

Welcome to Markham Ward.

Your Mentor for this placement is ................................................

Your Associate Mentor is ..............................................................

We try to roster the ‘Off Duty’ so that you work with your Mentor/Associate Mentor, however if your shift does not coincide with your Mentor then you should negotiate support from a qualified member of staff on duty to work with (Remember to obtain testimonies from other staff members, these can be useful in providing evidence for how you are meeting learning outcomes/competencies).

If you encounter any problems during your placement or any problems at home that could affect your performance on your placement please speak to your Mentor(s) or the ward Matron/Sister or the LEM. Or if you don’t feel comfortable speaking to ward staff please speak to your personal tutor, ward link tutor or from the Clinical Placement Team.

**Shifts**

Has a Student Nurse the NMC expects that you experience 24 hour/ 7 day care. This means you will have to work the different shift patterns in order to gain experience of how it affects patient care.

The Shift times are as below:

Mornings (**M**) 07:00 – 14:30

Afternoons (**A**) 12:00 -19:30

Long Days (**LD**) 07:00 – 19:30

Long Nights (**LN**) 19:00 – 07:30

Don’t forget you need to work at least 40% of your shifts with your Mentor in order for her/him to be able to assess you properly.

**Please note that there is a limit of ONE STUDENT on night shifts & ideally no more than three on any other shift.**

**Sickness/Compassionate leave**

If you are ill and unable to attend placement, please remember to telephone the University **AND** the ward to let staff know you will not be attending.

Don’t forget to let the placements administrator know when you return to placement.

**Useful numbers & contact details:**

The direct telephone numbers for Markham Ward are:

**01246 512429**

**01246 512431**

The Matron/Sisters office number is: **01246 512435.**

**MEDICAL EMERGENCY TEAM number is: 2222, you need to clearly state that the “medical emergency team required on Markham Ward” and the operator will confirm the location with you.**

Depending on your previous experiences you may wish to be actively participating in the care of an acutely unwell patient or you may wish to observe how the team cares for the patient. Either way we would encourage you to use the opportunity if it arises to further your knowledge and understanding of care of the acutely unwell individual.

**If there is a FIRE dial: 2000 and state the location of the fire.**

**To fast bleep SECURITY dial: 7777 and state clearly where the security personnel are needed.**

To use the internal bleep system, you need to dial 85, wait for the automated system to speak the instructions and when prompted you will need to dial in the three digit bleep number followed by the extension number you are dialling from (this is four digits long).

The Matron for Markham Ward is Vicky Turner.

Email: [Vicky.turner1@nhs.net](mailto:Vicky.turner1@nhs.net)

The Sisters for Markham Ward are Dawn Edwards and Zoe Wallace.

Email: [dawnedwards2@nhs.net](mailto:dawnedwards2@nhs.net) [zoewallace@nhs.net](mailto:zoewallace@nhs.net)

The Learning Environment Manager’s (LEM) are Staff Nurse's Tracy Forester &

Email: tracy.coppinger@nhs.net

Centre for Practice Learning team are also available for support:

Telephone: 01246 512918

Email: [CRHFT.CentreforPracticeLearning@nhs.net](mailto:CRHFT.CentreforPracticeLearning@nhs.net)

Contact details for the University of Derby link tutors are displayed on the notice board in the staff/resource room.

**Evaluation of Mentor**

You may be aware that in order to continue mentoring Student Nurses your Mentor has to be “active” on the Trust Mentor Register. This is achieved by tri-ennial reviews with the ward LEM. Mentors have to demonstrate that they are achieving the NMC domains and outcomes required of Mentors (similar to how you as a Student have to demonstrate your achieving the NMC competencies). One way your Mentor can do this is by feedback from you. At the back of this pack there are several Evaluation of Mentor forms. If you wish to complete **one** of the forms and return it to Emma or Fiona or give it to your Mentor, it would be appreciated.

**General information**

Markham Ward is a 33 bedded general medical ward with a specialist interest in respiratory medicine. We have two Consultants attached to the ward, Dr Davies (SD5) and Dr Aung (TA1). We also have visits from other specialists as necessary.

Our patients vary in age from 17 yrs upwards and they are all treated as individuals, allowed the privacy, dignity and respect that we would wish for ourselves.

We have five bays and four side rooms, there are NO mixed bays and the beds are allocated on a ‘patient need’ basis. Has a ward we work on a ‘bay nursing’ principle, where a qualified nurse is allocated a bay(s) and s/he is responsible for the planning and evaluation of care for those patients.

The Markham Ward team is a multidisciplinary team and consists of Nurses, Ward Practitioners, Healthcare Assistants, and different grades of Doctors, Pharmacist, Physiotherapist, Occupational therapists, Ward Clerks, Housekeepers, Domestic assistants, Catering assistants and Social Workers.

All our patients have an individual assessment of their needs and their care plans formulated to reflect each individual needs. Our ward philosophy is displayed on the notice board and all our staff work together to make a stay in hospital for the patient as stress free as possible.

Markham Ward has “open visiting”.

The visiting times are:

**10:00 until 20:00**

Visiting is limited to two visitors at the bedside and no children under the age of 11yrs old are allowed on the ward unless they are visiting a parent.

During your placement on Markham Ward as a Student Nurse you are expected to learn more about the medical and nursing care of the patient with a medical problem.

Medical conditions that our patients have will be explained on an individual basis and students have access to the education centre library.

A basic knowledge of the more common conditions compliments the care that we are able to offer our patients. Brief descriptions of some of the more common conditions and common abbreviations that you may encounter on our ward are included with this pack.

There are numerous learning opportunities that you are able to use whilst on placement with us. Students are encouraged to identify their own learning opportunities and discuss theses with their mentors in order to formulate individualised action plans (There are some learning opportunities identified at the back of the welcome pack to use as guidance).

Students should anticipate being questioned by their mentors and other members of staff at anytime. This will enable us to direct our education and practice to an appropriate level for your abilities/level of learning.

Several members of the MDT provide teaching sessions throughout the year; these will be displayed on the notice board so keep an eye out for them.

**Common medical conditions on Markham Ward**

**Asthma:** is an inflammatory condition of the airways. The cause of which is not completely understood; although some asthmatics do have defined ‘trigger factors’ i.e. cat fur. The inflammation can make the airways hyper responsive resulting in narrowing of the airways and the obstruction of airflow. Asthma can and does kill. 1,400 people a year die from asthma.

**Bronchiectasis:** is chronic dilation of the bronchi and bronchioles with impaired drainage of bronchial secretions. There is persistent infection in the affected lobe or segment of the lung. The symptoms include chronic cough and purulent secretions.

**Chronic Obstructive Pulmonary Disease (COPD):** Chronic lung damage as a result of recurrent infections and/or irritation by atmospheric pollution i.e. smoking, coalface workers, woodworkers.

**Emphysema:** thinning and destruction of the alveolar septs; lungs are over distended and loose elasticity.

**Pleural effusion**: excess pleural fluid formation developing inbetween the two layers of the pleura. Causes can be:

* Increased capillary permeability – caused by inflammatory conditions.
* Increased pulmonary capillary pressure – caused by left ventricular failure (LVF).
* Reduced flow through pulmonary lymphatic system – caused by tumours/infection.

**Pneumocystis Carinii Pneumonia (PCP):** pneumocystosis is an infection caused by the organism Pneumocystis carinii. This organism has been recognised as being an important cause of pneumonia in the immunocompromised host i.e. HIV.

**Pneumonia:** inflammation of one or both lungs with consolidation. Pneumonia is frequently, but not always due to infection. The infection may be bacterial, viral, fungal or parasitic. Symptoms may include fever, chills, cough, sputum production, chest pain and shortness of breath.

**Pneumothorax:** a collection of air in the pleural space causing a collapse of the lung. If blood is also present in the pleural space, the condition is known as a haemopneumothorax.

**Tuberculosis (TB):** an infectious disease caused by the bacteria Myobacterium Tuberculosis – this is an acid-fast bacillus (AFB). Tuberculosis is characterised by systemic defects such as fever, fatigue, night sweats and weight loss, plus those dependent on the site e.g. cough in pulmonary TB, haematuria in renal TB & infertility if the uterine tubes are affected.

**Common abbreviations used on Markham Ward**

Below is a list of common abbreviations that are used on Markham ward’s handover sheet. Use this space to make notes of what the abbreviations mean.

**AF -**

**ABG -**

**BIPAP -**

**CBD -** Continuous Bladder Drainage (Urinary catheter)

**CAP -**

**CCF -**

**CKD -**

**CPAP -**

**CVA -** Cerebral Vascular Accident (Stroke)

**DNR -**

**DVT -**

**HAP -**

**HOOF -**

**HTN -**

**IHD -**

**IVAB -**

**IVI -**

**LRTI -**

**LTOT -**

**LVF -**

**NBM -**

**NIV -**

**NSCCa lung -**

**NSTEMI -**

**OAB -**

**OSA -**

**PE -**

**PEFR -**

**PEG -** Percutaneous Endoscopic Gastrostomy (form of artificial feeding)

**PVD -**

**RWUT -**

**SCCa lung -**

**^SOB -**

**SOBOE -**

**SVCO -**

**TTO’s -**

**USS -**

**UTI -**

**UWSCD**  -

**Examples of Learning Opportunities**

* Spend some time working with/observing:
  + Occupational Therapist
  + Physiotherapist
  + Speech and Language Therapist
  + Dietician
  + Social Worker
* Spend time with the Lung Cancer Nurse Specialist
* Spend time with Home Oxygen Nurse Specialist
* Participate in caring for respiratory patients (NIV, Chest Drains, oxygen therapy, Tracheostomy)
* Spend time with Palliative Care Nurse Specialists
* Observe Bronchoscopy (Tuesday afternoon)
* Admission/Discharge of Patients
* Formulate care plans for individual patients
* Participate in MDT’s
* Consultant ward rounds

This list is only meant as guidance for learning opportunities. Remember that you have got competencies that you need to achieve and you must work at least 40% of your placement with your Mentor so that s/he can assess you.

**Evaluation of Mentor**

**Name of Mentor:**

|  |  |  |  |
| --- | --- | --- | --- |
| Were placement interviews carried out at the appropriate times? (e.g. week 1,4,7,10) | Yes | No | NMC Standards:  1,2,3 |
| Were you allocated to a 2 mentor system? | Yes | No | NMC Standards:  1,2,3,5,8 |
| Were you asked about previous skills, knowledge & care experiences? | Yes | No | NMC Standards:  1,2,8 |
| Were you asked about learning objectives for this placement? | Yes | No | NMC Standards:  1,2,3,4 |
| Were you offered opportunities for learning? | Yes | No | NMC Standards:  1,2,3,4,8 |
| Were you shown how to access policies & procedures and resource information? | Yes | No | NMC Standards:  1,2,3,4,5,6,7,8 |
| Were you given opportunities to participate in the supporting/teaching of others? | Yes | No | NMC Standards:  1,2,5,6,8 |
| Were you encouraged to ask questions & rationalise practice? | Yes | No | NMC Standards:  1,6,7,8 |
| Were you regularly provided with verbal/written feedback on your progress during your placement? | Yes | No | NMC Standards:  1,3,4,5,8 |
| Did you receive supernumerary status throughout your placement? | Yes | No | NMC Standards:  2,5,8 |
| Did you feel well supported by your mentor during the placement? | Yes | No | NMC Standards:  1,2,3,5,7,8 |
| Were you given opportunities to experience/engage in teamwork? | Yes | No | NMC Standards:  1,2,3,5,7 |

**Comments:**