

### Important Information

**Name of placement:** Holywell Ward

**Directorate:** Surgical

**Direct Telephone Numbers:** 01246 512383 / 512384

**Shift Patterns:** Mornings 07:00-14:30 Afternoons 13:30-21:00

Middle Shift 11:30-19:00

### Important Email addresses:

**Matron**

Claire Bond – [clairebond2@nhs.net](mailto:clairebond2@nhs.net)

**Sister**

Karen Stevenson – [Karen.stevenson5@nhs.net](mailto:Karen.stevenson5@nhs.net)

Caroline Wilson – [cwilson31@nhs.net](mailto:cwilson31@nhs.net)

Jeniffa Swann – [jeniffaswann@nhs.net](mailto:jeniffaswann@nhs.net)

**Learning Environment Managers (LEM)**

Shelley Butler – [shelleybutler1@nhs.net](mailto:shelleybutler1@nhs.net)

Jeniffa Swann – [jeniffaswann@nhs.net](mailto:jeniffaswann@nhs.net)

### Holywell Ward Staff

**Matron**

Claire Bond

**Sister**

Karen Stevenson

Caroline Wilson

Jeniffa Swann

**Staff Nurses**

Shelley Butler Bonnie Richards

Natalie Garnett Katie Dring

Nicky Payne Fiona Bralsford

Rachel Marklew Lorraine Brooks

John Walker Diana Booth

Rebecca Hammill Kathryn Hazlehurst

**Health Care Assistants**

Denise Wilkes Sarah Bradshaw

Lois Stirland Raine Lee

Kay Fenwick Donna Rawson

**House Keeper Receptionist**

Julie Frost Louise Nicholson

Sharn Jones Rachel Elliott

**Holywell Ward Link Nurses**

|  |  |
| --- | --- |
| **Name** | **Link/Role** |
| Shelley Butler Jeniffa Swann | Learning Environment Manager  (LEM) |
| Natalie Garnett | Pressure Ulcer Prevention Champion |
| Donna Rawson | Key Movers |
| Bonnie Richards | Infection Control Champions |
| Lois Stirland | Dementia Champion |
| Nicky Payne | Health Promotion  Drug and Alcohol Liasion |
| Lois Stirland | Privacy and Dignity & Learning Disability Champions |
| Rachel Marklew | Blood Glucose and Pregnancy Machine Monitor |
|  | Autism Champion |

Holywell Day Surgery Suite Philosophy of Care

# The staff in the day surgery suite are highly motivated individuals who will endeavor to support students and learners whilst respecting the patient’s dignity and individual needs at all times.

Staff will keep the patient up to date with their care on the day of surgery and ensure that all relevant information is given to the patient prior to their discharge home or transfer to another inpatient ward.

## What We Expect From Students

To be punctual, honest and reliable.

To be dressed appropriately as per hospital dress code.

To treat all patients with dignity and respect.

To treat all patients in a non-discriminative manner respecting their individual beliefs.

To become a valued member of the team.

To maintain patient confidentiality.

To participate and promote health and safety whilst in the workplace.

To become actively involved in reporting incidents using the designated electronic system whenever required to do so.

To provide a high standard of holistic care considering the patients physical, psychological, emotional and spiritual needs.

Be responsible for identifying learning opportunities and strive to make the most of these.

To research and read around key elements related to day surgery (see suggested list of key areas to read about in preparation for your placement and throughout).

## Procedures that you may be involved in and patients you may care for on Holywell Day Unit

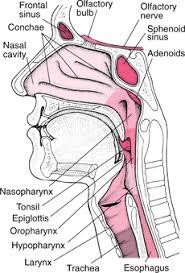
#### Ophthalmic surgery



* Phacoemulsification and Ozurdex Injection
* Plastic surgery of the eye area

#### ENT and Maxillofacial surgery

* Grommet insertion
* Septoplasty



* Sub-Mucosal diathermy
* Nasal polypectomy
* FESS-Functional endoscopic sinus surgery
* Coloblation and Paltoplasty
* Teeth extraction
* Oesophagoscopy
* Oesophageal Dilation
* Laryngoscopy
* Tonsillectomy

#### Orthopaedic Surgery

* Shoulder arthroscopy
* SLAP repair of shoulder (Superior Labrum Anterior to Posterior)
* Carpel Tunnel
* Cubital Tunnel elbow
* Trapezectomy



* Dupytrons Contractor
* Removal of Ganglions (hands and feet)
* Knee Arthroscopy
* Anterior Cruciate Ligament repair
* Manipulation of knee
* Chondroplasty
* Ankle arthroscopy
* Removal of metalwork from limbs
* Bunion repair
* Toe amputation
* Toe straightening
* Toe Nail removal

#### Pain Management

* Facet Joint/Sacroiliac Joint injections



* Nerve root injections
* Epidurals
* Amantadine infusions
* Diagnostic Modal Branch injection
* Radiofrequency ablation neurotomy

**General Surgery**

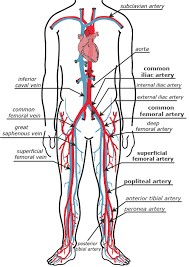


#### Vascular

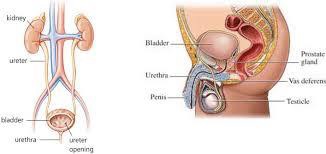
* Angiogram
* Varicose Vein Stripping
* Vena Cava filter removal

#### Breast Surgery

* + Sentinel Node biopsy
  + Wide local excision
  + Mastectomy
  + Nipple reconstruction
  + Lipomodelling



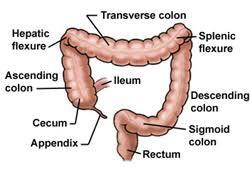
#### Urology



* Insertion of a suprapubic catheter
* Vasectomy
* Circumcision
* Testicular embulisation
* Nesbit’s Procedure
* Trans Vaginal Tape
* Frenuloplasty
* Trans Urethral Resection of Tumour
* Ureteroscopy
* Cystoscopy
* Cystodilatation

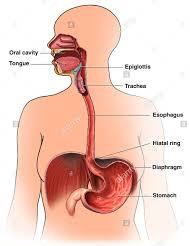
#### Colorectal

* Inguinal Hernia repairs



* Haemorrhoidectomy
* Botox
* Laying open of Fistula
* Skin tag removal

#### Upper GI



* Laparoscopic Cholecystectomy
* Umbilical Hernia repair

#### Procedures that can be requested by any speciality

* Hip aspiration and biopsy
* Trial without catheter
* Blood transfusion
* Amantadine infusions
* Lung and Liver biopsy
* Iron infusion
* Joint injections

### General Abbreviations

**OPA/OPD** Outpatients appointment/Department

**ROS** Removal of Sutures

**DN** District Nurses

**NFU** No follow up

**PON&V** Post op nausea and vomiting

**STOP** Surgical termination of Pregnancy

**IVI** Intravenous infusion

**IM** Intra-Muscular injection

**SC** Subcutaneous Injection

**PO** Oral

**PV** Per Vagina

**PR** Per Rectum

**PU’d** Passed Urine

**OPU’d** Not passed Urine

**CSM** Colour, sensation and Movement

**TTO** Tablet to take home

**CVA** Cerebral Vascular Accident (stroke)

**TIA** Trans Ischemic Attack (Mini Stroke)

**MI** Myocardial Infarction

**LMP** Last menstrual period

**BP** Blood pressure

**RR** Respiratory rate

**TPR** Temperature, pule and respirations

**P** Pulse

**CPR** Cardio Pulmonary resuscitation

**PACU** Post Anaesthetic Care Unit (recovery)

**O2** Oxygen

**SATS** Oxygen saturations

**NWB** Non-weight bears

**FWB** Full weight bears

**PWB** Partial weight bears

**MED 3** Fitness for work form/Sick note

**EUA** Examination under anaesthetic

**IDDM** Insulin dependent Diabetic

**NIDDM** Non-Insulin dependent Diabetic

**WLR** Waiting list repeat

**RC** Routine clinic

**ROM** Range of movement

**DVT** Deep vein thrombosis

**VTE** Venous Thromboembolism

**WLE** Wide local excision

**SNB** Sentinel Node biopsy

**VV** Varicose Veins

**CTR** Carpal Tunnel repair

**LIH** Left Inguinal Hernia repair

**RIH** Right Inguinal Hernia repair

**TURT** Trans Urethral Resection Tumour

**PHARCO** Phacoemulsification (Cataract surgery)

**EPI** Epidural

**CIRC** Circumcision

**VAS** Vasectomy

**TWOC** Trial without catheter

**FESS** Functional Endoscopic Sinus surgery

**GA** General Anaesthetic

**LA** Local Anaesthetic

**SED** Sedation

**NEWS** National Early Warning Score

If there are any more you come across, then please list them below: -

### Opportunities

During your placement we will endeavor to offer you the following:

-Support you in prioritizing and managing a group of patients care from admission to discharge.

-We will arrange for you to work within our cataract theatre and care for patients and observe different types of eye surgery.

-Support you to become competent and confident in completing the necessary documentation specific to day surgery.

-To become aware of both pre and post op complications.

-Learn to recover patients from different types of anaesthetic including, general anaesthetic, local anaesthetic, spinals.

-Follow a patient through from admission to discharge observing their operation in main theatres.

-Become competent in using the bleep system.

### Suggested Reading Material

Benefits of Day Surgery Nurse Led Discharge Criteria

Different types of anaesthetics Pre-operative starvation

Pain Management Premedication Drugs

Consciousness/Emesis and Pain assessment scale Postoperative complications

Common types of Day Surgical Procedures Consent to treatment Marking Verification

### Evaluation of Mentorship - Holywell Ward

Holywell ward staff regard supporting students as an extremely important role for both the students and the nurses future practice and development. As well as students being required to meet their learning outcomes to progress throughout their course, it is also vital that mentors are also monitored and reviewed regularly to be deemed fit for mentoring in clinical practice. As a result of this, students are asked if they would produce an evaluation of their mentor's performance throughout their placement. This evaluation will be clear and concise, and will be set out to meet their triennial review criteria. It is requested that your comments be honest and constructive criticism is welcomed. In doing this, it will enable us as a ward and learning environment to identify areas for development and improvement for future students.

#### Evaluation of Mentorship Holywell Ward

**Name of mentor………………………………………………………………**

|  |  |  |  |
| --- | --- | --- | --- |
| A welcome letter and pack was received prior, or during your first week of placement. | Yes | No | NMC STANDARDS 1, 2, 5 |
| Were you shown how to access the ward policies and resources? |  |  | NMC STANDARDS 1,2,3,4,5,6,7,8 |
| Were you asked about your previous experience, knowledge and skills? |  |  | NMC STANDARDS 1,2 8 |
| Were you provided with relevant opportunities to meet your learning outcomes? |  |  | NMC STANDARDS 1,2,3,4,8 |
| Did you receive your supernumerary status within practice and was this maintained? |  |  | NMC STANDARDS 2,5,8 |
| Were your questions welcomed and appropriate answers given? |  |  | NMC STANDARDS 1,6,7,8 |
| Were you welcomed and respected as a team member whilst on your placement? |  |  | NMC STANDARDS 1,2,3,5,7 |
| Did you receive your interviews at the appropriate times? |  |  | NMC STANDARDS 1,2,3 |
| Did you receive regular feedback either written/verbal on your personal progress from your mentor? |  |  | NMC STANDARDS 1,3,4,5,8 |

|  |  |  |  |
| --- | --- | --- | --- |
| Did your mentor demonstrate a knowledge and understanding of the university documentation? | Yes | No | NMC STANDARDS 1,2 |
| Was your off duty designed to reflect your mentors working pattern, adhering to the minimum 40% of time on your placement. |  |  | NMC STANDARDS 1,2,3 |
| Were you given the opportunity to participate in teaching/supporting others in practice? |  |  | NMC STANDARDS 1,2,5,6,8 |
| Did your mentor encourage you to ask questions and rationalize your answers? |  |  | NMC STANDARDS 1,6,7,8 |
| Overall, did you feel well supported by your mentor for the duration of your placement? |  |  | NMC STANDARDS 1,2,3,5,7,8 |

Overall Comments

Thank you for your support and feedback. Please give this completed evaluation to the LEM.