Emergency Department

 Student Nurse Induction Booklet

Dear Student,

Welcome to the Emergency Department!

Shifts

Prior to your arrival, we will ensure that you are allocated a Primary and Associate Mentor and will complete your shift rota for the first few weeks of your placement. As it is essential for you to work a minimum of 40% with your mentors, we will aim to match all of your shifts where possible.

In order to obtain your initial shifts, please refrain from phoning the department and instead email us directly:

joshua.draper@nhs.net

lana.mclaren@nhs.net

The shift patterns are as follows:

L1 0700 - 1915

L2 0900 - 2115

A 1200 - 1800

TW 1800 - 2400

LN 1900 - 0715

On a long shift, you are entitled to a 1 hour break. Please make sure that you take all of your break and keep hydrated throughout your shift.

Sickness

If you are unable to attend a shift due to sickness, please ensure that you inform the nurse in charge prior to the start of you shift (01246 512004). It is also essential that you inform the university of this absence.

Uniform

In the Emergency Department we expect a strict adherence to the trust’s uniform policy and encourage all mentors to monitor student uniforms. Please ensure…

…uniforms are clean and ironed.

…long hair is tied back and does not touch your collar.

…all jewellery is removed (only plain stud earrings and one plain band ring allowed).

Housekeeping

There is a kitchen on site with a fridge, toaster and microwave. Please feel free to make use of these. Ensure that all food stored in the fridge is labelled with your name and date in order for this to not be mistakenly disposed of.

As there is currently no student lockers, we *strongly advise* that you do not bring valuables or large amounts of money with you when on shift. There is a lockable cloakroom for coats and bags.

Your First Shift

Prior to handover, staff often meet in the break room for a drink - this is not mandatory but is a good way to relax before your shift.

Please come prepared by bringing your Student Placement Booklet and have an idea of your SLOC analysis and aims for this placement as this will be discussed on your first day/first week.

Your mentors should aim to undertake your interviews at the specified times, however this can sometimes be overlooked. In order to prevent any delays, don't hesitate to prompt/remind your mentors of this.

We encourage all students to grasp learning opportunities that arise in the department and ED staff will be happy to explain anything that you do not understand (Remember, there is no such thing as a silly question!).

Summary

On behalf of the Emergency Department, we hope that you have an enjoyable placement, where you will acquire skills and knowledge that will last throughout your career.

We hope that this information will provide a good insight into the department prior to your arrival.

If you have any concerns that you wish to discuss or have any questions before your placement, do not hesitate to contact us directly.

Josh Draper

Learning Environment Manager, ED

Useful Contact Numbers

Staff Base/Nurse in Charge: 01246 512004

Reception: 01246 512001

Learning Environment Manager:

Josh Draper (joshua.draper@nhs.net)

ED Matrons:

Sue Wootton (susanwootton@nhs.net)

Kaye Smedley (kayesmedley@nhs.net)

ED Clinical Educators:

Becky Sears (rebecca.sears@nhs.net)

Lana McLaren (lanamclaren@nhs.net)

Paediatric Lead Sister:

Hannah Birchall (hannah.birchall@nhs.net)

Practice Learning Facilitator (01246 516209):

Claire Langford (claire.langford1@nhs.net)

University of Derby Link Tutor (01246 212927):

Steven Collis (s.collis@derby.ac.uk)

ED Overview

Welcome to the Chesterfield Royal Hospital Emergency Department!

We currently have around 75-80,000 attendances, making this a very busy district general hospital. The department accommodates all specialities;

Medical, Surgical, Orthopaedic, Gynaecology, Mental Health and Paediatric

We are governed by Key Performance Indicators (KPIs) in order to facilitate the smooth flow of patients and prioritisation of care. Although we are no longer a trauma centre, we remain a trauma unit, meaning that we continue to accept certain criteria of trauma via EMAS (East Midlands Ambulance Service).

ED is divided into subsections, each with their own types of patients;

Minors, Majors, Pitstop, Adult Resus, Paediatric Cubicles, Paediatric Resus

In ED, various aspects of nursing will differ greatly from those found on the acute wards or in the community, however the fundamentals of nursing care remain the same. We strive to maintain and deliver the trust’s mission statement of the CARE values and the six Cs.

We are a ‘*paperless*’ department and record all aspects of nursing care electronically using the Emergency Department Information System (EDIS). Access to medications is also electronic, through the use of our robot medication system (OMNICELL). The use of these systems requires passwords and fingerprint access, all of which must be obtained from the nurse in charge at the start of your shift (Remember, as with other placements, all nursing documentation must be countersigned by a registered nurse).

At 09:00am on each shift, the ‘Daily Huddle’ takes place at the staff base. The Matron/NIC will coordinate a discussion with all available staff to provide up-to-date and relevant information for the shift.

A recent development in the department is the introduction of the ’*10@10*’ teaching sessions. When able, staff are invited to short formal/informal teaching sessions, held in the department at 10:00am for 10 minutes in order to keep staff up to date with current practice. Ensure you make every effort to attend.

Pitstop

This area of the department is led by a small team, consisting of two qualified nurses and one care support worker. Patients arrive via EMAS (East Midlands Ambulance Service), are booked in by the onsite receptionist and are then moved into one of the two assessment rooms. The nursing assessment in the area is quick and efficient, comprising of a handover from the paramedics and questioning of the patient. During this time, the patient will often have a baseline set of observations, an ECG, blood tests and IV access. Any required X-rays or CT scans can also be requested from this point. From here the patient is then moved to the most appropriate area, where the majors team will continue their care.

Minors

This area of the department assesses the patients that walk into the department and self-refer. The triage of patients is completed by a small team of two qualified nurses and one care support worker. Patients in this area that present with minor injuries are given analgesia and sent for any required x-rays and are then assessed by a doctor/ENP based in this area. Those patients that self-present with a potentially life-threatening symptoms (i.e. chest pain, shortness of breath) can be referred on to the majors area of the department.

Majors

This area of the department consists of ten stretcher bays, eight cubicles and two paediatric cubicles. The majority of the ED team work in this area and it is where the staff base is located. Patient referred from pitstop or minors wait in rooms to be seen by a doctor and from here will go home or will be transferred to a ward after receiving necessary treatment. This area utilises the ‘Named Nurse’ approach.

Adult Resus

If patients require close observations, one-to-one nursing or urgent treatment, they may be referred to the resus room. This area consists of specifically allocated nurses and doctors that monitor, assess and provide treatment for up to 3 patients. EMAS are able to directly refer patients to resus via the *Red Phone,* by which the patient will bypass the pitstop area. If there is an emergency in the main entrance, car park or outpatient departments of the hospital, this room holds the necessary portable equipment for such an incident.

Paediatric Resus

This area of the department is managed in the same way as Adult Resus but is equipped to treat patients from birth to adolescence. Ensure that you familiarise yourself with the equipment in this room as it differs from that found in other areas.