



Mercy Health

Student Nurse & Student Midwife Orientation Manual 2024

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For more information, please contact: Mercy Hospitals Victoria Ltd Nursing and Midwifery Learning Team.

"Mercy Health acknowledges Aboriginal and Torres Strait Islander Peoples as the first Australians. We acknowledge the diversity of Indigenous Australia. We respectfully recognise Elders both past and present."

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Welcome

Mercy Health is a Catholic organisation grounded in a 2,000-year tradition of caring for others. Founded by the Sisters of Mercy, Mercy Health is made up of more than 10,000 people who provide acute and subacute hospital care, aged care, mental health programs, maternity and specialist women's health services, early parenting services, home care services and health worker training and development. Mercy Health employs people from many cultures and backgrounds who, irrespective of their beliefs, share a common bond to care for those in need.

Mercy Health cares for communities in Victoria, southern New South Wales, northern Queensland, Western Australia and the Australian Capital Territory. We are guided by the values of compassion, hospitality, respect, innovation, stewardship and teamwork. These values inform the way we care for those in need as well as each other.

Werribee Mercy Hospital (WMH) is a general public hospital that cares for over 18,000 inpatients a year and services the rapidly growing western and southern areas of Melbourne. WMH offers emergency, surgical, medical, Pediatrics, sub-acute, community, mental health, palliative, maternity and newborn care, as well as renal dialysis. The hospital is currently undergoing rapid expansion and redevelopment in order to meet the increasing demand for health services within the region. This expansion will deliver an extra 64 inpatient beds, which includes eight new intensive care beds as well as six new operating theatres. The expansion will take the total number of beds at the hospital to 298.

Mercy Women Hospital (MWH) offers obstetrics, gynecology and neonatal services and has one of only four neonatal intensive care units in metropolitan Melbourne. The 56-58 bed unit is made up of neonatal intensive care and special care nurseries. Mercy Hospital for Women provides both public and private patient care through maternity services, neonatology and pediatrics, perioperative services, women's health and associated health and support services and diagnostic services. It is a major teaching hospital and specialist referral center with the medical, nursing, midwifery and allied health expertise to treat the most complex obstetric, neonatal and gynecological cases.

Mission Statement and Values

Our **Mission** is to follow Jesus Christ in His mission of mercy through the delivery of health, aged care and community services. Our **Vision** is to build an enduring capacity and passion to serve those with special needs. Our **Values** reflect the key behaviors that guide our interactions with each other and those we serve.

Compassion - We are present for others in their time of need.

Hospitality - We welcome people with warmth and offer comfort.

Respect - We respect the sacredness of the gift of life. We act with integrity and justice and value each person's dignity.

Innovation - We strive to create a dynamic environment that encourages creativity and diversity.

Stewardship - We build and strengthen the ministry and all resources entrusted to us.

Teamwork - We work together to progress the Mercy mission.

Aboriginal and Torres Strait Islander students



Mercy Health

Aboriginal and Torres Strait Islander students are welcome to contact the Aboriginal Hospital Liaison Officer whilst on placement at Mercy Health. The Aboriginal Programs provide social and emotional wellbeing support, assistance and information to Aboriginal and Torres Strait Islander patients and their families. The program also supports staff to improve service delivery by providing cultural advice and support.

Mercy Health is committed to valuing the diversity represented in its workforce. Students will be asked if they identify as Aboriginal and/or Torres Strait Islanders. The information requested is used to gather statistical data only, and is requested on a voluntary basis.

- Students are welcome to access the Aboriginal Cultural Awareness Hub via the hospital intranet: https://intranet.mercyhealth.com.au/people-learning/Pages/Aboriginal_Cultural_Awareness_Hub.aspx
Mercy Health home page: People & Learning>Equity and Inclusion>Aboriginal Cultural Awareness
- Students are also welcome to access the Aboriginal Hospital Liaison Officers webpage: <https://health-services.mercyhealth.com.au/service/aboriginal-hospital-liaison-officer-mhw/>



Aboriginal Cultural Awareness Hub

*Acknowledgement of Country
Reconciliation Action Plan
Significant Dates*

Equity and Inclusion

Mercy Health is committed to diversity and provides a flexible workplace to assist you through different life stages. Our workplace policies, practices and diversity programs have been developed to support you personally and professionally. Students are welcome to access these resources whilst on placement at Mercy Health via the hospital intranet:

https://intranet.mercyhealth.com.au/people-learning/Pages/Equity_Inclusion_Hub.aspx

Mercy Health home page: People & Learning>Equity and Inclusion



Thrive at Mercy

Thrive @ Mercy is our online employee health and wellbeing hub. It houses a wide range of resources to support employees wellbeing at all life and career stages. Students are welcome to access these resources through the intranet, whilst on placement at Mercy Health.

https://intranet.mercyhealth.com.au/people-learning/Pages/Thrive_at_Mercy.aspx

Mercy Health home page: People & Learning>Thrive @ Mercy



Campus Locations

Mercy Hospital for Women

163 Studley Road Heidelberg, 3084

- Public transport access is available via Hurstbridge train line
- Heidelberg station and is co-located next to the Austin Hospital
- On-site parking is available enter via Studley Rd
- Car park fees apply at a discounted \$17.00 per day for Mercy staff
- You need to obtain a discount voucher from the carpark office on B3
- You must have your hospital ID with you
- Pay prior to exiting

Werribee Mercy Hospital

300-310 Princes Highway Werribee, 3030

- Public transport available via Werribee train line, Hoppers Crossing station
- On-site parking is available for \$8 a day (show student ID) or \$4 a day with a concession card

Learning Team Contact Information

Mercy Hospital for Women

Natalie Blinman Clinical Placement Coordinator

Email: UndergraduatesMHW@mercy.com.au

Email: NBlinman@mercy.com.au

Phone: 8458 4941

Clinical Nurse Educators/Clinical Support Midwives

Midwifery 8458 4652

Nursing 8458 4859

Special Care Nursery 8458 4745

All sick leave calls to 8458 4652

Clinical Nurse Educators/Clinical Support Midwives

BSU/ED/ANC: Lan page 4329, 4153, 4163, 4292

Postnatal: Lan page 4269, 4328, 4653, 4156

Nursing: Lan page 4151

Special Care Nursery: Lan page 4963

Werribee Mercy Hospital

Madeleine Ryan-Robinson Clinical Placement Coordinator

Email: UndergraduatesWMH@mercy.com.au

Email: MRyan-Robinson@mercy.com.au

Phone: 8754 3508

Clinical Nurse Educators/Clinical Support Nurses

General Support: 8754 3485 Ascom: 3525

Ascom: 3687

Emergency Educator: 8754 8345 Ascom: 3505

Theatre Educator: 8754 3487

Clinical Midwife Educators/Clinical Support Midwives

General Support: 8754 3507 Ascom; 3507

8754 3522 Ascom; 3522

Ascom; 3477

Special Care Nursery: 8754 3510 Ascom: 3697

Mercy Hospital Women

Department and contact number	Shift times
Birth Services 8458 4058 Postnatal/Antenatal Wards 5A - 8458 4421 5B - 8458 4437 5C - 8458 4419 Special Care Nursery 8458 4703 Gynaecology 8458 4853 Emergency Department 8458 4000	AM: 0700-1530 hrs. PM: 1330-2200 hrs. ND: 2100-0730 hrs.
Antenatal Clinic/Health Direct 8458 4215 Fetal Monitoring Unit 8548 4266	L1, L3, FMU: 0800-1630 hrs.
Mercy@Home 8458 4466	0800-1630 hrs.
Breast Feeding Support Services 8458 4676	0800-1630 hrs.
Perioperative Services 8458 4098	0700-1530 hrs. 0800-1630 hrs. 1100-2030 hrs. As per the roster
Caesarean Shift 8458 4109	0630-1500 hrs.

Werribee Mercy Hospital

NURSING

Department and contact number	Shift times
General Wards	AM - 0700 – 1530 hrs.
CMC5 (Medical) 8754 6466	PM - 1300 – 2130 hrs.
CMC4 (Medical) 8754 6423	ND - 2100 – 0730 hrs.
C3 (Surgical) 8754 3692	
D3 (Surgical) 8754 3729	
GEM (CMC1) 8754 3033	
Palliative Care (GJC) 8754 3743	
Theatre (CMC level 3) 8754 6334	0800 - 1630 hrs. (Anesthetics) 0830 – 1700 hrs. (PACU)
Day Procedure Unit 8754 3429	DPU – AM 0700-1530 hrs. PM. 1130 – 2000hrs MDS - 0830 – 1700hrs
Emergency 8754 3470	AM - 0700 - 1530 hrs. PM - 1300 - 2130 hrs.
Renal Dialysis Unit 8754 3445	AM - 0700 - 1530 hrs. PM - 1230 - 2100 hrs. <i>Within the hospital located across from the cafeteria</i>
Hospital In The Home (HITH) 8754 3538	0800-1630 hrs. <i>Located on the ground floor of CMC building</i>
Community Palliative Care 9364 9777	0830 - 1700 hrs. <i>(Meet at Sunshine office located at 3 Devonshire Road, Sunshine)</i>
Outpatients Department 8754 6792	0800 – 1630 hrs. <i>Separate from the main hospital, a small stand-alone building facing the Princes Highway next to the multi-level car park</i>

MIDWIFERY

Antenatal Clinic	0845 – 1700 hrs. <i>(Located within the Outpatients Building, a small stand-alone building facing the Princes Highway next to the multi-level car park)</i>
Maternity Assessment Unit (MAU) 8754 3412	AM – 0700 -1530 hrs. PM – 1300 -2130hrs <i>Present to the Maternity unit reception</i>
Pregnancy Day Stay (PDS) 8754 3462	0900 – 1700 hrs. <i>Within the hospital located across from the cafeteria</i>
Postnatal Birth Suite Unit 8754 3405 8754 3460	AM - 0700 – 1530 hrs. PM - 1300 – 2130 hrs.
Special Care Nursery 8754 3438	ND - 2100 – 0730 hrs.
Midwifery in the Home (MITH) 8754 3458	0830 – 1700 hrs.

Lactation Consultant (LC)	8754 3428	0800 – 1630 hrs.
Caesarean Shift	8458 4109	0700 – 1530 hrs. On Elective Caesarean (EC) shifts, students are required to meet the midwife allocated to EC in the postnatal unit at the start of your shift.

Clinical Experience at Mercy Health

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

The aim of the Undergraduate Nursing and Midwifery, and Post Graduate Midwifery placements at Mercy Hospitals Victoria Ltd (MHVL) is to provide a positive learning environment within an acute, sub-acute and maternity clinical setting. Clinical placement intends to integrate the theory into practice in the clinical setting. Clinical Nurse/Midwife Educators (CNE/CME), Clinical Support Nurses/Midwives (CSNs/CSMs), and Supervising Nurses/Midwives will support you whilst on placement, provide feedback, and guide you as you develop your skills and knowledge.

Pre-placement requirements

Students are expected to complete all pre-reading and pre-learning, and email all required documents to the Clinical Placement Coordinator, at least a week prior to the placement commencing. Students are encouraged to contact the Clinical Placement Coordinator directly for any placement related enquires.

Pre-reading

- MHVL Student Nurse and Student Midwife Orientation Manual
- MHVL's CoCE Guidelines (midwifery students)
-

Pre-learning

- Complete NHHI Certificate (valid for 12 months)

Email to Clinical Placement Coordinator at least one week prior to placement commencing

- Student Data Form
- Privacy and Confidentiality Form
- Copy of NHHI Certificate

Commencement of Placement

Students should present to the hospital 15 minutes prior to their allocated shift time as per the roster provided.

Students should obtain their Student Security Card from the Cashier or Admissions Desk prior to presenting to the clinical area.

Students should then proceed directly to the clinical area they have been allocated to or wait outside the main entrance.

Students will be greeted in either area as instructed.

Students need to:

- Bring Student Card Security Access Agreement (completed, with cash for deposit)
- Bring pre-written placement objectives and appraisal/assessment tools
- Wear University Uniform
- Bring University ID card, Name Badge, fob watch, pen and any other equipment required

During Placement

- Bring **appraisal/assessment tools** daily
- Undertake **self-assessment** in order to identify specific learning needs
- Utilise resources adequately to **prepare** for shift (undertake the necessary reading and study to supplement their practical experiences)
- Set **objectives** in line with placement requirements (Specific, Measurable Achievable, Realistic and Time specific objectives) and communicate these to their Supervising Nurse/Midwife and Clinical Support Nurse/Midwife
- Seek appropriate **learning opportunities**
- Achieve **competency units** within the required time frames
- **Interact professionally** with Clients/Patients, Supervising Nurse/Midwife, Nurse/Midwife Unit Managers, Clinical Support Nurse/Midwives, Clinical Educators, Medical Staff, Allied Health and Support Staff
- **Seek feedback** and respond professionally (request Supervising Nurse/Midwife to complete Student Feedback Forms daily)

Rosters/attendance/absences

For any roster concerns, please contact the Clinical Placement Coordinator.

Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

It is an expectation that students will attend to 100% of their clinical placement at the time and shifts allocated. Rosters are provided by Mercy Health.

If you are late for a shift:

- Please notify the allocated ward and the Clinical Support Nurses/Midwives via phone
- If leaving a voicemail, please say your full name, year level, university and the area you will be late to

If you are absent from a shift:

- Please notify the allocated ward and the Clinical Support Nurses/Midwives via phone
- Email the Clinical Placement Coordinator- Natalie Blinman (MHW) or Madeleine Ryan-Robinson(WMH)
- If leaving a voicemail, please say your full name, year level, university and the area you will be absent from
- Notify the Clinical Placement Officer at your university and provide the university with the necessary evidence regarding your absence, e.g. Medical Certificate.

The Education Provider (university) will liaise with the Clinical Placement Coordinator: Natalie Blinman (MHW) or Madeleine Ryan-Robinson(WMH), regarding make-up shifts.

Support

Please contact the Clinical Placement Coordinator: Natalie Blinman (MHW) **or** Madeleine Ryan-Robinson (WMH) should you have any concerns or issues with placement.

Education Sessions

Onsite education sessions take place daily, which we encourage you to attend. Please refer to the Education Calendar and flyers for these sessions – displayed in the clinical areas.

Student Debrief

Student debrief sessions will be scheduled at various times during your placement. The Clinical Support Nurses/Midwives or Clinical Educators will advise you of the scheduled times. If you require debriefing after a particular incident, please contact the Clinical Support Nurses/Midwives to arrange a time.

Clinical Supervision

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

MercyNET resource on PROMPT:

- Nursing and Midwifery Supervision and Delegation Policy

Resources:

- <http://www.nursing.vic.gov.au/>
- <http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#dmf>

Supervision

Students attending clinical placement must perform under the supervision of a Registered Nurse or Midwife. Clinical supervision may be **direct** or **indirect** as determined and communicated by the Registered Nurse or Midwife. Please contact the Clinical Support Nurse/Midwife if you are concerned, or require further direction.

Scope of Practice

Students are responsible for ensuring work is conducted within their scope of practice. A student's scope of practice is influenced by;

- The level of progress within the Undergraduate Degree/Post Graduate Diploma;
- The health care requirements of the clinical learning environment;
- The level of acuity of the individual in the health care setting; and

As a student, the scope of practice changes as you progress through your course of study. The university will be specific about what constitutes your current scope of practice. Please contact the Clinical Support Nurse/Midwife if you are concerned, or require further direction.

Professional Conduct and Student Responsibilities

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

MercyNET resources on PROMPT:

- Code of Conduct Policy
- Consumer Rights and Responsibilities Policy

Resource:

<https://www2.health.vic.gov.au/public-health/immunisation/adults/vaccination-workplace/vaccination-healthcare-workers>

Conduct on placement

Students are expected to adhere to Mercy Health's Code of Conduct and practice within the following frameworks whilst on clinical placement, as well as adhering to the NMBA Code of Conduct. This includes:

- Mercy Health's Values
- Mercy Health's Code of Conduct (access via intranet - PROMPT)
- Accessing **MHVL's Policies and Procedures** (access via intranet - PROMPT)
- NMBA Standards for Practice and Code of Conduct
- Ensuring the currency of **Police Checks** and **Working with Children's Card**.
- Maintaining **immunisations** as per the recommendations made by the Department of Human Services Victoria. Students must maintain a personal immunisation record that documents vaccinations and results. For further information you can access the "Immunisation Guidelines for Health Care Workers" as per above link
- **Respecting** the workplace and its environmental setting
- **Identifying** themselves as students to staff, patients and visitors
- Understanding the Education Provider's, MHVL's and the NMBA **Social Media Policies**. Students are not to include any part of their placement experience on social media
- Not carry their **mobile phone** on them whilst providing clinical care
- Keeping **personal belongings** and valuables to a minimum as MHVL will not take responsibility for any lost valuables
- **Reporting concerns** or changes in patient conditions immediately to Nursing/Midwifery staff
- Working within **Scope of Practice**, under the supervision of the Registered Nurse/Midwife. Seek assistance if not confident with a procedure/treatment, or lack of understanding in an area
- Notify the Education Provider (University) and MHVL as per absence procedure, if **absent or late** for a shift
- **Not accepting gifts** or benefits for services performed in connection with their perceived duties and responsibilities, which might directly or indirectly be perceived to comprise them in their official capacity
- Present for work at all times free from the effects of alcohol and or other drugs that affect the ability to **work safely** (see Risk Management Alcohol and Drug Policy)
- Adhere to **non-smoking** policies within Mercy Health facilities

Unacceptable behavior / misconduct include, but are not restricted to:

- Breaching patient or staff privacy and confidentiality
- Breaching Mercy Health policies/procedures
- Failure to report work related accidents/serious near miss
- Continual lateness for duty/unauthorised absence/s
- Careless action/neglect of professional conduct or duty
- Failure to report a criminal conviction or impending action, which in the opinion of Mercy Health, directly relates to a risk in performing your duties
- Failure to disclose a prior or current conviction when requested to do so
- Sleeping during working hours where there is a requirement to be working
- Falsification of qualifications leading to employment
- Public misrepresentation – causing damage to the reputation or image of Mercy Health or its employees
- Actions which deliberately or recklessly injure other employees, patients or visitors, or that place their health, safety or welfare at serious risk
- Improper use of workplace equipment, supplies and other physical resources

Failure to comply with this expected professional conduct during placement may result in the Education Provider being contacted.

Clinical uniform and dress code

It is compulsory for all Nursing and Midwifery students to wear university approved uniforms with a name badge visible at all times whilst on clinical placement. Students must follow Mercy Health's policy in presenting in neat and professional attire ensuring that:

- Approved university uniform is clean and tidy
- Professional black or navy pants are worn, no jeans or leggings
- Shoes are black, closed toe and non-slip
- No long sleeves to be worn in clinical areas
- University name badge visible (with photo ID)
- Long hair tied back
- Fingernails are short and clean, without nail polish, acrylic or gel nails.
- Jewellery - not to be worn, with the exemption of a plain wedding band and stud earrings

Patient Interaction



As a student representing Mercy Health it is an expectation that professionalism and integrity is demonstrated at all times during interaction with patients. Students are to **introduce themselves and identify** their qualification (student and level of involvement in care provided). It should be made clear with patients that they have the opportunity to decline the involvement of student participation.

Occupational Health and Safety

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan – Robinson (WMH)

MercyNET resources on PROMPT:

- **Work Health & Safety Policy**
- **WHS Safe Manual Handling Procedure**
- **Occupational Violence Policy**
- **Incident Management (non-WHS) Procedure**
- **Workplace Bullying and Employee Violence Policy**

Mercy Health is committed to ensuring the health, safety and welfare of its employees, patients, residents, clients, volunteers, contractors, visitors and others who may be affected by its operations. We aim to provide a working environment that is safe and without risks to health. Maintaining a safe working environment is everyone's responsibility and it is expected that workplace policies and procedures are fully complied with.

It is the responsibility of all staff and students to;

- Follow safe work practices and utilise appropriate equipment provided
- Ensure the implementation of safe manual handling practices and 'No Lift Policy'
- Report all accidents, hazards and other health and safety concerns to management
- Report faulty items that require repair and ensure a BEIMS has been logged into the system for the Biomedical Engineer to review
- Maintain responsibility for immediate working environment including the function of; bed rails/brakes and oxygen/suction

Manual Handling

In order to eliminate or minimise the risk of musculoskeletal disorders associated with manual handling tasks and to comply with the Occupational Health and Safety Manual Handling regulations, Mercy Health has implemented the program 'Moving @ Mercy' which is directed, promoted and supported by the Manual Handling Advisory Group for all staff.

Safe manual handling messages will be promoted across Mercy Health and include:

- Equipment available for moving and lifting is always used
- Care plans should reflect the client's mobility status accurately
- Slide sheets are used to assist with moving people in beds and chairs
- Two people are required when using a lifting machine
- Equipment must be used to reposition people who cannot do it themselves
- Safe manual handling is 80% planning and 20% doing
- A formal assessment of the patient's ability should be performed prior to undertaking any manual handling task.

Occupational Violence and Aggression (OVA)

Mercy Health is committed to ensuring a safe working environment free from occupational violence and aggression. The Mercy Health Occupational Violence Policy is our commitment by senior leaders, managers and staff to create and maintain an environment that is free from occupational violence and aggression (OVA).

Occupational Violence can be defined as any incident in which a person is abused, threatened or assaulted in circumstances arising out of, or in the course of their employment.

This includes:

- verbal, physical or psychological abuse
- threats, or intimidating behaviors, including written, telephone, or social media
- Intentional physical attack, including hitting, pinching, biting, scratching or spitting.

In the following instance it may be recommended to;

- Check the patients history for aggressive or violent behavior
- Call a planned code GREY to manage the situation prior to it escalating
- Call a code grey by dialing 2222
- Ensure you are aware of exit doors and be situationally aware
- Report all incidents through RISKMAN

Code Black and Code Grey response processes within Health Services are aligned to standards in response to occupational violence. Students should always expect to attend placement in a safe and healthy working environment however, if you are concerned about a patient's behavior you should alert your Supervising Clinical Nurse/Midwife and further discuss this with the Learning Team. All incidents involving OVA should be reported to the Clinical Placement Coordinator.

Bullying and Harassment

"Mercy Health is committed to creating a working environment where all employees are treated with dignity, courtesy and respect, consistent with the spirit of the Mercy Health Values and in accordance with the law. Mercy Health does not tolerate Workplace Bullying and Employee Violence. "Mercy Values extend to students on placement at Mercy Health whereby bullying will not be tolerated under any circumstances. If you have any concerns whilst on placement, please speak to the Nurse/Midwife in Charge, Clinical Support Nurse/Midwife and notify the Clinical Placement Coordinator.

Incident and risk management

A positive, proactive risk culture keeps patients, visitors, students and staff safe. Effective risk management is a key theme throughout the National Standards and all staff have an active role to play in identifying, monitoring and addressing risks.

An **'incident'** is an event or circumstance which could have resulted or did result in unintended or unnecessary harm to a person and/or a complaint, or perhaps loss or damage to property/buildings etc. (ACSQHC).

A **'near miss'** is an incident that did not cause harm due to timely intervention and/or luck and/or chance (ACSQHC)

It is imperative that all incidences are reported and investigated to minimize workplace risk and reoccurrence. On clinical placement students should advocate for patient safety and risk management by following procedures, working within your scope and asking questions. Students should speaking up about new or emerging risks report any hazards or incidents on RISKMAN.

RISKMAN

All staff are responsible for reporting identified incidents, near misses and dangerous occurrences in the electronic incident management system RISKMAN. If students identify near misses or dangerous occurrences, they should notify the supervising RN/RM and Associate Unit Manager. The student should also report such occurrences to the **Clinical Placement Coordinator**.

Infection Prevention

Key Contact: Clinical Placement Coordinator - Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

MercyNET resources on PROMPT:

- **Standard Precautions Procedure**
- **Transmission Based Precautions Procedure**
- **Infection Prevention and Control Policy**
- **Infection Prevention and Control Procedure**

Infection Prevention and Control is central to providing high quality health care and a safe working environment by the implementation of practices that minimise the risk of infectious agents. These practices aim to reduce the risk of transmitting hospital acquired pathogens to hospital patients, visitors and staff. Standard precautions are the basic level of infection control precautions which are to be used, as a minimum, in the care of all patients (World Health Organisation, 2007).

Mercy Health's Infection Prevention and Control program will ensure that key standards and legislative requirements are met in relation to the following key areas:

- Infection Control Precautions i.e. hand hygiene, use of Personal Protective Equipment (PPE)
- Management of infectious diseases and diseases of epidemiological significance
- Student health and safety pertaining to infection control
- Environment and Equipment
- Antimicrobial stewardship

Hand Hygiene

Effective hand hygiene is imperative in preventing health care associated infections. Students should be familiar with 'The 5 moments' of hand hygiene that has been developed by World Health Organisation and has been adopted by Hand Hygiene Australia. All students must complete the National Hand Hygiene Initiative (NHHI) package prior to placement and understand the relevant MHVL Policies and Procedures which can be accessed via PROMPT.

- National Hand Hygiene Initiative (NHHI) package must be completed annually.

Resource: <https://nhhi.southrock.com/cgi-bin-secure/Home.cgi?msecs=1588130370690>



Personal Protective Equipment (PPE) and Fit Testing

Prior to attending clinical placement at any Mercy Health site all students should be familiar with the Department of Health and Human Services (DHHS) PPE Guidelines and have watched the demonstration videos provided below. Students will receive onsite training for use of N95 masks and fit testing will be available onsite if required. Fit testing is required to be completed annually.

Please email the Clinical Placement Coordinator to arrange fit testing **prior** to clinical placement commencing

- MHW - Natalie Blinman – UndergraduatesMHW@mercy.com.au
- WMH - Madeleine Ryan-Robinson – UndergraduatesWMH@mercy.com.au

Resource:

https://www.dhhs.tas.gov.au/publichealth/tasmanian_infection_prevention_and_control_unit/healthcare_worker_education/proper_use_of_personal_protective_equipment

<https://youtu.be/X5cSieWngLM>

Infection prevention

For the safety of students, patients and staff, students are required to follow infection prevention recommendations whilst on placement at Mercy Health:

- Do not attend placement if you display cold or flu like symptoms or are 'unfit' for practice
- Notify Clinical Placement Coordinator if your health status changes
- Understand patients presentation including; infection status, alerts, risk assessments and care plans
- Comply with isolation practices when required and understand why patient is requiring these precautions
- Include invasive devices and infectious status in ISOBAR handover
- Follow precaution signs and practices according to MVPL Policies and Procedures
- Ensure immunisation status is up to date prior to attending placement
- Comply with PPE requirements (i.e. gloves, gown, goggles) with potential blood/body fluid exposures

Immunisation

Health Care Workers (HCW's) may be exposed to, and transmit, vaccine preventable diseases. Maintenance of immunity to such diseases helps prevent transmission of infection to and from HCW's and patients. The likelihood of contact with patients and / or blood or body substances determines vaccination recommendations.

The following **vaccines** are recommended/required for all students prior to the commencement of placement.

COVID_19 Vaccination	Mandatory Two doses plus booster
Hepatitis B	Course of three doses must be completed. Antibody levels checked after third dose.
Influenza	Mandatory annual vaccination by August 15th each year for all students.
Measles/Mumps/Rubella (MMR)	Booster dose recommended for all persons age 18 – 30 years.
Tetanus/Diphtheria/Pertussis	A single booster dose is recommended for all health care workers. Pertussis should be updated every 10 years.
Varicella (Chickenpox)	If no history of infection then blood test check is recommended. If no immunity demonstrated then vaccination is required.

Occupational Exposures

MercyNET resources on PROMPT:

- **Occupational Exposure to Blood Borne Pathogens Procedure**

In the event of an occupational exposure such as a needle stick/sharps injury or bodily fluid exposure to a mucosal area, the following process is to be followed immediately:

1. Inform your Supervising Nurse Midwife and Nurse/Midwife in charge of shift
2. Follow first aid principles according to Occupational Exposure to Blood Borne Pathogens Procedure accessible via PROMPT
3. Inform the Occupational Exposure Nurse/Infection Control Consultant who will collect the necessary equipment and attend the relevant work area. They will:
 - Assess the incident
 - Counsel the student
 - Counsel the source and gain consent for blood to be collected
 - Collect specimens from the student and the source
 - Ensure the supervising staff complete an on-line incident report via RISKMAN
4. Inform the Clinical Placement Coordinator: Natalie Blinman (MHW) or TBA(WMH)

Mercy Hospital for Women

Occupational Exposure Coordinator

- LANPAGE: 4747
- Write your extension number
- Write Occupational Exposure

Werribee Mercy Hospital

Infection Control Consultant

- Phone: 8754 3252

Emergency Procedures – Codes and Responses

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

MercyNET resources on PROMPT:

- **MHVL Code Blue Procedure (Adult)**
- **MHVL Paediatric Code Blue Procedure**
- **Emergency Caesarean Sections WMH Procedure**
- **Code Pink Escalation of Care Procedure**
- **MHW Code White Procedure**

The emergency code for MHW and WMH is **2222**. This line is always supervised by switchboard.

In the event of an emergency:

- Call **2222** and state the following information:
- Emergency type
- Level/Ward/Department
- Bed number
- Assist emergency as appropriate

The emergency number and codes are displayed on the back of the Student Security Card. Please familiarise yourself with these codes and responses. Students must follow the directions of the Registered Nurse /Midwife and/or staff on the ward during an emergency code

CODE TYPE	MEANING
Code Blue (state whether Adult or Paediatric)	Medical Emergency
Code Green	Immediate C/Section
Code Pink	Obstetric Emergency
Code Red	Fire/Smoke
Code Orange	Evacuation
Code Yellow	Internal Emergency
Code Brown	External Emergency
Code Purple	Bomb/Object
Code Grey	Aggressive Unarmed
Code Black	Aggressive Armed
MET Call	Acutely unwell patient
Code White	Major Hemorrhage

Medical Emergency Team (MET) Call

MercyNET resources on PROMPT:

- Medical Emergency Team Call Procedure
- Clinical Escalation of Care Policy
- Maternity Escalation of Care Procedure

The procedure enables relevant staff to provide and initiate timely, appropriate care to adult patients who are exhibiting symptoms of clinical or physiological deterioration.

If any patient you are caring for falls within the MET criteria, please notify a Registered Nurse/Midwife or the Associate Nurse/Midwife Unit Manager immediately. They will follow this process;

When the patient meets the MET call criteria a mandatory MET Call must be made by:

- Calling **2222** and stating the following information:
- MET call
- Level/Ward/Department
- Bed number
- Unit (MHW) or Team (WMH)
- Assist emergency as directed to by the Supervising Nurse/Midwife

Basic Life Support

MercyNET resources on PROMPT:

- Basic Life Support (BLS) – Adult Procedure

Students are expected to revise Basic Life Support prior to Clinical Placement. Students must follow the directions of the Clinical Team during BLS.

ANZCOR - Basic Life Support Flowchart January 2016



Quality Assurance

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

MercyNET resources on PROMPT:

- **Quality and Clinical Governance Policy**

Mercy Health has an effective clinical governance and quality system that embeds continuous improvement in the safety and quality of care we provide. National Safety and Quality Health Service Standards form part of this governance.

National Safety and Quality Health Service (NSQHS) Standards

The National Safety and Quality Health Service (NSQHS) Standards provide a nationally consistent statement of the level of care consumers can expect from health service organisations.

<https://www.safetyandquality.gov.au/standards/nsqhs-standards>



Clinical Governance Standard



[Partnering with Consumers Standard](#)



[Preventing and Controlling Healthcare-Associated Infection Standard](#)



[Medication Safety Standard](#)



[Comprehensive Care Standard](#)



[Communicating for Safety Standard](#)



[Blood Management Standard](#)



[Recognising and Responding to Acute Deterioration Standard](#)

Clinical Administration

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

Presentation to a Health Service

All individuals requiring medical/health care presenting to Mercy Health will be requested to provide the following information:

- Name
- Address
- Marital Status
- Language spoken at home (interpreter required)
- Aboriginal and/or Torres Strait Islander status
- Religion
- Occupation
- Contact persons (including Next of Kin)
- Billing details (Public or Private Patient)
 - Medicare details
 - Private Health Insurance
 - DVA
 - Workcover
 - TAC
- General Practitioner Details
- Referring Doctor's details

Since 1983, it has been mandatory for all health services in Victoria to ask and record the Aboriginal and Torres Strait Islander status of all clients and parents of children being cared for by the health service. This information is provided on a voluntary basis. This information assists with:

- Culturally relevant information and care
- Planning, referral and support
- Early detection of illness
- Measuring equity
- Allocate health budgets
- Closing the Gap

Please view the following links produced by VACCHO in collaboration with Mungabareena Aboriginal Cooperative and Rumbalara Aboriginal Cooperative about quality improvement of recording of Aboriginal and Torres Strait Islander status.

<https://www.youtube.com/watch?v=vRDIOUOLlcg&feature=youtu.be>

<https://www.youtube.com/watch?v=P110TACQJZs&feature=youtu.be>

Handover

MercyNET resources on PROMPT:

- **Clinical Handover Procedure**
- **Clinical Handover- Bedside Procedure**

The purpose of clinical handover is to ensure there is a consistent approach that is timely, relevant and a structured process that supports the delivery of safe patient care across Mercy Health sites. This includes the transition of patient care between clinicians, departments and external services inclusive of admission, referral and discharge.

Definition of Clinical handover: “The transfer of professional responsibility and accountability for some or all aspects of care for a patient, or group of patients, to another person or professional group on a temporary or permanent basis”. (NSW ACI 2013).

Using ISBAR, as the tool for clinical handover, students are to handover patient care within their current scope of practice. This includes all episodes where care provided is changed. Please hand over your allocated patients to the Supervising Nurse/Midwife prior to going on meal breaks to ensure care provision is continued in your absence.

Bedside Handover - ISBAR

I	Identify	Identify all staff present for the shift Identify clinical lead for the handover process Identify patient and the presence or inclusion of a carer
S	Situation	Diagnosis Current clinical status – stable or unstable Current problems, evaluation and management to date Allergies
B	Background	Summary of background, history (past and present), Evaluation (physical examination findings, investigation findings) Current diagnosis Management to date
A	Assessment	Relevant history, results of investigations Current observations, infusions, IDC and drains, medications charts, wound dressings and pressure area care. Possible transfer or discharge Risks including falls assessment. Plan for care Clear accountability for actions
R	Recommendation	Discuss recommended plan of care Be clear about what is being requested Ensure accountability and responsibility is understood

Patient Identification



MercyNET resources on PROMPT:

- Patient Identification Procedure

Patients must have the correct wristbands on **at all times**, including a red wristband for patient alerts (always check the patient history). Please ensure the patient's details are correct and make any changes as necessary. Staff must correctly identify all patients whenever care is provided and correctly match patients to their intended treatment. At every point of care you must ask a patient to tell you the following detail to confirm their identity:

- name
- date of birth
- address or UR number

Documentation

MercyNET resources on PROMPT:

- Health & Clinical Documentation Procedure

Patient medical records are held in the Nurses/Midwives Station and are accessible to all disciplines of staff. The patient's notes are kept together and must be labelled clearly with the patient's name and UR number. Students are required to read the notes of patients in their care on each shift in order to update themselves and to document the care delivered during the shift. The minimum frequency of nursing documentation should be once per shift.

Nurses/Midwives are required to document in the Progress Report in the following instances and as soon as possible after the event:

- on admission
- prior to transfer
- on discharge
- following any procedures
- any variance in patient's condition

All entries should include:

- Date and time for each entry
- Legible writing
- Objective wording
- Include changes in patient care with a plan of treatment outline
- Signed with name, designation (Student Nurse/Midwife) and signature
- All entries must be read and counter-signed by Registered Nurse/Midwife

Medication Administration

MercyNET resources on PROMPT:

- **Labelling of Injectable Medicines**
- **Fluids and Lines**
- **Medication Administration Procedure**

Undergraduate students administering medications **must be supervised by a Registered Nurse/Midwife**. Schedule 8 drugs and injectables require checking by two RNs/RMs and the student. Both the undergraduate student and the supervising Registered Nurse/Midwife must initial and sign the medication chart for the medication given. It is expected that students have a thorough knowledge of the medication prior to administration.

7 Rights of Medication Safety

- Right Patient
- Right Drug
- Right Dose
- Right Route
- Right Time
- Right Documentation
- Right Reason

Informational and Communications Technology

Key Contact: Clinical Placement Coordinators: Natalie Blinman (MHW) or Madeleine Ryan-Robinson (WMH)

MercyNET resources on PROMPT:

- **Information Systems and Services Policy**

Mercy Health welcomes the use of point of care access by students under supervision.

The Supervising Nurse/Midwife will demonstrate how to access the following in the clinical environment:

Student Placement Evaluation Survey

Your experience at Mercy Health matters. We would really appreciate your feedback via the online survey at the end of your placement. We will remind you prior to the end of your placement. Please scan this QR code with your phone camera:



Social Media Policy

MercyNET resources on PROMPT:

- Social Media Policy

‘Social media’ describes the online and mobile tools that people use to share opinions, information, experiences, images, and video or audio clips and includes websites and applications used for social networking. Common sources of social media include, but are not limited to, social networking sites such as Facebook and LinkedIn, blogs (personal, professional and those published anonymously), WOMO, True Local and microblogs such as Twitter, content-sharing websites such as YouTube and Instagram, and discussion forums and message boards.

Student obligations in relation to Social Media

In using social media, just as with all aspects of professional behavior, health practitioners should be aware of their obligations under the National Law, their Board’s *Code of conduct*, the *Advertising guidelines* and other relevant legislation, such as privacy legislation. <http://www.ahpra.gov.au/News/2014-02-13-revised-guidelines-code-and-policy.aspx>

1. Professional obligations

The *Code of Conduct* contains guidance about the required standards of professional behavior, which apply to registered health practitioners whether they are interacting in person or online. The *Code of Conduct* also articulates standards of professional conduct in relation to privacy and confidentiality of patient information, including when using social media. For example, posting unauthorised photographs of patients in any medium is a breach of the patient’s privacy and confidentiality, including on a personal Facebook site or group even if the privacy settings are set at the highest setting (such as for a closed, ‘invisible’ group).

2. Obligations in relation to advertising

Section 133 of the National Law imposes limits on how health services delivered by registered health practitioners can be advertised. These limits apply to all forms of advertising, including through social media and on the internet. For example, the National Law prohibits the use of testimonials in advertising. The *Advertising guidelines* provide guidance about how the legal restrictions on advertising under the National Law and other relevant legislation apply to social media.

General principles from **MHVL’s** Social Media policy include;

- Individuals must not publish or discuss any patient/resident/client information, conversations or information that is in breach of the Health Records Act or Privacy Policy.
- Individuals should respect copyright laws and fair use of copyrighted material and attribute work to the original author/source wherever possible.
- Individuals must not post material that is offensive, obscene, defamatory, threatening, harassing, bullying, discriminatory, hateful, racist, and sexist, and those which infringe copyright or is otherwise unlawful.
- Individuals must not imply that they are authorised to speak as a representative of Mercy Health or give the impression that their views are those of Mercy Health.
- Individuals must not use Mercy Health’s branding on non-Mercy Health sites.
- Individuals must not use or disclose any confidential information obtained in their capacity as a student.

Privacy and Confidentiality

MercyNET resources on PROMPT:

- **Privacy**

Policy Resource:

The Health Records Act 2001 can be accessed at <http://www.health.vic.gov.au/hsc/legislation.htm>

MHVL is committed to ensuring it complies with relevant privacy, confidentiality and security legislation to protect our patients, staff and organization. Students on clinical placement at MHVL must comply with *The Health Records Act 2001* (the Act), which is a framework developed in order to protect the privacy of individuals' health information. Students undertaking placement with MHVL should read and understand relevant policies and procedures within 7 days of commencing placement.

Examples of breaches:

Accessing information that you do not need to know to perform your role:

- Unauthorised reading of a patient's medical record or an employee or student file
- Random searching of MHVL for familiar names and details, such as phone numbers
- Accessing information on self, family, friends, co-workers, colleagues, or fellow students
- Reading pathology results of self, family, friends, co-workers, colleagues, or fellow students

Divulging personal information without the individual's consent:

- Discussing patient details in situations unrelated to direct patient care
- Conducting a conversation relating to patient, student or staff information in a public place
- Telling a relative or friend about a patient, student or staff member you have seen
- Discussing confidential information in a public area such as a waiting room, public corridor or dining room

Sharing, copying or changing information without proper authorisation:

- Making unauthorised changes to a patient's medical record
- Making unauthorised changes to an employee or student file
- Copying and forwarding patient, student or staff information to a third party without having verbal or written consent

Sharing your password:

- Telling a co-worker, colleague, fellow student your password so that they can access your work
- Telling an unauthorised person the access codes for employee/student files or patient accounts
- Using unauthorised shared passwords

Using another person's password:

- Using a co-worker's/colleague's/classmate's password to log in to the MPH computer system
- Unauthorised use of a password to access employee/student files or patient accounts
- Using a co-worker's/student's application for which you do not have rights after they have logged in

Disclosing patient information without following Mercy Hospitals Victoria Ltd guidelines:

- Faxing without including an appropriate fax cover sheet that includes a disclaimer
- Sending information to home computers via email

Leaving a secure information system (i.e. system that is password protected) unattended while logged on:

- Being away from your desk (e.g. tea or lunch breaks) while you are logged into a secure system

