practicum.

The CPAT requires you to demonstrate how you meet the Australian and Nursing Midwifery Council (ANMC) competencies of the Registered Nurse or Enrolled Nurse (dependent on the course you are enrolled in). The ANMC competencies are the descriptions of a professional RN or EN – regardless of which field they may be practicing in.

Every practicum requires its own CPAT – if you are going to two or more places (e.g. surgical ward then theatre, hospital then dialysis) then you require two CPATs. Staff from one facility / department cannot be expected to ‘sign off’ or complete a CPAT which relates to an area that they have had nothing to do with. If you have concerns about the number of CPATs you need to complete you must seek advice from the clinical coordinator.

BACHELOR CPAT FRONT PAGE

Please ensure that you complete each section using legible handwriting.

<table>
<thead>
<tr>
<th>NSP:</th>
<th>Year:</th>
<th>Semester:</th>
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<td></td>
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</tr>
<tr>
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<tr>
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</tr>
<tr>
<td>Dates of Practicum:</td>
<td>Total Hours of Practicum:</td>
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</tr>
<tr>
<td><strong>UNDA Clinical Supervisor Name</strong></td>
<td><strong>Contact details</strong></td>
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</table>
DIPLOMA CPAT FRONT PAGE

The UNDA Clinical Supervisors name and contact details are entered on the front page by the student on their first contact with the supervisor. This will be your first point of contact for any questions that you may have.

### CLINICAL PERFORMANCE ASSESSMENT TOOL

<table>
<thead>
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<th>Year:</th>
<th>Semester:</th>
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#### STUDENT TO COMPLETE

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#### MENTOR DETAILS

It is essential that this page is completed so verification of signatures can occur. It also allows us to send your mentors an appreciation certificate. Please ensure the person’s name is legible (first and last name) and the facility name is clear.

Please ensure each mentor’s name is spelt correctly for their certificate of thanks.

![Certificate of Thanks](image)
RESPONSIBILITIES:

The Student must:

- Complete all allocated hours of clinical practicum. A student who is absent from clinical placement will need to make up the hours. Students can negotiate to work extra shifts with the clinical supervisor’s authority. Students should not work more than seven consecutive shifts, and must have a nine-hour break between shifts. Students asking to work more than 40 hrs per week must have approval from clinical coordinator. **Students cannot make shifts up outside of their allocated practicum dates.**

- Be available for all shifts. It is anticipated that the student will be rostered on the same shifts as their mentor or as allocated by the facility. **Students can only change shifts for exceptional circumstances; the clinical supervisor/clinical coordinator must approve this.**

- Notify the university clinical supervisor/clinical coordinator of their roster two weeks in advance. If you do not inform your supervisor/CELO of your roster you may not receive a visit.

- Contact their clinical supervisor and the practice facility **at the earliest opportunity prior** to the commencement of the next allocated shift to inform them of an absenteeism related to illness. Student must ensure they have informed their practicum site of absence prior to the shift commencing and their university clinical supervisor as early as convenient (and at least leave a recorded message if the telephone is not answered).

- Notify their clinical supervisor and the practice facility **at the earliest opportunity prior** to the commencement of next allocated shift.

- Adjust their timesheet to reflect absenteeism/sick leave (*False entries of hours can result in a Fail of clinical practicum. This will be determined by the clinical coordinator.*).

- Not count any absenteeism hours. If you do not attend practicum you do not accrue hours.

- Have available as a resource for mentors and other staff, copies of the Unit outline, ANMC guidelines for Registered Nurse/Enrolled Nurse, CPAT and ‘School of Nursing, Nursing Practice Orientation Manual for Mentors’ booklet at all times while on practicum.
Formative and Summative Assessments (Bachelor of Nursing)
At the conclusion of each Domain there is space provided for the Mentor and/or UNDA Clinical Supervisor to add further documentation to the students CPAT.

- **The UNDA Clinical Supervisor is required to:** document an overall comment on the student’s performance whilst on clinical practicum, sign and date. They are to contact the School of Nursing if an ‘unsatisfactory’ outcome is likely, or due to time away from practicum the mentor feels that they are unable to complete the CPAT.
- **The student is required to:** sign and date.
- **Bachelor students:** these provide very good examples to include in your job applications at the end of your course
- **Overall summative report:** Completed by the mentor Page 17 of CPAT
- **Final assessment:** Completed by the clinical coordinator Page 1 of CPAT

Formative Assessment (Diploma of Nursing)
(pg30-32 of the Diploma CPAT)This assessment should occur at the end of week 1. This should involve the student and their mentor/UNDA clinical supervisor discussing and determining any areas of knowledge, skill or practice that requires further development. This is not a learning contract or an intervention report; instead it’s a guide for the student to follow for the remaining practicum time to continue to develop their skills. If the mentor or UNDA clinical supervisor believes that the student is at risk of receiving a ‘unsatisfactory’ for an element or an employability skill an intervention report ( page 34-35 of the Diploma CPAT) must be commenced. This allows the student to set objectives and strategies to meet the criteria for a satisfactory result.

Summative Assessment (Diploma of Nursing)
(Evaluation summary pg33 of the CPAT)This is completed at the end of the placement. The mentor/UNDA clinical supervisor documents an overall comment related to the domain and practice. This section must be completed if the student is allocated a ‘unsatisfactory’ for an element and employability skill.

Exemplars
Students are required under each employability skill to enter exemplars of their practice to demonstrate that they meet the ANMC competencies of the Enrolled Nurse.

- A description of an event / action / nursing intervention in which the student participated. This can be signed by any member of staff to confirm their participation (ENs, RNs, AHWs, RMs, PCAs, Carers or Drs)
- It is to include reflections on practice and how this demonstrates the ANMC competency elements and employability skills.
- Examples of practice may meet multiple competency elements and employability skills. Students are to write the elements numbers next to each exemplar and in the page number in the matrix at the front of the CPAT.
- Each element should be linked to more than one exemplar to demonstrate competence.
• Students are to demonstrate critical thinking, not just write out a task list of what they did.

If you are not sure if the standard of exemplars is appropriate for the students Stage please do not hesitate to check this with the student’s UNDA clinical supervisor or a member of the School of Nursing team.

INTERVENTION REPORT (page 34-35 of the Diploma CPAT and page 36 of the BN CPAT)
The School of Nursing utilises Intervention reports (learning Contacts) for Diploma nurses (and Bachelor of Nursing students) that are struggling to practice at a satisfactory level. The intervention should be enacted when a student is at risk of being deemed unsatisfactory in their clinical practicum placement and requires a timeline of objectives and strategies to provide them with the opportunity to focus on the identified areas and complete the practicum successfully.

The area of concern may be clinical, behavioural or professional practice or a failure to adhere to any of the University and School of Nursing Policies.

If you are concerned about a student’s progress please contact the student’s UNDA Clinical Supervisor or a member of the School of Nursing Team so that we might assist you in determining if a learning contract is required.

It is the role of the UNDA Clinical Supervisor or member of the School of Nursing to write the report.

It is important that the student be notified as early as possible that an intervention report is necessary so that they have the opportunity to correct the concerns and pass the clinical practicum. Please remember students often feel threatened and upset when this is discussed. It is important that it is promoted as a tool to assist them with their individual learning needs to assist them to obtain a satisfactory result.

The intervention report will clearly state the concerns and how these will be addressed. This should include both the expectations and how these will be demonstrated and assessed as achieved. The student and the supervisor should discuss strategies that both agree will support the student best with their style of learning.

The report should include:
1. The concerns in an objective manner
2. What the expectations for this level of student are
3. The desired outcomes expected of the student
4. How will this be learnt (journal articles, video's, policy/procedure manuals, observation of skill/task, simulated training, case studies, encouraged to ask more questions, reflection)
5. How will this be assessed (observation, case study, staff feedback, checklist)

The School of Nursing utilises Learning Contracts for nurses that are struggling to practice at a satisfactory level. The learning contract will be enacted when a student is at risk of failing or not
achieving a satisfactory outcome on their clinical practicum placement. The contract supplies a timeline of objectives and strategies to provide an opportunity to focus on the identified areas and to complete the practicum successfully.

The area of concern may be clinical, behavioural or professional practice or a failure to adhere to any of the University and School of Nursing Polices.

The learning contract will clearly state any concerns and how these will be addressed. This will include both the expectations and how these will be demonstrated and assessed as achieved. Both you and the supervisor should discuss strategies that you both agree will support you, with your style of learning.

Address:

6. What are the concerns?

7. What are the expectations for your level/stage of student?

8. What needs to be learnt to achieve these expectations.

9. How will this be learnt (journal articles, video’s, policy/procedure manuals, observation of skill/task, simulated training, case studies, encouraged to ask more questions, reflection).

10. How will this be assessed (observation, case study, staff feedback, checklist).

If you are unsure of how to review your current level of practice complete a SWOT analysis together, i.e.:

✓ **Strengths** (in current practice)

✓ **Weaknesses** (as outlined in the learning contract)

✓ **Opportunities** (to learn and improve)

✓ **Threats** (what concerns/scared the student that they won’t or don’t know how to achieve)

Both parties are required to sign the contract and send a copy to the university (by post or fax). Please ensure that you have a copy to follow. It is important that regular meetings are organised to ensure that the contract is facilitating your needs. Any adjustments needed, can then be documented.

Your mentor or the staff development nurse may also need to be involved in the process.

When you achieve the objectives outlined in the learning contract this can be signed by both parties and forwarded to the School of Nursing.

Student’s who fail or do not show a satisfactory outcome do not continue the practicum placement once a decision to allocate a grade of fail/not satisfactory. The clinical team will organise with you to attend the university to determine the next course of action.

Students failing practicum may:
• Be allocated to a similar specialty in another hospital to give you an opportunity to meet the requirements of the CPAT and contract in a new environment.

• Discontinue all practicum and be required to re-enrol for the next semester.

• Be terminated from the Bachelor of Nursing program/Diploma of Nursing program.

Both parties are required to sign the report and send a copy to the university. It is important that the UNDA Clinical Supervisor organises regular meetings to ensure that the report is facilitating the needs of the student and that the student is adhering to the requirements. Any adjustments needed to continue to support the student can then be documented.

As the students mentor you also need to be involved in the process. Please ensure that you have contributed to the intervention report so that you are able to assist the student to achieve the desired outcomes.

When the student achieves the objectives outlined in the intervention report this can be signed by the student and the UNDA Clinical Supervisor and forwarded to the School of Nursing.

If you are concerned that the student is unable to fulfil the requirements and will consequently be deemed unsatisfactory, please ensure that the UNDA Clinical Supervisor is notified. For the final meeting it is important that the UNDA clinical supervisor is present to impose the ‘unsatisfactory’ for practicum.

The School of Nursing will organise with the student to attend the university to determine the next course of action.

Students deemed unsatisfactory on practicum may:

• be allocated to a similar specialty in another hospital to give them an opportunity to meet the requirements of the CPAT and intervention report in a different environment

• discontinue all practicum and be required to re-enrol.

• not to able to continue with the diploma of nursing program

Immediate withdrawal from the clinical setting

Any student that acts in an unsafe manner is to be reported to the School of Nursing immediately and be withdrawn from the clinical practicum environment. Further discussion at the university with the Associate Dean will determine the next appropriate course of action.

These acts may include:

• Inadequate knowledge base to practice safely – this includes near miss events

• Unprofessional practice – not adhering to hospital policies, legislation or the ANMC competencies and code of conduct and ethics

• Inappropriate behaviour – including abandonment of patients by leaving the ward area, inappropriate use of language or aggressive behaviour
COMMON QUESTIONS AND THEIR ANSWERS

- The student is passing clinically however there is communication or behavioural issues, what should I do?

  Call the UNDA Clinical Supervisor and explain the situation, they can then provide a plan to put into place. It may involve a member of the School of Nursing visiting the student or asking the UNDA Clinical Supervisor to implement a plan. If the behaviour relates to inappropriate language, reoccurring lateness for work or untidiness in appearance the student should be placed on intervention report.

- The student has had a large amount of sick leave, how much of the practicum must they complete for it to be ok to pass?

  There is no set time that students must attend to pass, students can be placed for as little as a week and have their CPAT completed. In this instance we must look at the type of clinical area, and has the student been able to sign off their elements in this time. If the CPAT has been completed the practicum can be signed as ‘unsatisfactory’ and the student will be listed for make-up practicum. If the student has not been able to demonstrate satisfactory practice then they will be called to the University for a meeting. For the next block of practicum they will attend the practicum area that they did not complete and then the current practicum placement area for that semester. January is also make-up practicum time, so students may need to attend practicum during their holiday period.

- When should we call a member of the School of Nursing?

  ✓ If the student is having regular sick time
  ✓ The student is unable to attend practicum due to a family/personal situation
  ✓ The student is potentially or actually injured or harmed either physically or psychologically, or exposed to an pathogen requiring infection control investigations
  ✓ The student witnesses or is involved in an aggressive incident
  ✓ The student witnesses or is involved in a patient care episode requiring staff debriefing
  ✓ The staff express concerns regarding the student’s clinical performance
  ✓ The staff express concerns regarding the student’s communication/behaviour
  ✓ The student is involved in an error of care or an averted potential error of care
Submitting CPATs

- If you have more than one placement you submit all of your documentation at the end.
- We require all of your CPAT’s and your two reflective papers with a completed marking rubric.
- **Please supply photocopies as per page 4 of your CPAT.**
- All of these items are to be presented to the School of Nursing in a sealed envelope and either posted (registered mail) or hand delivered. The Senior Administration Officer will check to make sure all items are present and complete before handing this to the university clinical supervisor/clinical coordinator. If it is not complete you will be contacted to ensure all items are handed in together.
- If posting, post to Uweinna Albert, The University of Notre Dame, Broome Campus, PO Box 2287 Broome WA 6725
- You must attach an assignment coversheet to the envelope if hand delivered. If posted please ensure this is in the envelope as well.
- If posting students must ensure they keep a photocopy of their CPAT document. The School of Nursing will not take any responsibility for CPATs lost in the mail. You may be wise to send the package by receipted delivery.
- **Remember to ensure your mentor names are clear on page 8.**

REFLECTIVE PAPERS

All students on clinical practicum must complete a pre and post reflective paper. No matter how many different placements you may have during your practicum block you are only required to complete one pre and one post. You should discuss all of your practicum placement sites in each of these reflective papers. Your objectives that you have documented in your CPAT are used here again to guide you through your paper.

WHAT IS A REFLECTIVE PAPER?

A reflective paper is your opportunity to outline for your supervisor/CELO your personal insight into your practicum. It gives you the opportunity to document how you feel about clinical practicum. The reader should be able to understand your perceptions about clinical practicum. It should highlight your feelings, your experiences, and your personal journey of growth. It outlines how different experiences shaped your practicum and the impact of these on you as a person and a health professional.

Your reflective paper should be based on:

- **Affective:** emotions, behaviour aimed at producing a desired outcome
- **Behavioural:** our actions or inactions in response to the environment that we are in
- **Cognitive:** logically thoughts and processes
What does this all mean?

For your pre practicum paper

A  describe feelings about going to practicum
B  describe things you expect to do during practicum
C  describe things you expect to learn on practicum

For your post practicum paper

A  describe feelings about the practicum now that it is over
B  describe what you did during practicum (was this what you expected?)
C  describe what you learnt during practicum (was this what you expected?)

WHAT TO DO

The Pre practicum paper is to be completed before practicum and handed in to the School of Nursing (as per your unit outline). You must also keep a copy to show to your clinical supervisor/CELO on your first meeting with them.

The Post practicum paper is to be completed before the end of the last week of practicum. You should be ready to show this to your supervisor / CELO before their final visit. This paper must be handed in with your CPAT.

REQUIREMENTS

• Approximately 500 – 1000 words in length (please add in word count on front page).
• Professionally presented i.e. not handwritten.
• Subheadings for each of your Domains of Practice Objectives.
• Please remember there are only two papers required per semester. If you are going to more than one placement you only require one pre and one post practicum paper. These papers must address all the practicum components.
• The reflective papers with attached completed assessment rubrics will be handed in to the School of Nursing by students with their CPATs within five days of practicum completion. The assessment result will be recorded.
• It is the student’s responsibility to ensure that you hand in a marking rubric with your reflective paper to ensure that it is marked.
**PRE PRACTICUM REFLECTIVE PAPER EXAMPLE**

**ABC**

My practicum is fast approaching and I am feeling *(Affective)*....

During these two clinical placements I hope to be able to practice/assist/support *(Behavioural)*...

For these clinical placements I hope I will be able to identify/recognise *(Cognitive)*...

**Professional Practice**

Professional Practice involves understanding and practicing within the legal, professional and ethical framework of nursing care. My personal goal for my community health placement for this domain is that by the end of the first week I will be able to work with patients from different cultures and be sensitive to their needs. This will be demonstrated by being able to discuss the different cultural needs in the community. For my paediatric placement I hope that by the end of the second week I will be able to understand the legal implications when caring for a young child in the hospital environment. This will be demonstrated by adhering to the hospital policies and protocols.

**Critical Thinking and Analysis**

Critical thinking and analysis is about practising within an evidenced based framework and participating in ongoing professional development of self and others. For this domain my goal is....

**Provision and Coordination of Care**

This domain of provision and coordination of care entails being able to conduct a comprehensive and systematic nursing assessment combined with planning and providing holistic nursing care and the evaluation of expected health outcomes. For this practicum I hope to....

**Collaborative and Therapeutic Practice**

Collaborative and therapeutic practice involves establishing and maintaining therapeutic relationships with individuals and within the interdisciplinary health team. My objective for this practicum....
Clinical practicum Reflective Papers

Pre practicum assessment rubric
Student name: ________________________________
Student ID number: _________________________
Practicum location(s) / specialty(s): __________
Clinical practicum unit code ___________________
Clinical supervisor: ___________________________

Pre prac Reflective paper

<table>
<thead>
<tr>
<th>objectives</th>
<th>Fail</th>
<th>Pass</th>
<th>1st attempt result</th>
<th>2nd attempt result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inclusion of ABC reflection process in paper</td>
<td>Does not contain:</td>
<td>Contains:</td>
<td></td>
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<tr>
<td></td>
<td>- Affective</td>
<td>- Affective</td>
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<td></td>
<td>- Behavioural</td>
<td>- Behavioural</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>- Cognitive reflections</td>
<td>- Cognitive reflections</td>
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</table>

| Inclusion of Pre prac objectives                    | • Less than four objectives                                         | • Four objectives                                                   |                    |                    |
|                                                      |   • Not related to the four ANMAC competency domains               |   • One objective per ANMAC competency domain                       |                    |                    |
|                                                      |   • Not: SMART (specific, measurable, achievable, realistic, timely)|   • SMART (specific, measurable, achievable, realistic, timely)      |                    |                    |

| Strategies the student will utilize to meet their learning objectives for the practicums | Does not clearly articulate how the learning objectives will be demonstrated | Clearly articulates how the learning objectives will be demonstrated |                    |                    |
|                                                                                       | • Poor Grammar                                                      | • Appropriate Grammar                                               |                    |                    |
|                                                                                       | • Less than 500 words                                               | • 500-1000 words                                                   |                    |                    |
|                                                                                       | • Inappropriate presentation                                        | • Appropriate presentation                                           |                    |                    |

Satisfactory/Not satisfactory  (Clinical supervisor to circle)
Clinical supervisor signature: ________________ Date: __________

Affective: emotions, behaviour aimed at producing a desired outcome
Behavioural: our actions or inactions in response to the environment that we are in
Cognitive: logically thoughts and processes

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<th></th>
<th>describe feelings about going to prac</th>
<th>describe feelings about the prac(s) now that it is over</th>
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</thead>
<tbody>
<tr>
<td>A</td>
<td>describe things you expect to do during prac</td>
<td>describe what you did during prac (was this what you expected?)</td>
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<tr>
<td>B</td>
<td>describe things you expect to learn on prac</td>
<td>describe what you learnt during prac (was this what you expected?)</td>
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</table>

30
Clinical practicum Reflective Papers

Post practicum assessment rubric

Student name: ____________________________________________________________
Student ID number: ______________________________________________________
Practicum location(s) / specialty(s): __________________________________________
Clinical practicum unit code: _______________________________________________
Clinical supervisor: _______________________________________________________

Post prac Reflective paper

<table>
<thead>
<tr>
<th>objectives</th>
<th>1st attempt result</th>
<th>2nd attempt result</th>
</tr>
</thead>
</table>
| Inclusion of ABC reflection process in paper | Does not contain:  
  - Affective
  - Behavioural
  - Cognitive reflections | Contains:  
  - Affective
  - Behavioural
  - Cognitive reflections |
| Self appraisal of how learning objectives were achieved during the practicum | Does not clearly articulate how learning objectives were met / or challenges to meeting objectives | Clearly articulates how learning objectives were met / or challenges to meeting objectives |
| Grammatically correct, 500-1000 word limit with appropriate subheadings for domains of practice | - Poor Grammar  
  - Less than 500 words  
  - Inappropriate presentation | - Appropriate Grammar  
  - 500 -1000 words  
  - Appropriate presentation |

Satisfactory / Not satisfactory (Clinical supervisor to circle)

Clinical supervisor signature: _____________________________________________

Date: ____________________________

Affective: emotions, behaviour aimed at producing a desired outcome
Behavioural: our actions or inactions in response to the environment that we are in
Cognitive: logically thoughts and processes

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<td>describe feelings about going to prac</td>
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<tr>
<td>B</td>
<td>describe things you expect to do during prac</td>
<td>describe what you did during prac (was this what you expected?)</td>
</tr>
<tr>
<td>C</td>
<td>describe things you expect to learn on prac</td>
<td>describe what you learnt during prac (was this what you expected?)</td>
</tr>
</tbody>
</table>
**STARTING PRACTICUM, WHAT NOW?**

**MAKE SURE YOU HAVE**
- Your placement allocation and start date.
- Contacted the facility, to confirm ward/unit, start date, roster and meeting point.
- Your uniform details—mental health and some community placements require neat civilian clothing—-you will be advised of this by your clinical placement site.
- Details of your accommodation. Where it is located. Where do you pick up the keys?
- A mobile phone that works where you are going, is charged and has sufficient credit.
- Details as to whether you are picked up from the airport of bus or whether you have to find your own transport.
- Does the School of Nursing have your most current Mobile telephone number?

**WEEK PRIOR**
- If not done so already write your objectives in your CPAT.
- Contact the placement site for you roster

**DAY ONE**
Depending on the facility you are attending there may be a number of students commencing or just yourself. Larger organisations will ask you to meet at a central point on the Monday morning for an orientation program. Other smaller sites may direct you to your ward/unit where the staff will provide an orientation during the course of your shift.

Please ensure that you arrive early as locating specific wards and rooms can be difficult in an unknown place, particularly if you are placed in the Metropolitan area.

**ON THE WARD/UNIT**
It is important that you arrive to commence your shifts at least 10 minutes early so that you can find a place to put your bag away, find a handover sheet (if required), and ready yourself for the start of the day. Many wards/units will commence with a patient handover, these commence at the start of the shift, not 10 minutes later, so it is important that you are ready and waiting. Ensure that you introduce yourself to the shift coordinator. You may find that you work all of your shifts with the same mentor, or are allocated each day by the shift coordinator to the most appropriate person.
**Handover** – this may be taped, or nurses may verbally handover the patients status and care.

Different areas and health care facilities you will find have slightly different approaches to delivering handover. Use these differences as an opportunity to learn about the models.

When discussing a patient with another team member, medical practitioner or allied health think about it as an ISOBAR tool:

- **INDENTIFY**  Introduce yourself and your patient
- **SITUATION**  Briefly state the problem/s
- **OBSERVATIONS**  Recent vital signs and assessment
- **BACKGROUND**  Pertinent information related to the patient
- **AGREED PLAN**  What needs to happen? Assessment of the situation
- **READ BACK**  Clarify and check for shared understanding. Who is responsible for what and by when.

(Porteous, Stewart-Wynne, Connolly & Crommelin, 2009).

**Patient Allocation** – Dependent on the type of placement you are on, different models of patient allocation can be expected. Within general ward settings either ‘Team Nursing’ or ‘Patient Allocation’ are the most common utilised. Team nursing involves a group of nurses working together with an allocated group of patients to deliver care, whilst patient allocation involves one nurse with often 4-6 patients to care for.

**Start/Finish and Meal Breaks** – Please ensure that you are courteous to those that you work with. By arriving to your shift 10 minutes early it assists the team to commence handover on time. By starting late, other staff are required to work back to care for patients, or may be delayed in attending their meal breaks. Finishing early, whilst you may believe it is fair considering you are not getting paid, it can be a sign of disrespect for the work, and the effort staff have made to provide you with a learning environment. Please also remember this when attending meal breaks.

**Active Learning** – as a student it is important that you view all of your time on practicum as an opportunity to learn. Completing a task once does not equal competence or expertise; therefore it is essential that every opportunity be accepted as consolidation of your knowledge and skill base. Learning through practice provides an opportunity for you to link your university theory. Remember not every situation is the same, and every time you repeat the same skill/task it is a different context that requires critical thinking of application of the skill to suit the current situation. A BP is never a simple BP. Remember to reflect on practice.
On placements that are quiet or very specialised you may find yourself feeling that your learning opportunities are limited. This is never the case. There is always a lot to learn, look at communication skills, documentation, the health care/team structure, multidisciplinary communication, patient planning, etc.

Refer to your Nursing Practice required text: 
*The Clinical Placement by Tracey Levett-Jones and Sharon Bourgeois for further information, ideas, tips and tactics for learning and clinical practicum.*

**Things you need to make sure you are aware of are -**

- Location of Health Care Agency Policy and Procedures Manuals.
- Intranet resources, what is available, can you access patient results & procedure manuals.
- Emergency protocols - fire, evacuations procedures, resuscitation, personnel threat, external emergency.
- Security ID protocol to access clinical domains and computer; and privacy & confidentiality issues.
# ORIENTATION SEEK AND FIND

If you are not provided with an orientation booklet it is useful to undertake the following seek and find checklist to ensure you are aware of your work area.

<table>
<thead>
<tr>
<th>Who is the:</th>
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<tbody>
<tr>
<td>- Clinical Nurse Manager</td>
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<tr>
<td>- Staff Development Nurse</td>
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<tr>
<td>- Mentor</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Ward Phone Number</th>
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<table>
<thead>
<tr>
<th>Paging System – number to call</th>
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<table>
<thead>
<tr>
<th>What to say when you answer the phone</th>
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<table>
<thead>
<tr>
<th>How do you transfer a call</th>
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<table>
<thead>
<tr>
<th>Emergency Number</th>
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<table>
<thead>
<tr>
<th>Locate hospital phone numbers (internal line directory)</th>
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<table>
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<tr>
<th>Shift times AM/PM/ND</th>
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<table>
<thead>
<tr>
<th>Where is handover held/handover sheets</th>
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<table>
<thead>
<tr>
<th>Where are patient notes located?</th>
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<table>
<thead>
<tr>
<th>Staff toilets/lockers (ID code)</th>
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<table>
<thead>
<tr>
<th>Location of policy and procedures</th>
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<table>
<thead>
<tr>
<th>Where is the emergency equipment located</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Buzzer/number to call</td>
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<tr>
<td>- Fire (blanket, hose)</td>
</tr>
<tr>
<td>- Resus trolley</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Identify equipment in patients rooms</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Oxygen/Suction/Gaedal airway</td>
</tr>
<tr>
<td>- Bed controls/Buzzer</td>
</tr>
<tr>
<td>- TV/radio</td>
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<table>
<thead>
<tr>
<th>Identify equipment in the Dirty/pan room</th>
</tr>
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<tbody>
<tr>
<td>- How to use pan flusher</td>
</tr>
<tr>
<td>- Urinalysis tests</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Identify equipment in the treatment room</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Pumps</td>
</tr>
<tr>
<td>- Dressings/IV trolley</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Identify equipment in the kitchen</th>
</tr>
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<tbody>
<tr>
<td>- Water jugs/ice</td>
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<tr>
<td>- Meals</td>
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<table>
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<tr>
<th>Identify equipment in the store room</th>
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</table>
LAST WEEK OF PRAC

- Submit your final reflective paper to your clinical supervisor with an attached marking matrix.
- Ensure your CPAT is full of exemplars, elements signed, mentor has signed and your clinical supervisor has signed.

ON COMPLETION OF PRAC

- Within five working days submit your CPAT, reflective papers with attached marking matrix and photocopies to the Senior Administration Officer. (Post to PO Box 2287 Broome NOT THE STREET ADDRESS)
- Ensure you have kept your receipts, completed the UNDA practicum reimbursement paperwork (available on Blackboard)

HELP, WHO TO TALK TO?

Depending on what it is that you need help with will determine who you should talk to.

Clinical

- Your first point of contact is the nursing staff that you are working with. If you are unsure of how to complete a task, assess a patient, complete documentation, communicate/liaise with an individual discuss this with your RN about developing objectives/strategies.
- If you have concerns regarding your placement please contact your clinical supervisor or a member of the School of Nursing team.

Clinical Incident

If you have been involved or witnessed patient care that you feel you would like to discuss with a member of staff please do not hesitate to contact a member of the School of Nursing. It is important that as members of the health profession that we develop strategies to deal with death, dying and other clinical events that impact on our own perceptions of the health care system, the world we live in and our own sense of being. Many work places will provide debrief sessions for staff after a traumatic incident, however many students feel more comfortable talking to a member of the university staff one-on-one, so please remember our door is always open.

Personal

Depending on the privacy/personal nature of concern you may wish to discuss this with the RN, your clinical supervisor/CELO or a member of the School of Nursing. It is important that if personal issues are
impacting on your ability to function and think clearly whilst on practicum that you discuss this so that we can put a plan in place to support you.

**Bullying**

If you feel at any stage that communication between yourself and a member of staff or any individual is of a bullying nature please notify a member of the School of Nursing.

Notre Dame also provides a counselling service for all students. Please feel free to contact Matthew Hill 91920669 Matthew.Hill@nd.edu.au on the Broome Campus or the Student Life Office on 9433 0580 on the Fremantle Campus
CLINICAL PRACTICUM POLICIES AND GUIDELINES

There are a number of policies and guidelines within the University of Notre Dame and other organisations that impact on students professional practice and behaviour in the clinical environment. The following documents are to be used by students and staff in determining the appropriate practice and behaviour of students. These include, but are not limited to:

Australian Health Practitioner Regulation Agency (AHPRA)
The role of AHPRA is to:

- support the National Boards in their primary role of protecting the public
- manage the registration processes for health practitioners and students around Australia
- has offices in each State and Territory where the public can make notifications about a registered health practitioner or student
- on behalf of the Boards, manages investigations into the professional conduct, performance or health of registered health practitioners, except in NSW where this is undertaken by the Health Professional Councils Authority and the Health Care Complaints Commission
- on behalf of the National Boards, publishes national registers of practitioners so important information about the registration of individual health practitioners is available to the public
- works with the Health Complaints Commissions in each State and Territory to make sure the appropriate organisation investigates community concerns about individual, registered health practitioners
- supports the Boards in the development of registration standards, and codes and guidelines
- provides advice to Ministerial Council about the administration of the national registration and accreditation scheme


For further information visit: http://www.ahpra.gov.au/

Nurses and Midwives Board of Australia
- National Competency Standards for the Registered Nurse
- Code of Professional Conduct for Nurses
- Code of Ethics for Nurses
- Decision Making Framework


The University of Notre Dame, School of Nursing and Midwifery (Broome campus)
- Policy: Nursing Clinical Practicum
- Policy: Confidentiality
- Policy: Immunisation
- Policy: Medication Administration
- Policy: Misconduct in Clinical Practice
- Interstate and Overseas Clinical Practicum
- Accident and Incident reporting Process, Flowchart
- Practicum request form

These documents are attached
**POLICY: SCOPE OF NURSING PRACTICE FOR STUDENTS**

All Notre Dame nursing students should be guided by the principles of Nurses and Midwives Board of Australia, when considering implementing nursing interventions.

Notre Dame nursing students should only undertake nursing activities that they are educationally prepared for; competent to undertake; legally entitled to perform and which they are willing to be accountable.
IT IS ESSENTIAL THAT YOU UNDERSTAND THE SCOPE OF NURSING PRACTICE BEFORE ATTENDING CLINICAL PRACTICUM


Please also refer to the unit objectives for each practicum and skill list for further information
POLICY: Nursing Clinical Practicum

Clinical practicum forms a fundamental part of the University of Notre Dame (UNDA) nursing programs. Students are required to sign the student declaration acknowledging that they have read and understood the following policy.

Clinical Placement Scheduling
The timing of a student's practicum during allocated timetabled practicum period is dependent on the timing and length of placements allocated by agencies to the School of Nursing and Midwifery. This may result in students having their practicum split between different time periods. **Students must not book holidays or other commitments** until after the final practicum allocation list is released. **Students may be required to travel considerable distances to** a clinical practice agency and are responsible for organising their own transport.

Clinical Placement Priorities
Clinical practicum will be mostly undertaken in rural, regional or remote areas. Most of these sites provide accommodation for students free of charge however students will incur costs for living and transport. There is also provision for students to attend clinical placement in Metropolitan areas and students who have done this in the past have found this a rich and rewarding experience. Students attending clinical placements in metropolitan areas will be responsible for their own accommodation arrangements and expenses.

Students are allocated to clinical placements based on the following priorities.

- Student clinical/academic learning needs
- Student personal needs (e.g. transport limitations, childcare problems etc…)
- Student preference

While every endeavour will be made to accommodate student preferences this may not always be possible. Students may be required to travel considerable distances to a clinical practice agency and are responsible for organising their own transport. There is some opportunity for travel reimbursement costs at the completion of placements and further information regarding reimbursement will be provided upon allocation of clinical placements.

Students will be informed of the process for clinical placements during the course of first semester.

Dress requirements
Students will be expected to wear their uniform in most health agencies, the exception may be on Community Practicum. The uniform consists of specific top with the UNDA logo and navy blue trousers or long shorts and black closed toe shoes. Uniforms and name badges can be purchased locally and information will be provided to students during orientation week.

Students who do not have the full uniform will not be able to attend practicum.
While on practicum students must present themselves in a neat and professional manner, which includes hair tied back, clean nails and minimal jewellery.

**Employment while on practicum**

Nursing students will be required to work rostered and rotating shifts while on practicum. This means that they must be available to work any shift (including night shift) across the seven days of the week. The agency with whom they are placed for the practicum will roster the student to work the same shifts as their mentor or to shifts where there is the most support and supervision for the student. Students must give their clinical placement requirements priority over part-time and/or casual employment. Students may continue to work part-time or casually, as long as it does not impact on their rostered clinical placement shifts.

**Clinical Practicum Attendance**

Bachelor of nursing students are required to complete a minimum of 1240 hours of clinical hours during their course. Bachelor of Nursing (Articulation from EN to BN) are required to do 840 hours. Diploma of nursing students are required to complete a minimum of 600 hours during their course. These hours are divided between semesters/stages with each student completing 160-240 hrs per practicum depending on the particular unit of study.

A student who is absent from clinical placement will need to make up the hours.

A medical certificate is required if the student is absent for more than one shift.

**Vaccinations**

All nursing students are required to be vaccinated against key vaccine preventable diseases (VPDs) before attending clinical practicum. The current schedule of requirements is based on Department of Health immunisation requirements and will be provided by SoNM (School of Nursing and Midwifery) Clinical Placement Administration. Students who do not submit the necessary documentation will not be able to attend clinical practicum.

**Health Record**

On entry to the program all students must complete a health status questionnaire. Students may be required to provide a medical certificate deeming them physically and mentally fit to complete clinical practicum during their course of study.

**Criminal Clearance**

All nursing students are required to complete a Working with Children, a National Police Screening Certificate and a Department of Health Criminal clearance before attending practicum. Details of the application process will be provided by School of Nursing Administration.

**Other Requirements**

All students must have a Current Senior First Certificate for the duration of the program; this requires annual recertification of the Basic life support component. Students must also maintain the Manual Handling certificate of completion and Hand Hygiene certificate. Evidence of completion must be forwarded to the Clinical Placements Team at the commencement of each academic year. Students must also sign a confidentiality statement prior to attending practicum.
Student Signature and Declaration

School of Nursing, Broome campus POLICY: Nursing Clinical Practicum

“I declare that I have read and will abide by the above policy during my clinical placements.”

Student Name: ____________________________

Signed:________________________________ Date:________________________
SCHOOL OF NURSING

CONFIDENTIALITY STATEMENT

I, ________________________________, hereby agree to maintain complete confidentiality whilst I am at the University of Notre Dame Australia.

This means I am aware that it is inappropriate to discuss any details of specific cases to which I am exposed during my research, amongst people outside of the UNDA community.

It is, however, appropriate to discuss specific cases with my colleagues, for example, university staff, and nursing students providing patient anonymity is maintained as appropriate.

When writing reports for university research requirements I will use fictitious names.

Should I want to discuss my workplace experiences outside of the UNDA community, I am aware I can do so provided I speak in broad general terms and refrain from stating identifying names and not use identifying characteristics.

At no time will I discuss clinical practicum on social networking sites, as these sites cannot guarantee confidentiality.

Signed: ________________________________

Print Name: ________________________________

Date: ________________________________
SCHOOL OF NURSING POLICY: IMMUNISATION

PURPOSE

The purpose of this document is to describe the immunisation requirements for nursing students at The University of Notre Dame, Australia (Broome).

DEFINITIONS

**Nursing students** refers to all students enrolled in the Bachelor of Nursing, Bachelor of Nursing Enrolled Nurse Conversion, Diploma of Nursing or Certificate III Health Services Assistant at Notre Dame.

**Clinical practicum** refers to any place where health care or health services are provided to patients/clients.

**Blood-borne Virus (BBV)** refers to Human Immunodeficiency Virus (HIV), Hepatitis B virus (HBV), Hepatitis C virus (HCV) and other new or emerging viruses that are transmissible by blood or body fluids.

INTRODUCTION

Nursing students may be exposed to vaccine-preventable diseases (VPDs) during their clinical practicum. This exposure may lead to infection and transmission of VPDs to other non-immune patients, staff or nursing students. Infection control precautions with the addition of immunisations help to prevent the transmission of VPDs between patients, staff and nursing students. It is a unit pre-requisite that all nursing students present their current immunisation status to the School of Nursing prior to attending their first clinical practicum. Students must be fully immunised against key VPDs as per Notre Dame’s immunisation requirements and these are based on the Department of Health Operational Directive (OD 0049/07).
Responsibility of Nursing Students

Nursing students must submit evidence of immunisation status (by a date as specified by Notre Dame) prior to attending their first clinical practicum. Failure to adhere to this may result in the student not being able to attend practicum and a failure to complete (FN) will be recorded for the student.

Nursing students must advise Notre Dame if they remain non-immune through failure to seroconvert, have medical contraindications to vaccines or conscientiously object.

It is the responsibility of the Nursing Student who receives a positive blood result for a BBV to advise the Clinical Coordinator. The student must obtain counselling and ongoing clinical advice regarding their potential infectious state.

Responsibility of Notre Dame

Immunisation requirements will be sent to the nursing students with the University Offer of Acceptance.

Notre Dame University will ensure that the immunisation data base is kept secure and confidential.

Information regarding a student’s immunisation status may be communicated to a Health Care Facility who requests this.

Notre Dame University may advise a Health Care Facility about any Nursing students who remain non-immune through failure to seroconvert, have medical contraindications to vaccines or those who conscientiously object.

Notre Dame will ensure that a student who has a positive result for any BBV will be referred to receive appropriate counselling and guidance from the Infection Diseases Department, Department of Health W.A.

Administration of vaccines

Nursing Students may visit a General Practitioner for serology testing and vaccinations.

Proof of Vaccination

A vaccination record is proof of record and a photocopy of the original will be kept by Notre Dame University.

Recent serology tests can also be produced to ascertain immune status.
SCHOOL OF NURSING AND MIDWIFERY

POLICY: MEDICATION ADMINISTRATION FOR NURSING STUDENTS

This policy ensures that all nursing students from the University of Notre Dame, Australia (UNDA) and all student mentors are informed of their legal obligations related to medication administration by student Registered Nurses and Diploma of Nursing students whilst on clinical practicum.

Student registered nurses from UNDA cannot administer medications until they are attending practicum NSP201. Diploma of nursing students from Notre Dame cannot administer medications until they are enrolled in HLTEN507C Administer and monitor medications in the work environment and undertaking stage 2 practicum. Students must not assist in the delivery of medications until this time, including the dispensing of medications from Medication Assistant Aids (e.g. a Dossett box).

All student nurses must be directly supervised by a Registered Nurse OR Registered Midwife (RN/RM) at all times when handling a medication during preparation, administration and if applicable disposal of.

Notre Dame Nursing students are NOT able to check drugs from the locked drug cupboard (schedule eight). They are NOT allowed to sign the S8 drug register. Students can observe the process only. Students can check and administer S4 drugs according to local hospital policy.

Students are not permitted to administer a medication they are not familiar with. In this case students must notify the RN and seek further clarification of the drug from the MIMs or hospital/facility pharmacy manual.

Students are encouraged to carry pocket-sized calculators with them into clinical practice settings. All students are expected to use calculators to check their manual computations.

Student nurses are taught to initial or sign medication charts after administering medications. Students from Notre Dame are NOT to sign medication charts before drug administration.

Students from Notre Dame cannot administer medications they have not prepared. Students have been instructed that they must politely decline if asked.
Students are not permitted to take medication orders over the telephone, nor should they be counted as the second staff member (RN) to receive the verbal drug order. This means student nurses cannot administer drugs or check drugs that are ordered over the telephone.

Students are not permitted to give medications to patients without completing the following essential steps in patient medication administration. Checking the six R's:

- **Right** patient
- **Right** drug
- **Right** dose
- **Right** route
- **Right** time
- **Right** documentation

Student nurses are further supported to make the following additional **3 SAFETY CHECKS**:

- Expiry Date
- Allergies
- Signature

**STUDENT NURSES FROM NOTRE DAME MUST BE COMPLETING AT LEAST NSP201 (BACHELOR) CLINICAL UNIT OR ENROLLED IN HLTEN507C (DIPLOMA) AND ON SECOND STAGE CLINICAL BEFORE THEY CAN ADMINISTER MEDICATIONS.**

At that time students will be able to administer drugs via the following routes:

- Oral
- Per rectum
- Inhalants
- Subcutaneous injection
- Intramuscular injection
- Sub-lingual
- Per vagina
- Eye drops
- Transdermal
- Intravenous (medication as per specific agency policy)

Students are taught not to re-cap needles, however, because they may come across situations where recapping is required they have all been taught a one-handed technique.
SCHOOL OF NURSING

POLICY: MISCONDUCT IN CLINICAL PRACTICE

The University of Notre Dame, Australia (Notre Dame) General Regulations relating to Discipline (Chapter VIII) applies to all nursing students when engaged on clinical practice. The definitions of misconduct in 8.1 are to be interpreted so as to include conduct which occurs at Clinical Practice Placement venues and involves persons or property associated with the Clinical Practice.

In addition to the definitions of misconduct in the University General Regulations, the definition is deemed to include:

1. Causing physical and or emotional harm to patients, staff members of Notre Dame and/or placement or colleagues (examples include but are not limited to):
   a. giving wrong medications
   b. not adhering to hospital policy
   c. physical abuse of patients and walking out of clinical area
   d. inappropriate behaviour

The following procedure is designed to work in tandem with the University General Regulations to govern those situations of misconduct arising in Clinical Practice.

In the Context of Clinical Practice:

1. When a situation of misconduct occurs in a clinical placement, the student involved shall inform the Notre Dame Clinical Supervisor or Clinical Education Liaison Officer (CELO) as soon as practicable of the nature of the misconduct. Failure to do so may be considered a further act of misconduct.
2. The Notre Dame Nursing Practice year coordinator, in conjunction with the clinical supervisor/CELO will discuss the matter with the student and either commence a clinical learning contract and/or notify the Clinical Coordinator and Dean SoN.
3. If further investigation is required the student may be asked to leave the clinical area by the Clinical Coordinator or Dean until the investigation is completed.

4. A written account from the student with 24 hours may be requested.

5. Acts of misconduct by students engaged in clinical placement may also be notified to the Clinical Coordinator or Dean by the facility directly. When this occurs in circumstances that the student has not advised the University, the Clinical Coordinator and/or Dean may ask the student to provide a written account of the event within 24 hours.

6. A written statement detailing the misconduct from appropriate staff at the clinical placement will also be requested as soon as practicable.

7. The Clinical Coordinator and/or Dean will meet with the student within 7 days to discuss the incident.

8. On the basis of the meeting with the student and the written statements provided to the School and any communications with the staff at the Health Agency, the Clinical Coordinator and/or Dean will determine the appropriate course of action to pursue, in accordance with University General Regulations.

9. Appeals to this decision are made directly to the Dean.
CLINICAL PLACEMENTS REQUESTS

If you would like to make a specific request for a clinical placement then please complete this form and return to sally.clark@nd.edu.au. Please complete a separate form for each semester. Unfortunately this will not necessarily ensure you get this placement however I will endeavour to meet your needs. Please remember that Broome Hospital and Broome itself has limited places so you will all have to consider some time away at some stage during your course. If you have specific needs or requirements then please contact sally.clark@nd.edu.au so we can discuss your options.

Students always need to book and pay for their own transport to placement sites and also from accommodation to the practicum site for rostered shifts. There are some reimbursement opportunities and these are usually to the value of a bus fare (to/from Broome).

The School of Nursing will locate accommodation however free accommodation is becoming limited so you will need to prepare for the possibility that you may need to pay some rent. This will be discussed on a site basis but will usually not exceed $20 per day.

If you are requesting a placement interstate then you will need to pay and secure your own accommodation as well as your transport. There is no reimbursement facility for this. Darwin is the exception and only if there are no sites with free accommodation available.

Interstate placements (except Darwin) will only be considered if you can provide details of the placement site and contact details for student placement requests. You also need to be aware that formal agreements will need to be in place which can be quite time consuming.

If you are requesting Perth please provide details of the suburb that you will be staying or where in Perth you are requesting your placement. Perth placements need to be requested very early.

Placement Allocation Priorities:

While every endeavour will be made to place students in a health care service and/or geographical area of their choice, this may not always be possible.

The final decision will be based on the following factors in order of priority as listed:

- Availability of suitable clinical placements
- Student clinical/academic learning needs
- Student personal needs/student preference (e.g. transport limitations, childcare problems etc.,)

The Associate Dean’s decision regarding clinical practicum placement requests will be final. This process will occur with student consultation.
**CLINICAL PLACEMENT REQUEST FORM**

<table>
<thead>
<tr>
<th>Student Number:</th>
<th>Student Name:</th>
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<tr>
<th>Year: <em>(eg 1st yr, Diploma stage 1)</em></th>
<th>Semester/Stage requested: <em>(eg 12S1; Stage 2)</em></th>
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<table>
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<tr>
<th>Cert 111:</th>
<th>Diploma:</th>
<th>Bachelor Conversion:</th>
<th>Bachelor:</th>
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</thead>
</table>

**Practicum Description:** *(eg Mental Health)*

**Agency Site:** *(eg Darwin, Perth, RFDS, Argyle Mine, Prison, Kalgoorlie, Albany, remote community)*

Practicum Facilitator contact details if interstate.

Accommodation details if you have your own.

Reason for Request, including a brief outline of the knowledge and experience you anticipate the placement will contribute to the development of your practice:

---

Signature: ________________________________ Date: __________________

The School of Nursing will still be responsible for arranging the requested clinical placement- please DO NOT make contact with the requested health service for specific requests.

Please contact Sally.Clark@nd.edu.au if you need any other information regarding your placement opportunities.
SCHOOL OF NURSING

POLICY:  INTERSTATE & OVERSEAS CLINICAL PRACTICUM

Students may complete a component of the Clinical Practicum Program for the Bachelor of Nursing program at an interstate or international facility.

Students are required to inform the Coordinator of their preferred practicum site. Due to the organisation required for these placements, a minimum of 4 months notification is required.

The School of Nursing Clinical Coordinator is responsible for:

1. Identifying student suitability for interstate or overseas placement. This will be based on:
   - Reason for student request.
   - The knowledge and experience that the student identifies will contribute to the development of their praxis.
   - Previous academic and clinical results.

2. Liaising with the agency organisation to arrange the placement.

3. Ensuring that the clinical area is appropriate for:
   - Student learning needs.
   - Clinical supervision.
   - Competency assessment.

4. Ongoing contact with the agency to ensure appropriate information is provided as required. This may include:
   - Clinical practicum contract or agreement.
   - Practicum information booklet.
   - Clinical practicum assessment tool (CPAT).
   - Accident and Incident forms.
   - Student clinical pre-requisite status.
5. Facilitating Notre Dame insurance cover (indemnity and accident)
   - If required for the student while on clinical placement. This is not provided by the university for international placements. This requires negotiation with the facility. If the facility is unable to provide this students are responsible for gaining private insurance.

6. Assessing general suitability of students living and accommodation situation while on practicum.

7. Maintaining availability and contact with the student and placement agency while the student is on practicum:
   - Weekly email and/or phone contact throughout the placement by the Clinical Coordinator or allocated staff member.
   - Receipt and marking of reflective papers via email or post and CPAT on return to Perth.

The student is responsible for:

1. Written Expression of Interest (EOI) detailing:
   - Agency site and practicum facilitator contact details.
   - Reason for student request.
   - The knowledge and experience that the student anticipates the placement will contribute to the development of their praxis.

2. Organisation of own travel, insurance, accommodation and living arrangements, passport, visa and vaccination requirements.

3. Financial cost of travel, insurance, accommodation and living expenses, passport, visa and vaccination requirements.

4. Completing practicum requirements as detailed in the associated NSP UNIT outline.

5. Adherence to all Notre Dame Regulations and School of Nursing regulations, policies and procedures while on practicum.

6. Maintaining contact with Clinical Practicum Coordinator (or delegate) while on practicum.

7. Completion of Notre Dame Indemnity form if required.
Please ensure you contact your clinical supervisor/CELO or a member of the School of Nursing Team immediately.

**STAFF/STUDENT ACCIDENT OR INJURY**

COMPLETE: “CCI School Accident Report” form held by Senior Administration Officer

Does the person require/or received treatment?

Yes

SUBMIT:
“School Accident Report form” and CCI Claim form (first part completed by student) to Finance Dept. Finance Dept complete second part of form and lodge report for claim number

No

“CCI School Accident Report” is forwarded to the Senior Administration Officer for filing

Person to claim Medicare benefit and then submit receipts to school who forward to Finance Dept for reimbursement of any gap.
OBJECTIVES FOR CLINICAL PRACTICUM

The following is a general list of objectives. These are a guideline of the level of practice for each semester. Local policy and SONP must always be adhered to.

- RN program
- EN conversion to RN program
- Diploma of Nursing program

Bachelor of Nursing Program – 3 Year Program

1ST YEAR OBJECTIVES

GENERAL MEDICAL/AGED CARE

The student will be able to:

- Utilise the NBWA: Scope of Nursing Practice when implementing a nursing intervention.
- Demonstrate the skills and knowledge necessary to assess, plan, diagnose, implement and evaluate the essential care requirements for a group of patients
- Demonstrate an understanding of the important role that essential nursing care plays in promoting optimal patient outcomes.

COMMUNITY PLACEMENT

The student will be able to demonstrate:

- An understanding of community health practice.
- An understanding of the role of nursing in the wider community, including, but not restricted to:
  - General practice
  - School
  - Infant and child health
  - Occupational health
MATERNAL / CHILD HEALTH PLACEMENT

The student will be able to:

- Utilise the NBA: Scope of Nursing Practice when implementing a nursing intervention.

The student will be able to demonstrate:

- Understanding of principles and concepts of caring for women and children, including, but not restricted to:
  - Care of women during pregnancy and childbirth.
  - Care of children through all stages of childhood in the hospital and community setting.

2nd YEAR OBJECTIVES

GENERAL/MEDICAL PLACEMENT

The student will be able to:

- Utilise the NBWA: Scope of Nursing Practice when implementing a nursing intervention.
- Demonstrate understanding of the principles of assessing, planning and implementing the care requirements for patients.
- Co-ordinate and prioritise care for up to six (6) patients.

PERIOPERATIVE

The student will be able to:

- Demonstrate an understanding of the basic principles and concepts of perioperative nursing.
- Demonstrate an understanding of the responsibilities of the perioperative nurse in achieving optimal patient outcomes.
- Utilise the NBWA: Scope of Nursing Practice when implementing a nursing intervention.
3rd YEAR OBJECTIVES

CRITICAL CARE PLACEMENT

The student will be able to:

- Demonstrate understanding of the principles of assessing, planning and implementing the care requirements for an acutely ill patient.

- Co-ordinate and prioritise care for allocated acutely ill patient(s).

- Apply theoretical knowledge gained throughout their course to the assessment, planning, implementation of nursing interventions within the context of their assigned work area.

- Utilise the NBWA Scope of Nursing Practice when implementing a nursing interventions.

MENTAL HEALTH PLACEMENT

The student will be able to:

- Demonstrate an awareness of the ethical issues in caring for mental health consumers.

- Utilise the National Standards of Mental Health Services (NSMHS) when assessing, planning and implementing the care requirements for allocated patients/clients.

- Demonstrate an understanding of the pharmacological interventions and the role of the nurse in drug administration when caring for allocated patients/clients.

- Demonstrate an understanding and the application of the Mental Health Act when providing care to Mental Health patients/clients.

- Utilise the NBWA scope of Nursing Practice when planning nursing interventions.
Enrolled Nurse Conversion 2 Year Program Objectives

1ST YEAR EN TO RN OBJECTIVES

GENERAL/MEDICAL PLACEMENT

The student will be able to:

- Utilise the NBWA: Scope of Nursing Practice when implementing a nursing intervention.
- Demonstrate understanding of the principles of assessing, planning and implementing the care requirements for patients.
- Co-ordinate and prioritise care for up to six (6) patients.

PERIOPERATIVE

The student will be able to:

- Demonstrate an understanding of the basic principles and concepts of perioperative nursing.
- Demonstrate an understanding of the responsibilities of the perioperative nurse in achieving optimal patient outcomes.
- Utilise the NBWA: Scope of Nursing Practice when implementing a nursing intervention.

COMMUNITY PLACEMENT

The student will be able to demonstrate:

- An understanding of community health practice.
- An understanding of the role of nursing in the wider community, including, but not restricted to:
  o General practice
  o School
  o Infant and child health
  o Occupational health

MATERNAL / CHILD HEALTH PLACEMENT

The student will be able to:

- Utilise the NBWA: Scope of Nursing Practice when implementing a nursing intervention.

The student will be able to demonstrate:

- Understanding of principles and concepts of caring for women and children, including, but not restricted to:
  o Care of women during pregnancy and childbirth.
  o Care of children through all stages of childhood in the hospital and community setting.
2nd Year En To RN Objectives

Critical Care Placement

The student will be able to:

- Demonstrate understanding of the principles of assessing, planning and implementing the care requirements for an acutely ill patient.
- Co-ordinate and prioritise care for allocated acutely ill patient(s).
- Apply theoretical knowledge gained throughout their course to the assessment, planning, implementation of nursing interventions within the context of their assigned work area.
- Utilise the NBWA Scope of Nursing Practice when implementing a nursing interventions.

Mental Health Placement

The student will be able to:

- Demonstrate an awareness of the ethical issues in caring for mental health consumers.
- Utilise the National Standards of Mental Health Services (NSMHS) when assessing, planning and implementing the care requirements for allocated patients/clients.
- Demonstrate an understanding of the pharmacological interventions and the role of the nurse in drug administration when caring for allocated patients/clients.
- Demonstrate an understanding and the application of the Mental Health Act when providing care to Mental Health patients/clients.
- Utilise the NBWA scope of Nursing Practice when planning nursing interventions.

Diploma of Nursing Objectives

The student will be able to:

- Utilise the NMBWA: Scope of Nursing Practice when implementing a nursing intervention.
- Demonstrate an understanding of the important role that essential nursing care plays in promoting optimal patient outcomes
- Establish and maintain therapeutic relationships with clients
- Maintain confidentiality and privacy
- Work within a legal framework
- Follow infection control guidelines
• Collect data that contributes to client health care plan

• Analyse client health assessment data including observations

• Contribute to the development of individual care plans for clients

• Provide nursing care to meet identified needs within students “Scope of Nursing Practice”

• Monitor and evaluate clients during care

STUDENT NURSES SKILLS LIST

The following skills lists are a guide, students should only undertake a nursing activity that they are educationally prepared for; competent to undertake; legally entitled to perform and for which you are willing to be accountable.
Bachelor of Nursing

1ST YEAR SKILLS

SEMESTER 1

- Simple Dressing and basic wound management
- Bed-making
- Vital signs: TPR, BP, O₂ Saturations
- Perform Blood Sugar levels
- Nasogastric, peg feeds via gravity and infusion pump
- Bottle feeding (infants)
- Urine testing
- Bed bathing/showering/clothing/shaving
- Toileting
- Meal assist
- Admission of new patients or residents
- Manual handling

SEMESTER 2

- Support pregnant woman in labour with a midwife present (massage back, hand holding etc)
- Simple dressing and basic wound management
- Bed-making
- Vital signs of mother TPR, BP (correct position for pregnant woman), O₂ Saturations
- Assist mother in showering (after Caesarean Section)
- Assist mother in bed bath
- Assist mother to change baby nappy
- Assist mother to prepare for baby bath
- Correctly hold and carry neonate
- Vital signs of the newborn Temp, Apex beat, Respirations
- Measure head circumference of neonate
- Measure length of neonate
- Weigh neonate
- Vital signs of child TPR, BP, O₂ Saturations
- Assist child in toileting
- Assist child in showering
- Assist with feeding child/infant
2nd YEAR SKILLS

SEMESTER 3

- Insertion of IDC (male & female) with direct supervision of a RN (Male as per hospital policy and female)
- Insertion of nasogastric tube
- Pre and post operative nursing care
- Care of patients on a bladder washout
- General system physical assessment
- Understanding of pathophysiology of disease
- Formulation of care plans with regard to specific illness and disease
- Knowledge and understanding of different routes of medication
- Knowledge and understanding of nursing implications of care in relation to administration of medication
- Changing of patient controlled analgesia pumps / narcotic syringes
- Neurovascular observations
- Glasgow Coma Scale assessment
- Care of IV lines including:
  - Priming lines
  - Changing of IV fluid
  - Management of IV infusion pumps
  - Blood transfusion

SEMESTER 4

Holding Bay/Pre-op Bay

- Pre-operative checklist
- All necessary documents are available
- Providing support to the patient in this preoperative phase

Anaesthetics

- Preparation of the anaesthetic induction room and associated equipment
- Assistance with patient transfer and positioning – safety considerations
- Application of monitoring devices
- Assistance with induction, intubation, maintenance and emergence from anaesthesia
- Airway management, including:
  - Equipment required
  - LMA
  - Guedels Airway
  - Endotracheal tube
  - Laryngoscope
- Knowledge of:
  - general anaesthetics,
  - regional anaesthesia,
  - emergency drugs
Instrument Nurse

- Correct scrub technique
- Correct gowning and gloving technique
- Correct draping of instrument trolley
- Correct draping of a patient undergoing surgery
- Asepsis and aseptic technique
- Preparation and maintenance of a sterile field
- Maintain accuracy of the surgical count
- Basic instrumentation – general and endoscopic
- Anticipation of surgical events and associated requirements
- Application of the surgical dressing and wound drainage devices

Circulating Nurse

- Correct count procedure
- Patient safety
- Patient positioning
- Team Time Out
- Maintain accuracy of the surgical count
- Provision of sterile supplies
- Intraoperative documentation
- Assists surgical team throughout procedure
- Postoperative transfer and handover to the recovery room nurse

Recovery Room/Post Anaesthetic Care Unit

- Accepting patient into the unit
- Maintenance of the patient’s airway, breathing and circulation
- Connecting monitoring equipment
- Pain control
- Relief from nausea and vomiting
- Assessment of the wound site
- Handover to ward nurse

General

- Advanced Wound Management
  - Establishment, maintenance and alteration to wound care management plans
  - Stoma, urostomy and colostomy care
- Pressure ulcer assessment and management
- Care and removal of various drainage systems, shortening of corrugated drain (under direct supervision)
- Removal of sutures and staples
3rd YEAR SKILLS

SEMESTER 5

- An awareness of professional relationships with other members of the Mental Health Team
- Strategies to address issues of challenging behaviours e.g., client aggression
- Formulation of care plan specific to mental health
- Active participation in areas related to client education
- Participates appropriately during group sessions
- An understanding of pharmacological interventions used commonly amongst mental health clients
- An understanding of the role of the nurse in drug administration in a mental health setting
- Routine nursing care of clients who are suffering from withdrawal
- Awareness of the nurses' responsibility in caring for clients who are suicidal
- A practical understanding of the Mental Health Act as deemed appropriate for 3rd year nursing students
- Understanding of National Standards of Mental Health Services (NSMHS) when planning care for mentally ill clients
- Understanding of mental health assessment, using those forms which are used routinely, in the clinical area to which the student is attached
- Understanding of common psychiatric diagnoses
- An awareness of Community Treatment Orders

SEMESTER 6

- Focused systems physical assessment
- Monitoring and maintenance of patients' airways
  MAY include artificial airways
- Monitoring and maintenance of respiratory function
- Monitoring and maintenance of haemodynamic stability
- Integrated care of critically ill patient
- Psychosocial care of patient, family and significant others
# CONVERSION PROGRAM EN TO RN

## 1st YEAR SKILLS

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2nd YEAR SKILLS

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SEMESTER 4 (EN TO RN)

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• Monitoring and maintenance of patients’ airways
  MAY include artificial airways
• Monitoring and maintenance of respiratory function
• Monitoring and maintenance of haemodynamic stability
• Integrated care of critically ill patient
• Psychosocial care of patient, family and significant others

DIPLOMA OF NURSING

Stage 1 (DCP1)

• Follow standard precautions as per hospital policy eg hand washing, PPE, appropriate disposal of clinical wastes, sharps and linen
• Maintain a clean clinical environment including bed making
• Admission procedure
• Assessment skills including vital sign observations eg TPR, BP, O2Sats and BSLs
• Pressure area prevention and management
• Collection of specimens eg sputum and urine
• Manual handling skills including; use of slide sheets, boards, hoist and mobility devices
• Assisting clients with activities of daily living eg, repositioning of client in bed, personal hygiene, nutritional requirements and elimination needs

Stage 2 (DCP2A)

• Performing a wound dressing
• Collection of a wound swab
• Removal of sutures/staples
• Removal of a drain
• Changing a stomal appliance
• Tracheotomy care
• Suction of the oral cavity
• Administration of eye drops
• Administration of eye ointment
• Administration of ear drops
• Administration of oral medications
• Administration of a rectal suppository
• Administration topical medications
• Administration of nasal spray/drops
• Administration of nebulised medication
• Administration of oxygen
• Preparing medications from ampoules and vials
• Administering a subcutaneous injection
• Administering an intramuscular injection
• Maintaining intravenous therapy
• Administering Intravenous medication
• Removal of an intravenous cannula
• Performing an electrocardiogram (ECG)

Stage 3 (DCP3)
• Utilise the National Standards of Mental Health Services (NSMHS) when assessing, planning and implementing the care requirements for allocated patients/clients
• Pre and post operative care
• Insertion of a urinary catheter
• Blood transfusion management
• Emergency procedures

Including observations pertinent to the birthing process e.g. lochia, neonatal vital signs under supervision
**EMERITUS PROFESSOR DOREEN MCCARTHY**

**MENTOR AWARD**

The University of Notre Dame Australia wishes to recognise the contribution that our mentors and health agency partners make to our nursing program.

The process to formally acknowledge our mentors through this award will be as follows:

1. Nominations will be collected from nursing students at the conclusion of the practicum.

2. A committee set up by the School of Nursing will select a short list from the mentors of each year group. Members of this committee will be by invitation and will include representatives of our staff, advisory board and College of health colleagues.

3. From the short lists one mentor of each year group will be chosen and all three will be invited to the Awards Night in December.

4. Emeritus Professor Dean McCarthy will announce the overall winner and present the award.
CALL FOR NOMINATIONS

From

Nursing Students of the University of Notre Dame Australia

The University of Notre Dame Australia wishes to recognise the contribution that our mentors and health agency partners make to our nursing program.

Students are invited to nominate mentors for Professor Doreen McCarthy Mentor Award. Students must complete selection criteria over page for nomination to be considered.

Professor Doreen McCarthy was the founding Head of School for the School of Nursing following a very distinguished Nursing career spanning almost 50 years.

The Professor Doreen McCarthy Mentor Award is a prestigious honour for the successful Mentor.

Mentor

Health Agency

Signed (Mentor)

(SoN can seek consent to nominator if mentor not able to sign)

Nominating Student

Year Group

Signed (Student)

Date

Please return completed nominations to:
Doreen McCarthy Mentor Award Selection Committee
School of Nursing
The University of Notre Dame Australia
19 Mouat Street (PO Box 1225)
Fremantle WA 6959
SELECTION CRITERIA
(To be completed by the nominating student)

The Selection Panel will look for descriptions or specific examples of how the nominee demonstrates the abilities, actions and behaviours which this award seeks to recognise.

1. **Embodies exceptional leadership qualities and shows a commitment to professionalism in all aspects of patient care, as a nurse and as a mentor.**

2. **Exemplifies the importance and relevance of theoretical knowledge to effective clinical practice.**

3. **Communicates effectively to transfer knowledge and skills**

4. **The Care Factor: Demonstrates a willingness to go the extra mile in interactions with patients, staff and students.**

*Thank you for taking the time to nominate your mentor for the Professor Doreen McCarthy Mentor Award. Your nomination recognises the commitment that they have made to achieving excellence in teaching and the advancement of the nursing profession.*
References


