Materials in this book are reproduced under section 40 (1A) of the Copyright Amendment Act 1980 (Cth) for the purposes of student assessment for students enrolled in this unit.


Revised December 2015; June 2016; Oct 2016; Dec 2017
# Table of Contents

Welcome .......................................................................................................................... 3

Charles Darwin University Contact list 2017 ............................................................. 4

Overview of Clinical Placement .................................................................................. 5

Overview of the Simulation Block .............................................................................. 6

Pre-Clinical Documentation Requirements .................................................................. 8

Clinical Placement ....................................................................................................... 10

Responsibility of Student, University and Health Facility ........................................ 12

Overview of assessment ............................................................................................. 14

Submission of assessment ......................................................................................... 15

Scope of Practice .......................................................................................................... 16

Code of Conduct .......................................................................................................... 17

Insurance .................................................................................................................... 18

Work Health and Safety ............................................................................................... 19

Dress requirements ...................................................................................................... 23

Medication Administration .......................................................................................... 24

Attendance and rosters ............................................................................................... 26

Absences ....................................................................................................................... 27

Supervision of Placement ............................................................................................ 30

Problems on Placement ............................................................................................... 31

Access and Disability .................................................................................................. 33

Student Registration .................................................................................................... 36

Frequently Asked Questions ....................................................................................... 38-41

Appendix A
Scope of Practice Table for CDU Bachelor of Nursing Students 2015 ....................... 42-43

Appendix B
Flow Chart for Clinical Placement Units ...................................................................... 44

Appendix C
Simulation Block Progression into Clinical Placement Units ..................................... 45

Appendix D
Clinical Communication skills feedback ...................................................................... 46

Appendix E
Accident, incident form .............................................................................................. 48

Appendix F
Student Uniform Document ......................................................................................... 55

Appendix G NMBA National Standards for Practice for the Registered Nurse .......... 56

Bachelor of Nursing Student Resource Manual 2018
Welcome

Welcome to the clinical placement component of the Charles Darwin University (CDU) Bachelor of Nursing Program.

This manual is essential reading. It sets out the general requirements for the Simulation Blocks and clinical placements that students must abide by in order to successfully complete the course.

The clinical placement units are core units in the Bachelor of Nursing degree. Many students report that their clinical practice units are the most challenging yet, the most rewarding component of the course. It is during this time that you can contextualise the clinical skills learnt in the Simulation Blocks and integrate the knowledge obtained in the theory units to the practice setting. By taking time to read and understand this manual, we hope that you will be able to engage fully in your placement to maximise your learning opportunities.

The success of clinical placement is a result of collaborative efforts by the clinical staff in our Health Facility, academic staff, the Placement Office and you, the student.

At CDU, Bachelor of Nursing students are required to complete clinical placements of varying length from two to four weeks, following a compulsory one week Simulation Block for each year level. Essential clinical skills are modelled and practised in the Simulation Block (SB) and will provide an introduction to the skills you need whilst on placement.

This manual provides important information and frequently asked questions for CDU nursing students who are about to undertake, or are already undertaking clinical placements.

Again, welcome to the clinical placement component of your degree, we hope it will be a rewarding and positive experience.

This manual is current at the date of publication and is updated each year. If you see an omission or error, it would be greatly appreciated if you would advise via clinicaleducation@cdu.edu.au or clinicalcoordination@cdu.edu.au to ensure correction for the following year’s edition.
Charles Darwin University Contact list for 2018

EMERGENCY AFTER HOURS CONTACT NUMBER 0429 490 022

| Placement Office: | CDU switch board 08 8946 6666  
|                  | Ask for Bachelor of Nursing Placement Officer for relevant state or territory.  
|                  | Email: nurplac@cdu.edu.au |

| Director Clinical Education: | Email: clinicaleducation@cdu.edu.au |

| Clinical Coordinator: | Email: clinicalcoordination@cdu.edu.au |

| Pre Clinical Coordinator: | Email: Preclinical@cdu.edu.au |

| NUR125 Unit Coordinator: | Email: nur125unitcoord@cdu.edu.au |

| NUR244 Unit Coordinator: | Email: nur244unitcoord@cdu.edu.au |

| NUR343 Unit Coordinator: | Email: nur343unitcoord@cdu.edu.au |

| NUR344 Unit Coordinator: | Email: nur344unitcoord@cdu.edu.au |

| NUR346 Unit Coordinator: | Email: nur346unitcoord@cdu.edu.au |
Overview of Clinical Placement

A clinical placement is defined as an authorised block of time (hours) in which students attend a clinical setting for a structured clinical experience as part of a specific unit. The unit information, set out on the Learnline site, describes the purpose and assessments associated with each clinical placement. Many students report this as the most rewarding and challenging part of the degree. CDU is very proud of its placement program and CDU endeavours to ensure students have a positive learning experience while on placement. There are however, a number of policies and requirements that must be addressed prior to attending practicum. This manual is designed to help students familiarise themselves with the requirements needed to maintain the student and the public’s safety while the student is in the clinical field.

There are five clinical placement units in the Bachelor of Nursing (Pre-registration) program that require specific clinical placements. These are outlined below.

Summary of clinical placement units

<table>
<thead>
<tr>
<th>Title of Clinical Placement Unit</th>
<th>Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUR125: Nursing Practice 1</td>
<td>Theory 40 hours simulation block (SB) 160 hours clinical placement in sub-acute setting</td>
</tr>
<tr>
<td>NUR244: Nursing Practice 2</td>
<td>Theory 40 hours simulation block (SB) 160 hours clinical placement in an acute setting</td>
</tr>
<tr>
<td>NUR343: Nursing Practice 3</td>
<td>Theory 40 hours simulation block (SB) 160 hours clinical placement in an acute setting 80 hours in mental health setting</td>
</tr>
<tr>
<td>NUR344: Nursing Practice 4</td>
<td>Theory 160 hours clinical community setting</td>
</tr>
<tr>
<td>NUR346: Transition to Practice 2</td>
<td>Theory 160 hours clinical placement in a primary, secondary or tertiary setting</td>
</tr>
</tbody>
</table>

Students are required to nominate and enrol in these units using the processes at [http://www.cdu.edu.au/health/undergraduate-nursing](http://www.cdu.edu.au/health/undergraduate-nursing) Students cannot attend a SB or placement unless this process is followed correctly.

Prior to attending practicum the student must

- Be enrolled in a clinical unit of study;
- Meet all pre-clinical requirements;
- Attend the 5 day simulation block (SB) prior to 1st year, 2nd year and 3rd year placements and successfully meet all SB assessment requirements;
- 1st, 2nd and 3rd year students must successfully complete an online medication test.
Overview of Simulation Blocks

Please read the requirements for the clinical placement unit carefully. Students will find further information about assessment and requirements on the Learnline site for the unit. Simulation block (SB) is an integral component of three clinical units: NUR125, NUR244, and NUR343. Attending placement for NUR346 and NUR344 is dependent on successful completion of the NUR343 SB. The three annual Simulation Blocks (SBs) are mandatory and must be successfully completed prior to students attending clinical placements.

A SB is a five day intensive program which provides students with an opportunity to practice specific nursing interventions; integrate theory into practice and develop an understanding of the requirements of professional nursing practice according to the NMBA RN Standards for Practice (2016). It is also a great opportunity for students to meet each other, form friendships and study groups and meet the lecturers who teach in the SB.

Appendix A outlines the Scope of Practice for 1st, 2nd and 3rd year CDU nursing students. Students will become very familiar with this table throughout the degree. It is an essential guide to student practice and expectations. This table is linked directly to the core theory units at CDU and the clinical skills which will be taught and assessed in the SB. Students may perform nursing interventions in a clinical setting only when the linked theory has been assessed and the student has had the opportunity to perform that skill in a SB.

Allocation of Simulation Block
The directions for enrolling in a clinical placement unit, nominating for attendance at a Simulation Block, and also requesting a clinical placement are located at the School of Health clinical practicum web page. Students must closely follow the processes set out on this web page http://www.cdu.edu.au/health/undergraduate-nursing

The Unit Coordinator will not accept unauthorised attendance at the SB or clinical placement as part of unit assessment. Unauthorised attendance may lead a Fail grade. Unauthorised attendance may be considered to be a breach of the student misconduct by-law. Student misconduct www.cdu.edu.au/ses/student-conduct.html

Location of Simulation Blocks
SBs are held in purpose built laboratories across CDU campuses locally and interstate. The number of students per SB is limited.

Preparation prior to attending Simulation Block
Prior to attending the SB all students must access the relevant clinical unit Learnline site. On the site, students will find the essential pre-readings, expectations and assessments associated with the SB and the unit. The Discussion Board will also provide valuable information from fellow students. For 1st, 2nd and 3rd year students the medication calculations test must be completed successfully prior to SB.

It is expected that all students complete the pre-readings prior to the SB as the content of the SB (and assessments) are directly linked to the readings. Tollefson, J. & Hillman, E. (2016). Clinical psychomotor skills- Assessment tools for nursing students (6th ed.). Melbourne: Cengage Learning is required reading.

Assessment and requirements of the Simulation Block
Throughout the SB there are a variety of assessments designed to determine the student’s readiness to undertake the clinical placement. There are a number of assessment requirements students must meet in order to pass the SB, which is Pass / Fail and not graded. Students should refer to the flow chart for Simulation Block (See Appendix C); this outlines the pathway for students’ achievement/non-achievement in the SB.
1. **Medication Test:** Students in 1st, 2nd and 3rd year must successfully complete a Medication Calculations’ test (100% pass grade) in order to progress to the SB.

2. **Objective Structured Clinical Assessments (OSCAs):** These assessments are designed to assess student practice proficiency in specific nursing interventions based on the Scope of Practice for student year level and are measured against the NMBA RN Standards for Practice (2016).

3. **Attendance:** Students are required to attend the SB for the entire duration. Students must be prepared to start on time and remain until the end of each session. Less than 100% attendance may incur a Fail grade.

4. **Participation:** Students are expected to participate in all SB activities, demonstrate professional behaviour and appropriate to their year level clinical performance and critical thinking.

5. **Dress:** Students must present in uniform as per page 23 each day as the student would for clinical placement. If a student doesn’t meet the uniform dress standard the student will not be permitted to complete the SB. For additional uniform information (See Appendix F).

The student who fails to achieve the five criteria above will not successfully pass the SB and will not progress to placement. SB is a hurdle assessment and a fail grade will be awarded.

---

Students who do not have completely enclosed hard covered shoes (this does not include sandshoes/runners) will not be permitted to enter the clinical laboratory and participate in the SB. **There will be no exceptions.**

### Additional skills practice

Students who self-identify or are referred by clinical supervisors/teachers or academic staff as needing more clinical skills practice prior to placement can be booked into practice sessions by the Clinical Practice Suite Supervisor at CDU campuses with Practice Suites. These sessions will be scheduled outside the timetabled simulation blocks. An example of this is when there has been a significant delay between SB and placement.

**Process:** The relevant unit coordinator must be notified in the first instance so that suitable supervision is provided and will liaise with the Clinical Practice Supervisor and the student.
**Pre-Clinical Documentation Requirements**

All students who plan to enrol in to a clinical placement unit must meet all the documentation requirements set by CDU. This ensures compliance with State / Territory legislation and health facility, School of Health requirements. This is a strict process and tightly monitored by CDU. Students that do not complete all required pre-clinical documentation by the given deadline will not be assigned to a SB and will be unable to enrol in to a placement unit.

**Pre-clinical documentation prior to placement**

The Pre-Clinical Coordinator assists students with this process (see page 6 for contact details). Students will not attend placement unless all requirements are met. Students should not assume they meet the requirements. In some cases documentation / evidence takes some months to organise and may expire during the course. It is a student’s responsibility to ensure their documents are correct, current and provided to CDU.

All mandatory documentation is to be submitted prior to nominating for a placement unit.

Documents to be submitted and checked:

- CDU Checklist;
- CDU Student Placement Agreement;
- National Police Check; is valid for 12 months from date of issue except for VIC placements where it is required to be issued in the year of placement (within the current calendar year)
- First Aid Certificate, valid for 3 three years from date of issue;
- CPR Competency Certification - valid for 12 months from date of issue;
- State/Territory specific criminal history checks, working with children clearances and forms;
- Completed Evidence of Immunity checklist with certified copies of supporting documentation.
- Fitness to Practice Form
- Student ID card
- Hand Hygiene and Equal Opportunity Training Certificates
- Specific requirements mandated by an individual Health Facilities if CDU is notified officially of this being a requirement.

***Important points to remember***

- All documents are to be submitted as certified copies via email in PDF, by post or in person by the given deadline date;
- It is the student’s responsibility to be aware of expiry dates of all pre-clinical documents and update and forward certified copies to the Pre-clinical Coordinator prior to expiry;
• Students who conscientiously object to having immunisations or health screening are required to sign a Conscientious Objection Form. Note: Health Facilities will be advised of Conscientious Objection and may withdraw the placement;

• Clinical placements will be cancelled if students fail to meet all pre-clinical requirements, this can result in a Fail grade being awarded for that unit.

All forms and information can be located at http://www.cdu.edu.au/health/ugpreclinical-requirements

**Pre-clinical documentation requirements during clinical placement**

Students must be able to produce evidence of meeting pre-clinical documentation requirements to the health facility on request. Therefore, students must present pre-clinical documents to the appropriate health facility representative on the first day of placement.

The Health Facility has the right to suspend or cancel the placement if the student cannot produce evidence of meeting their pre-clinical requirements upon request. Students who do not bring all their preclinical documents with them on the first day of placement may be sent home and not be able to continue the placement. Students may be awarded a fail grade for the unit.

**Email**

All pre-clinical correspondence is to be directed to a central pre-clinical email address.

Preclinical@cdu.edu.au

**Pre-clinical Status**

It is a student’s responsibility to maintain the currency of their pre-clinical documentation.

To assist this process, students can access their pre-clinical status and check expiry dates by going to http://www.cdu.edu.au/health/undergraduate-nursing

Click the Pre-clinical status button and log in with the usual log in and password to view the traffic lights.

- **Green** all pre-clinical requirements met and are current.
- **Amber** not all pre-clinical requirements have been met AND/OR, not all pre-clinical requirements are current.
- **Red** no preclinical documentation has been submitted.

If documentation has been submitted and the status has not been adjusted within two weeks, please contact the Pre-clinical Coordinator at Preclinical@cdu.edu.au
Clinical Placement

Organisation of Clinical Placement
Several processes are involved in the organisation of clinical placements. Administrative processes are managed by the Placement Office. Academic processes are managed by the clinical Unit Coordinators in consultation with the Director of Clinical Education, Clinical Coordinator and the Bachelor of Nursing Program Manager. The Placement Office and the academic team work together very closely to ensure students have a quality clinical experience.

Placement Office
The Placement Office is responsible for all administrative aspects of arranging clinical placements. The role of the Placement Office is to negotiate and arrange clinical placements for students in their allocated states, liaise with health facilities, and act as a first point of contact for students and health facilities for administrative matters and maintain the practice agreements between health facilities and CDU.

It is important to understand that the Placement Officers are the only people authorised to negotiate clinical placements. Students must always contact the Placement Office to request to arrange or modify a placement. Preceptors, academic staff, Clinical supervisors/teachers and Nurse Unit Managers organise placements through the Placement Office. A clinical placement is not confirmed until the Placement Office provides the student and the health facility with a confirmation notice.

Any change to a clinical placement requires written confirmation by the Placement Office (See section page 28 for information on requests to change rosters or placement timing).

Note: Placement Officers are not academic staff and therefore questions about assessment requirements or problems on placement must be directed to the Unit Coordinator.

Students are not permitted to arrange their own placements (or make up shifts). If a health facility offers a student (as an employee) a placement, the student should thank them, seek a contact name and email address and provide this to their Placement Officer to follow up.

Academic Clinical Team
Unit (Subject) Coordinator: This is the academic staff member who has responsibility for the delivery quality and assessment of specific units. This is the first point of call for queries about the academic objectives for a clinical placement, assessment, general placement questions and feedback. Contact details can be found on the relevant Learnline site.

Clinical Coordinator: The academic staff member and contact person for problems which cannot be resolved at a health facility level, or resolved with the Unit Coordinator and delegate for the unit coordinator in their absence.

Director of Clinical Education: The academic staff member responsible for the overall direction and management of the clinical component of the course and the strategic management of the placement program at CDU. Contact person if the Clinical Coordinator unavailable. Issues not resolved at the Clinical coordination level are escalated to the Director of Clinical Education.

Bachelor of Nursing Program Coordinator: The academic staff member who has responsibility for the coordination of the Bachelor of Nursing degree.
Allocation and Acceptance of Clinical Placement

Many resources are directed towards sourcing high quality clinical placements for students. All students are allocated clinical placements by the Placement Officer who manages a specified State or Territory. Clinical placements are sought to meet the learning objectives of the unit of study and year level. Students are expected to attend the negotiated clinical placement. If a student is unable to attend an organised placement, the student must follow the procedure outlined in the Extenuating Circumstances Guidelines, available on the CDU website at, (http://www.cdu.edu.au/health/undergraduate-nursing) and provide evidence as to why they are refusing the placement. Non-acceptance of a placement (or failure to attend the placement) may result in a Fail grade.

Students are notified by email approximately four weeks prior (CDU’s official channel of communication) of the details of the clinical placement and when/how the student is to contact the health facility prior to placement. Students are reminded they must ensure they regularly check their student email account.

All students have been informed they may have to travel outside their home state in order to complete placement units. This is clearly outlined in the Terms and Conditions of Enrolment. More information about enrolment conditions can be found at:


If a practicum or placement unit is not completed within the semester of enrolment a Practicum Ongoing (PO) grade can be awarded. This grade is applicable for two (2) admission periods to allow a placement opportunity to be sourced. Placements may be arranged outside of semester dates. The length of the course may be extended due to an inability to source placements within the course timeframe. Students can assist the process by ensuring that they have current pre-clinical documents at all times and update these as required, must be prepared to travel and consider requesting third year placements in less popular facilities.

If a placement opportunity is declined prior to the end of this time and a grade therefore not awarded by the Faculty the PO grade will automatically convert to a Fail (F) grade unless the PVC EHSE approves in writing an extension of the PO grade. Extensions may be granted when the Placement Office is unable to secure a placement for the student.

The assessment rules regarding all grades is located at;


Any refusal of a negotiated placement is likely to result in protracted delays to secure further placement. This may jeopardise planned progression and hence extend the length of the course. CDU does not accept liability for students who delay or refuse a placement.

Failure to submit required pre-clinical documentation does not meet the criteria for provision of a PO grade.

Refusal of a negotiated placement does not meet the criteria for provision of a PO grade. Please refer to the Extenuating Circumstances Guidelines that can be located on the CDU Undergraduate Nursing webpage http://www.cdu.edu.au/health/undergraduate-nursing

A student cannot apply for an intermission from the Bachelor of Nursing while they have a PO grade for a placement unit. Intermissions from this degree will not be approved until the PO grade has been finalised.

If no placement is undertaken and it is been up to 12 month since the student attended a simulation block the student must attend another simulation block for the appropriate year level.
Responsibility of Student, University and Health Facility

Responsibility of the Student

- Ensure all preclinical documentation requirements are met prior to placement and ensure documents remain current during all placements;

- Read the University and Facility charters and Student Manuals;

- Familiarise themselves with all documentation, handbooks and assessments related to each unit of study.

- Recognise the purpose of the placement experience and ensure you are clear about the expectations of the placement provider;

- Explore the placement’s history, mission and location including instructions about parking, uniforms etc.;

- Comply with the CDU Code of Conduct;

- Ensure all assessment documentation for clinical placement is complete and accurate;

- Contact the placement facility and preceptor prior to starting the placement (if requested to do so in the confirmation email provided by Placement Office);

- Notify preceptor of any support needs;

- Act professionally with regard to punctuality, attitude and behaviour and display a professional image and dress according to CDU uniform policy;

- Maintain confidentiality at all times in relation to patient and Health Facility information including patient records;

- Maintain effective professional communication with patients, preceptors, and link personnel from both the Health Facility and Charles Darwin University;


Responsibility of the University

Charles Darwin University has a responsibility to ensure support is put in place for the student, and preceptor through allocated roles. Charles Darwin University will;

- Ensure Practice Agreements are in place with the health facility providing the placement;

- Provide adequate insurance cover for students on placement;

- Organise the administrative requirements of the placement;

- Work collaboratively to support clinical staff;

- Support the health facility with regular contact via phone, in–person or via e-mail;

- Ensure a communication system is in place to deal with student issues or questions;

- Communicate any changes about the course or assessment in a timely manner to placement staff;

- Put an effective evaluation system in place to assess the student’s and facilities experiences.
Responsibility of the Health Facility

- Ensure that preceptors are prepared appropriately for the role;
- Provide a safe placement environment for the student;
- Allow time for preceptors to meet with their students to undertake and record assessment activities and outcomes;
- Perform interim and final assessments and provide regular constructive feedback to students about their progression;
- Allocate preceptors time to reflect, give feedback and keep records of student achievement;
- Ensure that preceptors have appropriate and ongoing support in practice;
- Work collaboratively with the University;
- Provide learning opportunities for students that reflect the nature of the service.
Overview of Assessment

While on clinical placement the student’s ability to meet the NMBA RN Standards for Practice (2016) is assessed. The Clinical Assessment Portfolio records these assessments and guides students and assessors through aims and objectives of the placement. Students will need to print a copy of the Clinical Assessment Portfolio prior to beginning the placement and familiarise themselves with the objectives and requirements of the placements.

The relevant sections of the Portfolio must be signed by a Registered Nurse who directly observes the student’s practice. This is usually the Preceptor, Clinical supervisor/teacher or Nurse Unit Manager. It is the responsibility of the Registered Nurse who signs the Portfolio to provide a professional judgement on the student’s current level of practice. The Registered Nurse who completes the Portfolio is responsible for providing an accurate reflection of student practice and professional behaviour throughout the entire placement. All signatures on the Portfolio must be that of a Division One Registered Nurse. Other clinical or administrative staff must not sign the Portfolio.

The Clinical supervisor/teacher or Preceptor is responsible for ensuring that any problems encountered during the clinical placement are reported to the Unit Manager and to Charles Darwin University. If Health Facility staff hold any concerns about student behaviour or documentation they must consult the Unit Coordinator.

The Clinical Assessment Portfolio is graded upon return to CDU and forms part of the overall grade assigned to the clinical unit of study. Students are reminded that each clinical unit has a number of assessments that must be completed in order to pass the unit. Passing or Failing the unit can only be determined by the Unit Coordinator. In arriving at a decision to Pass or Fail a student, the Unit Coordinator relies heavily on the judgment reported in the Clinical Assessment Portfolio by Preceptors and/or the Clinical supervisor/teacher.

***Special note on assessment and maintaining records:*** The Clinical Assessment Portfolio is the assessment document CDU uses to ensure all clinical hours are complete and the student has met all the NMBA RN Standards for Practice (2016). If the Clinical Assessment Portfolio is lost, the student will have to complete the practicum again.

Students must keep a certified copy for their own records as CDU will not return this document. When students apply for graduate positions this document is often required by the facility as part of the application.

***Special note for third year students:*** Third year students who attend a placement for NUR346 and/or NUR344 and are deemed ‘unsafe’ in their clinical practice may not be permitted to attend any further third year clinical placements until such time as the student has entered into, and successfully completed, remedial activities such as repeating the NUR343 SB. CDU has a responsibility to protect the public.
Submission of Assessment Documents

**Submission:** From semester 1 2017 the Clinical Assessment Portfolio is electronically submitted through the Assessment submission point in Learnline. Please read assessment instructions on the relevant clinical unit Learnline site about submission requirements.

**Due date:** The Clinical Assessment Portfolio is to be submitted within 10 working days of completion of the clinical placement. If the Clinical Assessment Portfolio is not submitted by the due date CDU School of Nursing policy for late submissions will apply. If unable to meet due date, request for an extension must be made to the Unit Coordinator prior to due date.

The Clinical Portfolio components must be certified prior to be submitted.

**The original clinical assessment portfolio (paper) is kept by the student but must be available for verification if required by your unit coordinator.**

**Student must make certified copies for their own records:** Graduate positions often require certified copies of clinical placement assessment documentation. Students are advised to obtain a certified copy of their portfolio signed by a justice of peace for their records and to assist in graduate applications.

Students are no longer required to submit paper versions of their clinical assessment portfolio **BUT** they must have the original paper version available if required by CDU.
Scope of Practice

Students are expected to be familiar with their Scope of Practice for each year level of study. This is based on the theory and skills taught in the SB and theory units. The table below describes the general progression by year level. Appendix A describes the details of the CDU Scope of Practice.

Expected student knowledge and skill progression through year levels

<table>
<thead>
<tr>
<th>Year Level</th>
<th>Clinical Placement</th>
<th>Progression</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st year</td>
<td>NUR125: 160 hours sub-acute setting</td>
<td>Applies knowledge and skills in Primary Health Care and basic assessment of stable well (non-complex) patients.</td>
</tr>
<tr>
<td>2nd year</td>
<td>NUR244:160 hours in medical / surgical setting</td>
<td>Applies knowledge and skills in the care of sub-acute and acute patients in general medical and surgical settings located in secondary and tertiary settings. Maintains earlier competencies.</td>
</tr>
<tr>
<td>3rd year</td>
<td>NUR343: 160 hours medical / surgical settings and 80 hours mental health setting</td>
<td>Applies knowledge, skills and clinical reasoning to the nursing care of patients with more complex needs in various acute primary, secondary and tertiary settings. Care of clients in a mental health setting. Maintains earlier competencies.</td>
</tr>
<tr>
<td></td>
<td>NUR344: 160 hours community settings</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NUR346: 160 hours in a primary, secondary or tertiary setting</td>
<td></td>
</tr>
</tbody>
</table>

By the end of third year, students are expected to be integrating all of the skills and knowledge learnt throughout the course. Whilst there are some specific skills students are not expected to achieve until third year, students must continue to demonstrate ability to perform skills achieved earlier (e.g. fundamental nursing skills such as personal care).

It is expected that at the completion of each year level students will be ready to build on their knowledge and ability. Students should progress from novice in first year, to advanced beginner by the end of third year.

Over the placement experience the student should demonstrate patterns of development and progression in skill acquisition. It is expected that when a student is presented with new or more complex activities (beginning of the placement), the student’s level of practice is initially low, increasing as they learn to demonstrate the expected behaviour and knowledge. It is expected that the student is consistent in progressing with the expected practice level of behaviour. For example first year students should undertake care with direction and supervision from others. In contrast third year students’ actions should be underpinned with sound evidence-based rationales and communicated in a coherent and accurate manner.

The Clinical Assessment Portfolio provides details of the expectations required of students for each clinical unit.
Code of Conduct

Students are required to comply at all times with the University Code of Conduct in addition to the conduct requirements of the Health Facility.

All Registered Nurses must adhere to the NMBA ‘Code of Professional Conduct for Nurses’ and ‘The Code of Ethics for Nurses’. Students should be familiar with both documents as it guides all nursing practice and helps students understand the professional and ethical responsibilities of a Registered Nurse.


While on clinical placement and at Simulation Blocks, students are required to:

- Be respectful, courteous and professional all times to colleagues, clients, Health Facility staff, CDU academic staff, administrative staff, Placement Office staff, patients, and the public;
- Follow the policies and procedures of the Health Facility; if doubt exists, consult with the preceptor and/or clinical supervisor/teacher for the purpose of interpretation of the health agency’s policies and procedures;
- Obtain an orientation to emergency and evacuation procedures;
- Practice under the supervision of clinical staff;
- Be fit for undertaking clinical practice, including maintaining own health and ensuring adequate rest;
- Practice within Scope of Practice as a student nurse;
- Be proactive in seeking out learning opportunities;
- Be punctual arriving for an allocated shift at least 15 minutes prior to its commencement and returning from meal breaks on time;
- Speak English at all times as this is the language of business;
- Wear the CDU uniform (as per page 25) and the CDU name badge above the waist in a location easily visible unless specifically directed otherwise by the Health Facility;
- Maintain confidentiality of peers, colleagues and client information at all times;
- Maintain accurate, comprehensive, objective records of nursing care given as required by the health agency;
- Inform the nurse responsible for client care in the area when leaving the area;
- Use equipment and supplies for client care in accordance with their defined purpose and the rules and regulations of the health agency;
- Respect the Mission Statement of the Health Facility;
- Report any malfunction or breakage of equipment to the Registered Nurse responsible for client care in the area;
- Facilitate client’s physical and cultural safety;
- Ensure that external work commitments do not conflict with any placements.
Insurance

Charles Darwin University has personal accident and public liability coverage which extends to cover the legal liability of students while engaged on authorised university-sponsored activities. This includes practical experience activities, provided the student is not engaged as an employee in receipt of remuneration. In assisting CDU with the provision of clinical practice experience, it is understood that the student will be under supervision at all times and practice within their Scope of Practice.

If a student is involved in an accident or sustains an injury while on clinical placement students are required to inform their Preceptor or Clinical supervisor/teacher immediately. Appropriate first aid should be provided to the student. A senior RN or Clinical supervisor/teacher should then inform the Clinical Coordinator as soon as practicable and will be forwarded a current CDU Accident and Injury reporting form (Appendix E). It is a CDU requirement that students complete this form and return it to CDU via the Clinical Coordinator. The Health Facility may be asked to supply a copy of their own accident and injury paperwork for the student’s CDU records.

Students must also comply with the accident and injury reporting guidelines and procedures of the Health Facility. If necessary the student should attend the Emergency Department or be seen by a Medical Officer.

Students are responsible for the costs involved for any accident or injury to themselves while on placement and should be treated as a member of the public when seeking medical assistance. It is important to remember students on placement are not covered by workers compensation as they are not employees of the University or the facility. The personal accident policy of the University in place for students is outlined below. Please note it does not include Medicare related expenses. For further information on CDU insurance and coverage, the student is encouraged to contact the University.

- Death/Capital Benefits
- Weekly Injury Benefits for Income Earners
- Domestic Help (Non-Income Earners)
- Home Tutorial Benefit (Full-Time Students)
- Non-Medicare Expenses - Medical expenses which are claimed in whole or part through Medicare cannot be claimed under this policy.

Students can also contact Student Administration and Equity Services for counselling and additional advice if this is needed. If urgent contact with University is needed, any of the contacts on page 6 may be contacted.

***Note:*** Students are not covered by CDU insurance when travelling to and from clinical placements.
CDU Work Health and Safety

Charles Darwin University is committed to a healthy, safe work environment, and takes seriously its obligation to provide guidelines and training in safe work practices and information on control measures for hazards in the workplace. The University recognises that success in achieving a healthy and safe environment depends on the commitment and cooperation of staff, students and other persons throughout its areas and activities.

Each member of staff and each student is responsible for carrying out the following functions to ensure their own work environment is safe and without risk to health by:

- Complying with all health and safety instructions;
- Taking action to avoid, eliminate or minimise hazards;
- Making proper use of all safety devices and personal protective equipment;
- Not wilfully placing at risk the health or safety of any person within the workplace;
- Seeking information or advice where necessary before carrying out new or unfamiliar work;
- Wearing appropriate dress for the work being carried out including, where required, protective clothing and footwear at all times while on duty;
- By consuming or storing food and drink only in those areas designated; and
- Be familiar with emergency and evacuation procedures and the location of, and if appropriately trained, the use of emergency equipment.

Immunisation and placement

In order to undertake placement a student must comply with the immunisation requirements of the University and the facility in which they are placed. Refer to the following webpages for current legislated immunisation requirements.


Conscientious objection

When a student objects to a vaccination that is a requirement of the facility, jurisdiction or University, the University will use all reasonable efforts to arrange placement. For their own and patient safety, unvaccinated health care workers will not be permitted to undertake invasive procedures or work with specific patient groups identified by health facilities.

Where the placement is a requirement to complete the degree and there is no alternative placement, the student will be counselled by the Program Manager about non-progression and inability to complete the course.

Students who have a blood borne virus

Students who are aware that they have a blood borne virus may still be able to participate in placement but they must not participate in exposure prone procedures and must adhere strictly to standard infection control procedures. Students or prospective students are not required to disclose their infection status for HIV or HCV to the University but they are encouraged to confidentially discuss their status with Pre-Clinical Coordinator or Director of Clinical Education.
**Immunisation**

The University will make immunisation requirements known to students who are expected to comply with immunisation requirements for his or her own and patient/client safety.

Students will undertake immunisation at their own cost.

The University requires students engaged in clinical activity to have Hepatitis B immunisation and serology. The Pre-Clinical Coordinator in consultation with Centre Disease Control (CDC) or through referral to CDC will provide an explanation to the students and staff of their blood borne virus status.

The University will counsel and advise students and staff members who conscientiously object to vaccination of the risks involved in non-vaccination. The University will manage the risk by not allowing unvaccinated students to undertake exposure prone procedures for their own and patient safety.

The University will actively promote measures to minimise the risk of transmission of infectious diseases through risk assessment, infection control practices/training and the promotion of immunisation and serological testing. Students are expected to adhere to standard infection control precautions.

The University will ensure that confidentiality of information is maintained and individuals with blood borne viruses. By law, laboratories and medical practitioners are required to report cases of blood borne viruses to the Centre for Disease Control. With respect to this issue, the mandatory reporting requirement does not apply to the University. Individuals who have other blood borne viruses are advised to make their status known to the Pre-Clinical Coordinator. The confidentiality of their status will be maintained in accordance with the University's Privacy Policy.

**Management of exposure to blood or body substances**

Exposure to blood or other blood or body substances may occur as a result of:

- Injuries from sharp instruments contaminated with blood or other body fluids;
- Splashes to mucous membranes from blood or other body fluids;
- Splashes to non-intact skin from blood and body fluids

As soon as practicable after exposure:

- Gently encourage bleeding if skin is not intact;
- Wash the area of contamination well with soap and water. - apply dressing if necessary;
- If the eyes have been contaminated, rinse gently but thoroughly with water or normal saline while eyes are open. Rinsing should be at least for thirty (30) seconds;
- If clothing is contaminated, remove and shower;
- If blood or other body fluids are sprayed into the mouth, spit out and then rinse out the mouth several times;
- Inform your clinical teacher or senior nurse of the incident and follow Biohazard policy of the facility seeking first aid, medical management and prophylaxis as determined by the risk of infection.
• Inform the Clinical Coordinator ClinicalCoordination@cdu.edu.au and Placement Office about the incident NurPlacCoord@cdu.edu.au

• Complete a Charles Darwin University Accident and Incident Form and the relevant documentation required by the health facility.

• Send the CDU Accident and Injury Form to the Clinical Coordinator who will complete the required section and forward to Work, Health & Safety office at CDU whs@cdu.edu.au

NB* Students are not employees of the health facility or the University as such are not covered by workers compensation and will have the same legal status as members of the public. Students remain responsible for all costs incurred arising from accident or injury in the workplace except where it can be demonstrated that the facility was negligent in its duty of care. The University insurance does not include procedures covered by Medicare. In the event of an accident or injury during Clinical Placement please contact the Placement Office, the Clinical Coordinator or CDU Work, Health & Safety for advice.

Latex exposure and allergies (Simulation Blocks)

The University, where practicable, will minimise the exposure of students to latex products. Students are required to disclose to the University as soon as practicable any known latex allergies. Students are required to have a current medical management plan and appropriate medication to manage their sensitivity.

Latex register

The University will maintain a register of products and equipment that includes their latex content. The register will be maintained by the relevant laboratory manager. The latex content of equipment and disposables is to be reviewed annually by the relevant laboratory manager and, where possible, alternative products to be utilised. Students should review fitness to practice declaration.

Procurement

The University’s relevant laboratory manager, when purchasing new products will review the latex content and latex-free products purchased where possible.

Signage

Where practicable, in simulation and science laboratories, signage will be erected to indicate ‘Latex Alert’ or ‘Low Latex’

Latex sensitivity register

A register of staff and students with latex sensitivity will be kept (Pre-clinical Coordinator) to ensure appropriate placement.

Incident response

In the event of an allergic response in a known latex sensitive individual the management plan will be followed and transport or ambulance arranged (dependent on the individual’s condition) to a medical facility for assessment and treatment.

In individuals who have no management plan they will receive first aid and transport or ambulance will be arranged (dependent on the individual’s condition) to the nearest medical facility.
Inform the Clinical Coordinator ClinicalCoordination@cdu.edu.au and Placement Office about the incident NurPlacCoord@cdu.edu.au

Complete a Charles Darwin University Accident and Incident Form http://www.cdu.edu.au/ohrs/forms/health-safety.html#Accident

Send the CDU Accident and Injury Form to the Clinical Coordinator who will complete the required section and forward to Work, Health & Safety office at CDU whs@cdu.edu.au

**Support Service**

Equity Services provides free and confidential services for students in the following areas: Counselling, Disability, Careers & Employment and Off-campus Accommodation http://www.cdu.edu.au/equity-services

An Employee Assistance Program is available to staff who require counselling http://www.cdu.edu.au/ohrs/contacts-information/health-safety.html

The Office of Leadership and Organisational Culture is available to staff and students who wish to raise any concerns regarding issues relating to the University http://www.cdu.edu.au/oloc/contactus.html
**Dress Requirements**

CDU’s dress code is designed to be practical for delivering client care, minimise potential cross infection, promoting safety for students and clients, functionality, cultural and religious sensitivity, institutional rules and expectations and regard for the image of the University. Students are required to attend clinical placement and SBs in the prescribed Charles Darwin University uniform unless otherwise advised by the Health Facility. The student uniform policy is as follows:

- Navy or black ‘dress’ trousers or knee length shorts/culottes/skirt;
- CDU nursing student polo shirt;
- Current student ID card in a holder with clip, should be visible to staff and patients;
- Fully “closed in/hard covered” shoes in black, navy or brown with sturdy strong soles;
- Shoes are to be clean and if required, polished. “sandshoes /runners, soft coverings and ballet style ” shoes are unacceptable;
- At least two pairs of ‘dress’ trousers/skirt/shorts and two polo shirts are required so as to permit laundering between shifts. Denim trousers/low cut/shorts/skirts are not acceptable. Shirts must be adequate length, no midriff or underwear showing.
- Garments are to be ironed or free of creases/wrinkles, and neat and tidy;
- Hair is to be worn off the collar, face and neck and appropriately contained/secured. If hair is long there is a risk that students will be infected by pediculi or trauma if patients grab the student’s hair;
- Facial hair must be clean shaven or a neatly trimmed beard is acceptable;
- Fingernails are to be short with no sharp edges. Long nails are a potential risk to patients’ skin integrity and an infection control risk; Likewise nail polish and /or artificial nails are not to be worn;
- No jewellery, apart from a plain, non-engraved wedding ring and stud or sleeper earrings are to be worn. Engraved rings and jewellery containing stones are a potential risk to patient skin integrity and contribute to the transmission of infection. Wrist watches are not be worn when undertaking patient care or aseptic procedures. They are an infection control risk and a potential risk to patient skin integrity;
- Students must have a watch with a second hand which can be worn away from the wrist, such as a nurse’s fob watch;
- Religious headwear, where worn, should complement uniform colour;
- Students must pay attention to their own personal hygiene and use deodorant. They should avoid the use of heavy make-up and perfume as some people are allergic or sensitive to strong perfumes;
- Please also refer to the uniform document [http://www.cdu.edu.au/health/ugpreclinical-requirements](http://www.cdu.edu.au/health/ugpreclinical-requirements)

**IMPORTANT:** Many Health Facilities have strict guidelines in relation to body piercing and coloured hair. The Health Facility retains the right to ask students to leave if the student does not meet their requirements.
Medication Administration

Medication administration is an important component of the nurse’s role. Students progressively increase their Scope of Practice in relation to medication administration based on the theory taught throughout the degree. Students must successfully complete assessments conducted by CDU prior to administering medication.

Even if a student is deemed medication competent and a qualified Enrolled Nurse, students enrolled in CDU’s Bachelor of Nursing course must not administer medications (S2, S4, S8) until they have passed the CDU drug administration and medical calculations’ test. Students can only administer medications within their Scope of Practice for the Unit in which they are enrolled. An RN must ensure that the student undertakes the 6 Rights of drug administration and directly supervise all medication administration. Students should be able to explain the pharmacokinetics and pharmacology of the drug they intend to administer.

Students are only permitted to work within their Scope of Practice for year level. Please refer to the table below which outlines what students can and cannot administer based on the unit of study the student is completing.

This table is not intended to override or be a substitute for the facility’s policies. Students must be familiar with the local policy on medication administration by student nurses. Where the policies of the facility do not allow the student to administer certain types or mode of medication the student must adhere to the lesser scope.

Medication Scope

<table>
<thead>
<tr>
<th>Year</th>
<th>MEDICATIONS THAT CAN BE ADMINISTERED BY A CDU NURSING STUDENT UNDER DIRECT RN SUPERVISION:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If portfolio title is; NUR 125= 1st year, NUR 244= 2nd year, NUR 343/349/344= 3rd year,</td>
</tr>
<tr>
<td></td>
<td>NUR 349= 4th year/ 5th year/ 6th year</td>
</tr>
<tr>
<td></td>
<td>Non-prescription topical</td>
</tr>
<tr>
<td>1</td>
<td>YES</td>
</tr>
<tr>
<td>2</td>
<td>YES</td>
</tr>
<tr>
<td>3</td>
<td>YES</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Prime lines or change bags (no additives)</th>
<th>Saline flush</th>
<th>Infusion with no additives</th>
<th>Additives, including IV AB &amp; S8</th>
<th>Parenteral or TPN</th>
<th>Blood products and blood</th>
<th>S8 bolus &amp; IV</th>
<th>PCA</th>
<th>CVC</th>
<th>P</th>
<th>I</th>
<th>L</th>
<th>C</th>
<th>Epidural</th>
<th>Telephone orders</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>YES, S2 &amp; S4 only</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES IV AB S2 &amp; S4 only</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>YES, S2 &amp; S4 only</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES</td>
<td>YES, S2, S4 &amp; S8</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Double checking of medications prior to administration

This process is an essential stage of medication administration to decrease the risk of potential harm to the patient. The process of double checking medication should be performed by 2 authorised health care professionals (Registered Nurse or Enrolled Nurse). The CDU nursing student should be a third party when checking medications.

Medications that require checking by 2 authorised health care professional (within the scope of medication administration for CDU nursing students) are as below:

- S2, S4 and S8 telephone orders
- Medication administered as an additive to an IV infusion bag, burette or syringe driver
- Medication administered by direct IV injection
- Medications administered by intramuscular or subcutaneous
- Medications given to babies and children
- Controlled drugs
- Warfarin

Any questions regarding medications administration should be referred to the Unit Coordinator.
Attendance and rosters

- Students must attend all shifts as rostered by the Health Facility. Students are required to contact the Health Facility prior to their first shift if directed to do so by the Placement Office; please check contact details with the Placement Office first. If a student is having difficulty obtaining a roster student can contact the Placement Office to advocate on behalf of the student;

- Extending shifts beyond the ordinary start and finish time for the roster will not be accepted unless authorised by the Placement Office and Unit Coordinator. Students should not work a shift in excess of 8 hours unless this is the normal shift for that workplace and it has been authorised by CDU and Health Facility staff;

- The Health Facility may roster students to weekend and night shifts where the Health Facility deems there is an appropriate level of senior supervision. Students are expected to be available throughout the duration of the allocated placement across a 7 day roster attending a variety of shifts. **Students are not permitted to request changes to rosters without permission from the Placement Office**;

  Note: NUR125 students are not generally expected to work weekends or night shifts;

  NUR244, 343, 344 & 346 students may work all shifts including night shift;

- Rosters should not exceed an average of 40 hours per week for the placement unless it has been authorised by the Health Facility and the Placement Office;

- Students must have their Clinical Assessment Portfolio while on placement. It must have the “Clinical Placement Agreement” signed prior to the first shift and be made available to the preceptoring staff;

- The required attendance for clinical placement is measured in hours. This is mandated by the nursing course accreditation requirements. False recording of hours attended is considered a professional and academic breach and students can Fail the unit;

- Clinical placement ‘hours’ only includes clinical experience and clinical debriefing sessions. While valuable, library time and doing written university work during clinical placement ‘hours’ cannot be counted as clinical time. Students are to take the same shift breaks as ordinarily provided to the preceptor. Lunch or dinner breaks are not included in the calculation of attendance hours.

  **Example:** 7:00hrs – 15:30hrs = 8.5 hours with a 30 minutes allocated to break, therefore 8 hours of placement is recorded on attendance record.

- **100% attendance is required for all shifts.** Students are required to notify both the Health Facility and the Placement Office of all absences. Please carefully read section regarding process for absences.

Clinical placements are for 40 hours per week and often include shift and weekend work. The facility students are placed in will organise student’s rosters according to the level of supervision available on the ward. CDU will not request facility rosters to accommodate students paid employment. Students must give their clinical placement shifts priority over personal employment.

For further details refer to the Hours Worked Guidelines which can be located on the CDU Undergraduate Nursing webpage [http://www.cdu.edu.au/health/undergraduate-nursing](http://www.cdu.edu.au/health/undergraduate-nursing)
Absences

To achieve a Pass Grade 100% of the clinical placement hours must be completed. Students must notify the Health Facility of absence prior to the shift commencing and the Placement Office as soon as possible. Therefore, students should identify on the first day of placement the number to call and process to follow should they be absent or late. It is their professional responsibility to inform the Health Facility if they are unable to attend a rostered shift. Failure to do so indicates that the student is not meeting the NMBA RN Standards for Practice (2016) and the CDU Code of Conduct.

Students must not put patients at risk due to illness. This is a professional responsibility so students should not attend placement if unwell. If student does not attend placement due to illness or other reason, the student must:

- Notify the Health Facility prior to shift commencing;
- Contact Placement Office as soon as possible;
- Ensure a Medical Certificate or Statutory Declaration is obtained to account for missed hours. A copy must be provided to the Placement Office and the original must be attached to Clinical Assessment Portfolio for grade to be allocated.
- The Placement Office will liaise with student and Health Facility to secure appropriate make up time.

Public Holidays

Sometimes student placements will occur when a Public Holiday is scheduled. The student must attend the placement on a public holiday if the Health Facility deems there to be adequate supervision for the student and the Health Facility is open.

If the Health Facility cannot support a student placement on a public holiday, the student must notify the Placement Office and make up time will be requested for the student following the process outlined under ‘Absences’.

Severe weather events

The personal safety of students is the primary factor in determining attendance at placement in the event of a cyclone or other severe weather event. Other factors that may prevent a student attending placement may include the following:

- Obligations in relation to closures of schools and child care centres, and/or the need to care for children at home, elderly relatives and visitors;
- Environmental factors such as local flooding;
- Issues such as cancellation of/interruption to public transport; and
- The requirement to take shelter, including the need to evacuate.

If students do not attend placement for the reasons above they must inform both the Health Facility and the Placement Office as soon as possible.

Students undertaking placement in the local Darwin area should not attend placement if the decision has been made to close CDU Casuarina and Palmerston Campuses. The student should contact the Health Facility and advise that they are under instruction not to attend placement until the University re-opens.
Students in other locations should continue their placements as required and report to staff at the Alice Springs campuses until Casuarina campus reopens. The Placement Office, prior to closing, will advise students who to contact if the need arises.

Students will need to make up any shifts missed due to the above circumstances. The CDU Placement Office will prioritise the organisation of these shifts to minimise any inconvenience to students.
Glossary of Terms

Different models of clinical supervision, support and teaching are used during clinical placement. The model selected is dependent upon factors such as the clinical context, the number of students on placement and their level of experience. The terminology used is often jurisdiction (state) specific. Charles Darwin University employed clinical supervisors are called clinical teachers. Health facility employed clinicians who work alongside students are called preceptors. Health facilities often utilise their own clinical nurse educators (CNE) to oversee student placements and support their own staff who works as preceptors.

Preceptee: A student learning within a clinical area which may be attached to a primary, secondary or tertiary agency including primary health care, community, acute, mental health, aged care.

Preceptor: A preceptor is a registered nurse, a clinician working in practice, who is prepared for the role of supervision, clinical teaching, assessment and the provision of feedback to students (Heffernan, Heffernan, Brosnan, & Brown, 2009).

Preceptorship: Preceptorship is clinical supervision model in which clinicians have a direct clinical teaching role and undertake student assessment. The role focuses on the development of clinical and professional skills as well as work-place orientation and socialisation.

Clinical supervisor/teacher: Clinical supervisors/teachers are employed by educational institutions to support, teach and assess groups of students. The clinical supervisor/teacher works in conjunction with the preceptor to support teach and assess the student.

Clinical nurse educator: The clinical nurse educator is a senior nurse employed by the health facility who acts as a role model, preceptor and or / mentor to inexperienced nurses to facilitate the development of clinical expertise and decision making in a speciality area. A component of their role may be oversight of undergraduate nursing placements. Their primary role is the professional development of the staff in their area of specialty.
Supervision of Placement

Students may encounter up to three different models of clinical supervision on clinical placements.

The Preceptor Model

This model involves supervision of one student by a Preceptor. The Preceptor is a Registered Nurse who usually works on the ward. It is common for students to have more than one Preceptor on clinical placement.

The relationship between student and Preceptor is an important aspect of the clinical placement experience. Students should remember that almost all clinical settings are stressful. The Preceptor will do their best to help reduce this stress impacting on the student’s learning experience but the needs of the patients are paramount.

The value of the clinical placement experience can be influenced by the student’s ability to negotiate a positive and constructive relationship with Preceptors and the wider health care team. This is a skill students will need to develop throughout their career.

The Professional Development Model

This model involves a more experienced clinician or nurse educator working with a number of Preceptors and students in a specific clinical area. This nurse is sometimes called a Clinical Liaison Nurse. They are able to act as a resource person and will assist students to solve problems.

The Clinical supervisor/teacher Model

The clinical supervision model involves either a CDU Lecturer or an experienced clinical supervisor/teacher contracted by CDU or the Health Facility to provide clinical supervision and oversees up to eight students at a time on placement in a Health Facility. The Clinical supervisor/teacher works with individual students and the Registered Nurses they are assigned to on each shift. It remains the responsibility of ward staff to observe and complete assessments with the student. However, Clinical supervisors/teachers are there to assist with problems that may be encountered.

At times (e.g. first-year placements) Enrolled Nurses or other professionals may provide students with direct supervision. However, students will also have a designated Registered Nurse who is accountable at all times for the conduct of student supervision. The named Registered Nurse also remains accountable for evaluating and signing the assessment documentation.

Only Registered Nurses can sign the clinical assessments. It is acceptable for the RN to evaluate the information provided by others in the assessment of student practice.

Unit Coordinators

The Unit Coordinator is a support person during placement no matter which supervision model is being utilised. If students are experiencing problems with placement they should contact the Unit Coordinator as soon as possible. Students can also make contact when placement is progressing well.
Problems on Placement

During a clinical placement a number of problems may arise. The majority of these can be resolved by a discussion between the preceptor and student and/or a phone call to CDU and/or Health Facility. Occasionally more action may need to be taken to manage the issue.

Problems that cannot be resolved between student and preceptor

In the event staff or student issues that cannot be resolved informally, the Health Facility and/or the student should contact the Unit Coordinator to discuss problems and to develop strategies to resolve the issues. When a student is identified as “at risk of Failure”, the Unit Coordinator must be contacted as soon as possible. The process on the “Flowchart for Clinical Placement Units” (Appendix B) will be initiated.

The Unit Coordinator will generally follow the process for addressing a Failure to achieve the NMBA RN Standards for Practice (2016) as follows. (Note: The information provided by Registered Nurses who have observed student practise is critical to identifying the best approach for resolution.)

The Preceptor or Clinical Supervisor provides specific and documented comment via the Clinical Assessment Portfolio (or separate report) to the Unit Coordinator. Depending on the level of identified issues the following choices are available to the Unit Coordinator:

Student Issues:

i. Further discussion with Preceptor / Educator / Supervisor/teacher and student;

   Or

At risk students:

   ii. A Learning Agreement **may** be offered to the student; this can include additional placement time, focussed support (if placement is still underway), or both;

   or

   iii. A Fail grade is issued and student removed from placement.

Additional placement time

Additional placement time will be offered when despite attempts to elicit appropriate feedback from the facility / educator / preceptor it has not been given in a timely fashion and as a consequence does not allow the student to remediate behaviour or improve identified practice deficits.

Learning Agreement

A **learning agreement** will be offered when, with focussed support, it is believed that the student can be successful on their current placement. If the student cannot successfully meet the requirements of the learning agreement in the designated time a learning agreement will not be offered and a fail grade will be awarded.

- **Flowchart information (see clinical portfolio):** A Learning Agreement is only offered if the student has been identified as having learning needs which without intervention will lead to a FAIL grade for the Clinical Placement and behaviours / practice deficits can be remediated in the remaining placement time. The decision is based on the student’s current identified inability to meet the NMBA RN Standards for Practice within their Scope of Practice for the relevant year level of study.
NB* Failure to accept and acknowledge by signing the learning agreement will result in removal from placement and a FAIL grade can be awarded

Withdrawal of placement by clinical staff

The Unit Coordinator may wish to withdraw a student from a placement in the event of unprofessional behaviour. Unprofessional behaviour includes misconduct, unethical or unsafe behaviour, or any breach of client confidentiality. Withdrawal of a placement is a last-resort process and should only occur after consultation with the Unit Coordinator. This usually does not occur without warning and before remedial actions having been implemented.

It is important to note that once the Unit Coordinator is informed of withdrawal, an information-gathering process is necessary before making any decisions about the placement. This can take a number of days.

Withdrawal of placement also occurs when the health facility notifies CDU it cannot adequately manage the placement. All Registered Nurses have a professional responsibility to assure safety and well-being of patients, staff, the student and the public. Wherever possible, consultation with the Unit Coordinator at CDU should occur prior to withdrawal.

If the situation is viewed as urgent, health facilities reserve the right to terminate placements immediately. This includes if a student presents to placement under the influence of drugs or alcohol. Sometimes withdrawing a placement is an unfortunate consequence of operational priorities and does not reflect on a student’s practice.

If placement is terminated, the student should receive a brief explanation from senior clinical staff and be asked to contact the Unit Coordinator to arrange for an initial meeting (or telephone discussion) within 24 hours if possible. The student also needs to notify the Clinical Coordinator and Placement Office as soon as practicable.

The Unit Coordinator will have a brief initial discussion with the student. Notes should be taken and these should be available to the student and then arrange for a longer appointment time with the student and Health Facility. The timing of this meeting will be organised depending on when assessment documentation from the student and the Health Facility arrives at CDU. The student will also need to provide all the clinical assessment documentation from placement. Minutes of all meetings should be recorded and made available to the student, Facility and Unit Coordinator.

Appeals against withdrawal of placement by the Health Facility

The Unit Coordinator and the Clinical Coordinator/ Director of Clinical Education and a nominated person from the Health Facility will negotiate a process for dispute resolution. This process shall be cognisant of provisions in the practice agreement between CDU and the Health Facility in addition to the CDU Assessment Rules and Principles. That is, two processes are to be satisfied:

1) the practice agreement between the Health Facility and CDU, and

2) the CDU Assessment Rules and Principles of Assessment.

The review shall occur as soon as practicable.

The outcome of this process will be reported to the Director of Nursing of the Health Facility (or equivalent), to the Director of Clinical Education, Bachelor of Nursing Program Coordinator and others as required.
Access and Disability

Fitness to Practice

The Bachelor of Nursing program prepares students to meet the criteria for registration described by the Nursing and Midwifery Board of Australia. It is a requirement of the Australia Health Practitioners Regulatory Agency (under which the CDU Bachelor of Nursing degree is accredited) to ensure that students have the physical and psychological capacity to competently perform the role of a student nurse.

CDU therefore, has a responsibility to ensure that all nursing and midwifery students are made aware of, and understand, their obligation to report any physical, psychological or other condition that might impede their ‘fitness to practice’ during clinical placements. As with all student matters, confidentiality is assured and no disclosure of information will be made outside that necessary for the administration of the student’s progress in the course. However students must note the mandatory reporting guidelines described under ‘Student Registration’ (page 37).

Students are therefore recommended to meet the following requirements:

- Students with a physical, psychological or other condition that may impact on their ability to undertake clinical placement are recommended to make a self-declaration stating the nature of the condition and what accommodations are needed for them to practise safely in a clinical venue;

- Where there is a pre-existing illness or disability such that their ability to practice is impaired, the student is recommended to advise Student Administration and Equity Services to discuss the development of a Placement Plan to support their clinical placement. Information relevant to the placement will be provided to the Unit Coordinator and the Placement Office to manage with the health facility hosting the student.

- Students that are carers for people with a disability may also apply for a Placement Plan.

Fitness to Practice Declaration

- Nursing and midwifery students, as part of their pre-clinical requirements, will be required to complete an annual Fitness to Practice Declaration which can be obtained from the School of Health webpage http://www.cdu.edu.au/health/ugpreclinical-requirements

- The Fitness to Practice Form has a Section A- (student declaration) that requires completion by the student and Section B - (treating doctor assessment) that requires completion by the student’s treating doctor. Both sections should be given to the treating doctor.

- If the aforementioned students have a known disability they are advised to register with the University Disability Service to negotiate reasonable adjustments to accommodate their disability. http://www.cdu.edu.au/equity-services/disability-services

- The University reserves the right to ask for another medical opinion of the student’s capacity to perform within the nursing or midwifery role or further evidence of fitness to practice.

- Students who make a false student declaration in Section 2 Fitness to Clinical Practice or make false declarations to their treating doctor will be removed from placement or unable to attend future placements until a review of the student conduct and fitness is undertaken. A fail grade may be awarded. The University reserves the right to ask for a second medical opinion.
Examples where further evidence may be required are: (not an exhaustive list)

Physical or mental illness:

- Disability inhibiting a student's ability to undertake clinical practice activities and assessments;
- Recent or chronic injury or injury rehabilitation;
- Stress, depression or anxiety or mental illness related problems;
- Post-operative recovery;
- Inability to meet hygiene (especially hand washing) and manual handling requirements;
- Latex or other environmental allergies;
- Neurological disorder;
- Learning disorders e.g. dyslexia, dyspraxia, dyscalculia;
- Pregnancy complications

Clinical placement activities

Clinical placement activities require cognitive ability, mobility, agility, and dexterity, physical exertion and the ability to see, hear and communicate effectively.

Examples of these requirements are listed below (not an exhaustive list):

- **Mobility**: walking, using stairs, balance
- **Agility**: e.g. bending, reaching up and kneeling down. Working above shoulder height and below knee height.
- **Dexterity**: writing, manipulation of tools and instruments. Undertaking tasks with both hands and easily alternating between hands.
- **Physical exertion**: e.g. lifting, carrying, running, walking, sitting and standing for periods of time.
- **Communication**: clear speech, comprehension of the written and spoken word, ability to hear the spoken word.
- **Vision**: 20/20 vision with corrective lenses or glasses.
- **Cognition**: ability to retain new information, to problem solve and reason effectively.

Equity Services provides free and confidential services for students in the following areas: Counselling, Disability, Careers & Employment and Off-campus Accommodation [http://www.cdu.edu.au/equity-services](http://www.cdu.edu.au/equity-services)

The Office of Leadership and Organisational Culture is available to staff and students who wish to raise any concerns regarding issues relating to the University [http://www.cdu.edu.au/oloc/contactus.html](http://www.cdu.edu.au/oloc/contactus.html)

Information obtained in relation to this Fitness to Practice Guidelines is managed in accordance with the University’s Privacy Policy [http://www.cdu.edu.au/governance/policies/pol-032.pdf](http://www.cdu.edu.au/governance/policies/pol-032.pdf)

**Pregnancy**

Pregnancy does not preclude students from attending clinical placement; however some clinical placements may be potentially harmful to the developing foetus and to the pregnant student.

Pregnant students are expected to notify the Clinical Coordinator and the Placement Office of their pregnancy if;
• Student is allocated to attend a placement in area where there may be particular health and safety issues, e.g. radiation, working with infectious disease, cytotoxic drugs and anaesthetic gases.

And / or

• Student is in the third trimester of pregnancy or within the first 8 weeks after birth.

Students who want to continue to complete practicum during third trimester (up to 32 weeks) or within the first 8 weeks of birth are required to produce a medical certificate stating the student is fit to attend nursing placement. Students must also comply with health facility guidelines and recommendations when undertaking placements if the health facility has stricter policies then CDU, these will override CDU’s above policy.

**Students with Disabilities**

CDU is committed to providing an accessible, supportive, safe, and inclusive environment for students with a disability; ensuring that prospective and current students with a disability are afforded appropriate opportunities to enter and participate fully in the life of the University; that reasonable adjustments will be made to provide access, participation, retention and success for students with a disability, including assistance to staff to help meet the students’ learning and support needs.

If a student has a disability or medical condition or is a carer for a person with a disability or medical condition that may impact on ability to undertake study, the student facilitator at Student Administration and Equity Services can be contacted to discuss developing a Placement Plan.

**Disability and Disclosure**

There is no legal obligation to disclose a disability to CDU staff unless it is likely to affect student performance and ability to meet the requirements of the course. Depending on the disability, course requirements may have an impact on student ability to undertake and fulfil the Clinical Placement and Clinical Teaching Block components of the course.

Students should also note the information provided under ‘Student Registration’ regarding mandatory reporting and the fitness to practice requirements.

**Student Administration and Equity Services**

Student Administration and Equity Services provide counselling and other support services for students. A full description of these services and contact details are at

Student Registration

Australian Health Practitioners Regulatory Agency (AHPRA)

Since March 2011 all students enrolled in an approved program of study have been registered with AHPRA. Students do not have to register themselves. This is the role of the education provider (CDU) in conjunction with AHPRA at no cost to the student.

The National Law limits the role of the National Board to:

- Register students
- Maintain a student register that is not publicly available
- Deal with notifications about students – whose health is impaired to such a degree that there may be a substantial risk of harm to the public,
- Have been charged with an offence, or have been convicted or who are found guilty of an offence punishable by 12 months imprisonment,
- Who have or may have contravened a condition of the student's registration or an undertaking given by students to the AHPRA.

Students are strongly advised to review the Student Registration page of the AHPRA website and the Fact Sheet and FAQ sheet as this answers many commonly asked questions.


A student register kept by a National Board must include the following information for each student whose name is included in the register;

Under the National Law, information about students will be entered on the Student Register. This information is not published online and is not publicly available. The information AHPRA requests education providers to provide include:

- name of Education Provider
- student’s name
- student ID number
- student’s date of birth
- student’s sex
- student’s mailing address in Australia and email details
- name of the approved program of study or clinical training being undertaken by the student
- the date on which the student started the approved program of study or clinical training
- the date on which the student is expected to complete the approved program of study or clinical training
- for students that have completed or otherwise ceased to be enrolled in the approved program of study or clinical training, the date of the completion or cessation, and
- the reason why the student completed or otherwise ceased to be enrolled in the approved program of study or clinical training.

No fee applies to student registration
When a student ceases to be a student of the CDU program, CDU must notify AHPRA and the registration will be suspended.

**Mandatory Reporting**

CDU has a legal responsibility to mandatorily report students based on the following legislation;

**Division 2 Mandatory notifications: 143 Mandatory notifications by education providers**

(1) An education provider must notify the National Agency if the provider reasonably believes:

(a) a student enrolled in a program of study provided by the provider has an impairment that, in the course of the student undertaking clinical training as part of the program of study, may place the public at substantial risk of harm; or

(b) A student for whom the education provider has arranged clinical training has impairment that, in the course of the student undertaking the clinical training, may place the public at substantial risk of harm;

**Student’s requirement to report**

Under the National Law, students enrolled in an approved program of study or undertaking clinical training must notify AHPRA through the local office within seven days of becoming aware that:

- they have been charged with an offence punishable by 12 months imprisonment or more or
- they have been convicted of, or are the subject of, a finding of guilt for an offence punishable by imprisonment or
- their registration under the law of another country that provides for the registration of students has been suspended or cancelled.
- have been charged with an offence, or have been convicted or who are found guilty of an offence punishable by 12 months imprisonment or more;
- had their registration suspended or cancelled under the law of another country that provides for the registration of students.
Frequently Asked Questions

The following is a list of the most common frequently answered questions. It is recommended all students click on the link below that will take you to all of the frequently asked questions about pre-clinicals, placement and simulation blocks http://www.cdu.edu.au/health/undergraduate-nursing

What is a SB?
A Simulation Block (SB) is a compulsory one week study block where students learn and practice their clinical skills in a simulated environment prior to clinical placement. Most of these blocks are held in Darwin, Alice Springs and Sydney.

When I am assigned to a SB does this mean I am enrolled into the unit?
No. Students are responsible for enrolling themselves in the associated placement unit. Students need to enrol once they have successfully completed any pre-requisite units and been confirmed in to a SB.

How do I nominate and what is the deadline for nominating a SB?
There is an ‘Online Placement Nomination’ button on the ‘Enrolment Conditions & Clinical Placements page’. http://www.cdu.edu.au/health/undergraduate-nursing Click on the link and follow the prompts. The nomination dates and deadlines can also be found here.

I can’t attend the SB I have been allocated to, how do I request another SB?
Contact the Placement Office at Nurplac@cdu.edu.au as soon as possible, via email and attention this to the Placement Team Leader. Students must provide a reason for their request. There is no guarantee that students will be allocated to a preferred SB.

Have to go to Alice Springs/Darwin/Sydney for my SB and/or placement, is accommodation supplied?
Travel and accommodation arrangements associated with SBs and placements are solely the responsibility of the student. On campus accommodation may be available at Darwin and Alice Springs. Please see details at www.cdu.edu.au/nfih/ or http://www.cdu.edu.au/campuses-centres/alicesprings-campus

Can I arrive late/leave early for my SB so I can catch a more suitable flight there/home?
No. 100% attendance is required at SBs in order to successfully complete the SB.

If I don’t pass the SB am I still able to attend my placement?
No. Students must successfully complete the SB in order to attend placement.

I am repeating a placement unit; do I have to redo the SB?
Yes. If a student fails a unit and then re-enrols in that unit they must redo all components of that unit, including the SB.

Can I do just 2 or 3 days a week for my placement?
No. placements are not offered on a part time basis. Part time placement does not provide students with the best opportunity to consolidate their practice.
I have an exam during placement, what should I do?
Examinations should be discussed with the Unit Coordinator and Placement Office prior to attending placement. If the Placement Office has advance notice from the student, they can try to negotiate with the healthcare facility so that the student can have that day off placement (and make the missed shift up later). If the health facility is unable to offer a makeup day, the Placement Office will assist the student in applying for a Special Exam. NOTE: makeup shifts and rostered days off are all issued at the discretion of the healthcare facility.

If I nominate a facility as one of my preferences, does this mean I will go to that facility?
Not necessarily. Placements are in very high demand throughout Australia, and all placements are issued at the discretion of healthcare facilities. These facilities may have placement requests from many education providers and may have preferred providers whose placement requests they prioritise. Therefore, CDU students may need to attend placements at facilities that they did not nominate preferences for.

If I know dates when I am unavailable for placement what should I do?
A student may email a request to the Placement Office to not go on placement during certain dates however; the Placement Office cannot guarantee that they will be able to meet this request. Students are expected to be available to attend placement once they are enrolled in their placement unit. Placements are in short supply Australia-wide and students who are unavailable for placement will delay their course progression, as it could be difficult to secure alternative placements.

Can I refuse a placement that is assigned to me by the Clinical Placement Office staff?
The student must follow the procedure outlined in the Extenuating Circumstances Guidelines, available on the CDU website, and provide evidence as to why they are refusing the placement. Non-acceptance of a placement (or failure to attend the placement) may result in a Fail grade.

Are all placements during semester time?
Placements are confirmed at the discretion of individual health facilities. If a placement unit is not completed within the semester of enrolment, because a placement has not yet been found or not yet been completed, a Practicum Ongoing (PO) grade can be awarded. This grade is applicable for two (2) admission periods to allow a placement opportunity. PO grades are issued with the approval of the Unit Coordinator.

Where will I go on placement?
Students will be advised via their CDU student email account of their placement. CDU endeavours to source placement within a student’s home state and as close as possible to where the student lives, however, as placements are all given at the health facilities discretion this does not always happen. Students may need to travel outside of their local area and possibly outside of their home state in order to attend placement.

How far will I have to travel from my home to attend placement?
The Placement Office tries to secure placements for students in their home state, though students may need to travel some distance to attend placement. All students have been informed they may have to travel outside their home state in order to complete placement units. More information about enrolment conditions can be found at: http://www.cdu.edu.au/health/undergraduate-nursing
**Is my lunch break counted towards my placement hours?**

As in any workplace breaks are not included in working hours. Therefore an 8 hour shift will mean an 8 ½ hour day. (Students get half an hour for lunch).

**Am I part of the work-force?**

No. All Bachelor of Nursing students have supernumerary status while on clinical placements. This means students are additional to the workforce requirement and staffing ratios. Students are present in the placement setting as a learner and not as a member of staff.

**I am an EN; will this make a difference to my clinical placements?**

No. There are significant and complex differences in the role and responsibilities as a student on placement to that of paid employment as an Enrolled Nurse. Firstly, students on placement are not covered by an employment contract or employee insurance while on placement. Instead, students must comply with the policies of Charles Darwin University. Students are on placement as an undergraduate student. Students who work out of the student scope of practice will fail the clinical unit.

**Do I get paid while on placement?**

No. Students will be on placement as a student, not an employee. Students are not covered under an employment contract while on an authorised clinical placement and payment for students on placement does not apply.

**Can I organise my own placement with a facility?**

No. Students are not permitted to contact health facilities to organise placements. However, students can provide the Placement Office with information about potential placement opportunities. Cold calling health facilities to see whether they have available placements or whether they take CDU students is not a lead and will be considered as arranging your own placement(s).

**Can I organise my own shifts and rosters?**

No. All rosters are drawn up by the health facility staff that need to take staffing and preceptoring requirements into account. Students are not permitted to negotiate or make roster requests to the facility. If a student is concerned about a roster they are given, they need to direct their request through to the Placement Office at Nurplac@cdu.edu.au.

**What should I expect of those supervising me?**

Your Preceptor is generally appointed by the ward manager. Usually, preceptors have worked with many students and have experienced many different working relationships with them. In addition to providing preceptorship, your Preceptor also has to complete their usual workload. You can expect your preceptor to:

- Become familiar with the course and unit objectives related to the relevant academic unit in which the placement rests;
- Assist students to seek out relevant learning opportunities within a safe and appropriate environment;
• Provide regular constructive feedback; in particular, to identify areas of weaknesses and strengths;
• Provide constructive guidance and direction for students throughout the placement;
• Demonstrate professional role modelling;
• Be aware of, and comply with, relevant legislation underpinning practice;
• Conduct tutorials (if appropriate) and debriefing sessions on a regular basis during the placement;
• Provide reliable, valid and fair assessment of student performance;
• Be professional and ethical in their conduct toward you. This includes honesty in constructive feedback about expected performance;
• Provide support that contributes to your learning objectives commensurate with your level of progression within the programme (i.e. 1\textsuperscript{st}, 2\textsuperscript{nd} or 3\textsuperscript{rd} year);
• Encourage you to develop safe, competent and professional practice; including in particular, orientation to local emergency procedures;
• Provide documented assessment of competency, both formative and summative.

**Can I work outside my scope of practice? Can I perform procedures that require a learning package to ensure competency?**

No. Students who work outside their scope of practice will be withdrawn from clinical practice and may fail the clinical unit. Examples of working outside your scope of practice include cannulation, giving immunisations or repositioning of a PICC line. Please contact your Unit Coordinator if you or your preceptor is unsure and refer to your scope of practice table for the year level.
APPENDIX A: SCOPE OF PRACTICE

First year students must work within the first year scope of practice. Second year students must work within the second year scope of practice and their practice can also include skills of the 1st year scope. Third year students must work within the third year scope of practice and can also include the skills of 1st and 2nd scope of practice. NB: The third year students will have skills that are within the scope of other years as third year students learn new skills but also consolidate and build on existing skills learnt in previous years.

<table>
<thead>
<tr>
<th>Year 1: Unit NUR 125 – Novice: no patient load; continuous supervision</th>
<th>Year 2: Unit NUR 244 - Novice: Advanced beginner; medium level supervision (50% patient load)</th>
<th>Year 3: Unit NUR 343/346/344 Advanced-beginner: Minimal cues; minimal supervision (100% patient load)</th>
</tr>
</thead>
</table>
| Communicate and collaborates appropriately with colleagues, patients & carers/ families.  
  • Assist colleagues with patient care as appropriate  
  Establish and maintain a therapeutic relationship with patients & families appropriate to the clinical setting & inclusive of psychogeriatric and cognitively impaired clients.  
  Perform accurate, concise and appropriate recording and reporting of objective & subjective patient data using appropriate nursing and medical terminology. With continuous support:  
  • Handover of 1 patient  
  • Discuss evidence-informed rationales for implementing designated nursing care  
  • Assess patients’ input/output (direct & indirect observation, fluid balance & food/diet charts)  
  • Recognise & report significant fluid balance fluctuations  
  With continuous support implement nursing interventions for low acuity patients requiring assistance with ADLs:  
  • Positioning & mobility  
  • Personal hygiene  
  • Oral and eye care  
  • Oral dietary intake-assistance and assessment of patient’s eating/swallowing abilities  
  • Apply the nursing process (assessment, planning, intervention, rationales and evaluation) in the nursing care of patients with self-care deficits  
  • Discuss evidence-based rationales for the above interventions  
  Use safe manual handling techniques and equipment. With support, promote patient comfort & body alignment including:  
  Demonstrates timely & accurate communication, documentation and evidence informed decision-making which addresses cultural safety & awareness.  
  With supervision, implement nursing actions (procedures) for the low and medium acuity medical/surgical patient (50% patient load) including:  
  • Perform & document a health assessment  
  • Formulate nursing problem statements based on the above data and informed by evidence  
  • Conduct pain assessment and associated nursing interventions  
  • Monitoring patients and performing ECGs  
  • Provide evidence-informed rationales for the above interventions  
  Assess respiratory system & function:  
  • Describe the determinants of adequate oxygenation and the nurse’s role in assessment and provision of oxygen supplementation  
  • Discuss different evidence-informed rationales for providing supplementary oxygen  
  Perform a physical and psychosocial assessment of the well child & family  
  Apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the nursing care of patients with neurological deficits.  
  Apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the nursing care of patients with musculoskeletal deficits, i.e. spinal precautions, neurovascular observations.  
  With support, perform evidence-based nursing techniques in complex wound management, e.g. drain tubes & removal of sutures, staples & complex dressings.  
  With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the administration of S2 & S4  
  Demonstrate professional communication, conduct and evidence-informed decision-making in all aspects of nursing across a range of cultural settings & acuity levels.  
  Confidently provide accurate, logical, concise and appropriate recording and reporting of patient data (oral & written) to the health care team.  
  Application of the nursing process (assessment, planning, evidence-informed intervention, rationales and evaluation) in a variety of medical / surgical patient care environments for low, moderate and high acuity patients across the lifespan.  
  Provide all phases of the nursing process for 100% patient load considering time management, health assessments, planning and prioritising of clinical interventions and care.  
  Apply the nursing process (assessment, planning, evidence-informed intervention, rationales and evaluation) for patients requiring medication:  
  • Further develop skills in the safe administration of medicines via the oral, topical and parental routes  
  • Manage medication regimes for 100% patient load & across varying modalities  
  • Intravenous therapy regimes including narcotic infusions, epidurals & PCAs  
  • Demonstrate knowledge about the storage and use of Schedule 2, 4 and 8 medications according to facility, statutory, State and Commonwealth Law  
  • Discuss the pharmacology & pharmacokinetics of medications administered by the student  
  Apply knowledge of emergencies in the clinical setting and the maintenance & use of emergency & resuscitation equipment. With close supervision:  
  • Perform primary and secondary survey of respiratory, neurological, cardiac, urinary & gastrointestinal system assessments required  

Bachelor of Nursing Student Resource Manual 2018
- Bed making
- Positioning of patient
With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) in the administration of S2 oral medications.
- Articulate knowledge of legislation, charting and e-SCRIBE medication administration contexts
- Discuss the pharmacokinetics & pharmacology of all medications to be administered by the student and RN
- Discuss evidence-based rationales for safe administration and management of oral medication (S2 only).

Help with continence management (daily care of indwelling catheters; use of commodes; continence pads, bedpans or urinals).
Use safe and effective infection control measures & standard precautions including:
- Clean and clinical hand hygiene
- Use of personal protective equipment
- Appropriate disposal of waste materials

Assist with care of a low acuity patient requiring isolation or barrier nursing.
Assist with admission and primary health assessment of low acuity patients including:
- Nursing history and primary assessment
- Appearance/presentation
- Weight and height
- Ward urinalysis
- Vital signs; TPR, BP, RR & pulse oximetry

With support conduct an assessment of patient pain.
With support assist with wound healing by primary intention:
- Dry wound dressing
- Assessment of pressure ulcer risk
- Assessment of falls risk

With supervision, assess and support respiratory function through body positioning and primary care planning and implementation.
Discuss student’s role in relation to Emergency Codes (Blue, Red etc.).

medications (excluding restricted S4 & S8),
- Articulate knowledge of legislation, charting and e-SCRIBE medication administration contexts
- Discuss the pharmacokinetics & pharmacology of all medications to be administered by the student and RN
- Discuss evidence-based rationales for safe administration and management of varying regimes including; oral, IM, nebulised, SC, ocular, aural, nasal, PR & PV
- PEG/gastrostomy, nasogastric tube
- Intravenous therapy regimes including IV antibiotics

With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) for patients with complex hydration and nutritional requirements which may include:
- Management and care of nasogastric tubes
- Measures to maintain fluid balance, i.e. intravenous fluid replacement / supplementation therapy
- Discuss the rationales for the above interventions

With supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) for patients with complex needs related to the renal system including care and insertion of urinary catheters.

Work collaboratively with allied health workers & other team members.

With constant supervision, apply the nursing process (assessment, planning, evidence-informed interventions, rationales and evaluation) for patients:
- Exhibiting difficult/challenging behaviours such as aggression
- Experiencing mental illness and related problems
- Experiencing withdrawal syndrome and/or dependency behaviours (including working with AOD team)
- Who are cognitively impaired

for high acuity patients & in emergency settings
- Use the above data to provide evidence-informed nursing interventions which may include monitoring of patients & performing ECGs
- Provide evidence-based care of patients with tracheostomies, chest drains and central venous access devices (CVAD).

With supervision, assess patients’ responses to hydration treatments including:
- Intravenous infusions
- Venepuncture- to obtain blood sample for evaluation of hydration and haemodynamic status
- Blood or blood products
- Total parenteral nutrition

Discuss evidence-based collaborative management of patients who require the above interventions.

Recognise and assist with collaborative management of clients
- Exhibiting difficult/challenging behaviours
- Patients with mental health illness and related problems
- Aggressive patients
- Withdrawal syndrome and/or dependency behaviours (including working with AOD team)
- Cognitively impaired patients

With supervision, apply the nursing process (assessment, planning, evidence-informed intervention, rationales and evaluation) for paediatric patients including assessment, pain management, medication management & family interventions.
Discuss the rationales for these decisions.
With support, adapt nursing skills and clinical decision-making in a broad range of nursing contexts including remote area health clinics, mental health and community health facilities and specialised acute care areas.
APPENDIX B: FLOWCHART FOR CLINICAL PLACEMENT UNITS

NUR125, NUR244, NUR343, NUR344 & NUR346
(For the reference of Nursing Academics, Staff, and Bachelor of Nursing Students)

COMMENCE PLACEMENT

CLINICAL APPRAISAL - refer to unit and Portfolio requirements

Progress determined as satisfactory by Agency/Facility clinical supervisors, educators, preceptors and Unit Coordinators in accordance with the NMBA Competencies, facility guidelines and Scope of Practice

Progress determined as unsatisfactory by Agency/Facility clinical supervisors, educators, preceptors and Unit Coordinators i.e.
- Not achieved year level standard
- Not achieving scope of practice
- Not demonstrating professional conduct
- Inability to think critically
- Inconsistent and unsafe practice

Placement Completed
Required clinical hours completed and Clinical Portfolio submitted to appropriate CDU unit co-ordinator within two weeks of completion of clinical placement

All elements graded as satisfactory and a grade is recorded

Student proceeds to the next level of study or if course complete grade transcript signed and forwarded to AHPRA.

Assessment elements graded as unsatisfactory

Learning Agreement achieved

Learning Agreement NOT achieved by set date

FAIL recorded for unit

Option 1: Learning Agreement opportunity for the remainder of placement, or additional placement arranged as per Learning Agreement

Student to meet with the BN Program Manager/Director of Clinical Education to discuss course progression

Option 2: UNSAFE PRACTICE
NB* Refer to additional note
An inability to think critically and perform consistently and safely

Student removed from clinical placement

NB* PLEASE NOTE
Unsafe Practice can include any student action which may incorporate but is not limited to:
- Practice that endangers patient/client safety
- Inability to achieve year level standard & requires constant supervision
- Works outside of designated scope
- Breach of professional conduct
- Inability to think critically and perform consistently

NB* CDU remains responsible for the ultimate outcome of the workplace assessment
APPENDIX C: SIMULATION BLOCK AND PROGRESSION INTO CLINICAL PLACEMENT UNITS:
NUR125, NUR244 & NUR343

Student successfully completes SB pre-requisites as outlined by the Pre Clinical Coordinator and Clinical Placement Office and are enrolled in the unit.

Student accesses Learnline and completes the medication calculation exam and relevant pre-reading and critical thinking exercises for that unit.

Student attends allocated SB

Student demonstrates competency in OSCA. Student demonstrates professional behaviour and participates and contributes to all SB sessions

Successful completion of SB

Progression to placement determined by student providing pre-requisite documents

Refer to Clinical Placement Flow Chart

Student demonstrates 100% attendance at SB

Student does not demonstrate 100% attendance at SB

Feedback and revision time provided

Student given opportunity to demonstrate competency OSCA OR Demonstrate professional behaviour; SB participation; appropriate clinical performance and critical thinking

Meeting with Unit Coordinator and Director Clinical Education / BN Program Manager to discuss SB performance/progress

Student fails to demonstrate competency in 2nd chance OSCA OR no change in professional behaviour or SB participation; clinical performance and critical thinking.

Student may be permitted to continue with the SB and commence placement with a Learning Agreement with a focus on the area that was not successfully demonstrated during the SB. Additional learning materials and assessments will be identified and provided with the support of the Unit Coordinator.

Student fails SB and is required to re-enrol and complete the unit in its entirety

Student must attend in correct CDU uniform and identification.

Students who have not met the clinical prerequisites and are unable to progress to placement may be issued a Fail grade for the unit as they have not met the unit requirements.

Professional behaviour and participation is assessed in accordance with the National Standards for Practice for the Registered Nurse as presented by the NMBA.
**APPENDIX D: CLINICAL COMMUNICATION SKILLS FEEDBACK**

Student name: 

Assessor: 

Clinical Placement venue:  Date:  

This set of criteria is designed to provide feedback on clinical communication skills of students you have preceptored /facilitated / mentored and observed during a clinical placement. Please respond by ticking and initialing the appropriate level obtained. Students are assessed at the time of interim and final assessment. Please refer to Key.

<table>
<thead>
<tr>
<th>Please initial a box for each item</th>
<th>Limited 1</th>
<th>Developing 2</th>
<th>Satisfactory 3</th>
<th>Good 4</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Verbal communication</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to communicate with patients and staff at a social level</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to communicate with patients and staff about nursing procedures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to communicate with patient and staff about medical procedures</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to participate in discussions with patient and staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowing the right words or terms to express thinking to patients and staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Written Communication</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to write notes about patients in clear English from a verbal shift change</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to summarize essential elements of patients' conditions from a verbal shift change</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ability to correctly use nursing terminology</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Responding to verbal communication</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responds to verbal communication appropriately</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responds to verbal request accurately</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asking another person to repeat what he or she said as required</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please provide additional comments in the space below

**Student Name: (please print) __________________________ Sign: ______________ Date: __________**

**Clinical supervisor/teacher: (please print) ______________ Sign: ______________ Date: __________**

Key: Clinical communication Skills

Students who are assessed as limited or developing should be referred to their unit coordinator to discuss what remedial practices have been attempted by clinical supervisor/teacher and what further action is required. Students should be reassessed at regular intervals with success or failure of remedial actions noted.

<table>
<thead>
<tr>
<th>Limited 1</th>
<th>Developing 2</th>
<th>Satisfactory 3</th>
<th>Good 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concerns about being unsafe because of lack of ability and clarity of communication. Continuous verbal cues required. Numerous errors of expression, pronunciation and incorrect terminology (health literacy). Inability to respond to verbal requests, constant requests for explanation or clarification. Social communication or therapeutic communication not established.</td>
<td>Refers to being safe when supervised and supported with communication. Requires some prompts and cues when articulating care and progress. Some errors of expression, pronunciation and use of incorrect terminology (health literacy). Some delay in response to verbal requests, requires some explanation or clarification. Social communication established.</td>
<td>Refers to being safe and knowledgeable most of the time. Requires occasional prompts when articulating patient care and progress. Therapeutic communication and social communication established.</td>
<td>Refers to being safe &amp; knowledgeable; efficient &amp; coordinated; displays confidence with activities of communication. Establishes good therapeutic techniques and interactions with the multidisciplinary team and patient. Able to articulate patient care and progress.</td>
</tr>
</tbody>
</table>
APPENDIX E:

Death, serious illness or injury must be reported immediately to Work Health and Safety (WHS) through HRS Reception: 8946 6904

- **Injured party/ Person involved**: You must complete **Section A** and forward to your Supervisor for completion. Inform the Work Health and Safety (WHS) unit within The Office of Human Resource Services about the accident, incident or injury within 24 hours, preferably by email.

- **Supervisor/ Lecturer**: You must complete **Section B** and forward to WHS, within 5 working days, preferably by email.

- **Staff only**: For possible Workers’ Compensation Claim complete this form without delay and contact WHS for further information on the Workers’ Compensation process, preferably by email.

**NOTE**: This form is to be used for **accident/ incident** report only (unplanned event that has happened and caused immediate or imminent WHS risk exposure or injury). For general WHS concerns/ issues/ hazards, please use the **Hazard report form**.

WHS email: whs@cdu.edu.au  
WHS phone no: (08) 8946 6473  
Fax: (08) 8946 7211

If you are completing this form on behalf of someone else please complete this section with your details.

Surname  
Given names  
Phone no.

**Section A Details of person injured or person involved**

To be completed by the person injured or involved and forwarded to the Supervisor / Lecturer without delay.

<table>
<thead>
<tr>
<th>Surname</th>
<th>Given names</th>
<th>Date of birth</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
</table>

Your email address

☐ Staff  
☐ Student  
☐ Contractor

☐ Employed by Contractor  
☐ Visitor  
☐ Affiliated organisation

Name of contractor/ employing organisation

Address of employer

Employer’s email:

**Incident details (e.g: CDU sites – campus, building, room, off CDU sites – Address approximate location, Faculty / Office**

Date of incident

Time of incident

Location of incident

**Description of incident** (describe task being performed and list sequence of events)

**Note**: (attach further information if space is insufficient)

Witness details (**NOTE: Witness to Accident/Injury Report** form needs to be completed and attached)

Name

☐ Staff  
☐ Student  
☐ Visitor/Contractor

Contact no.

Bachelor of Nursing Student Resource Manual 2018
Nature or Type

- Injuries
- Fractures
- Wounds, lacerations, amputation or internal organ damage
- Burns
- Injury to nerves and spinal cord
- Traumatic joint/ligament/muscle/tendon injury
- Other injuries
- Musculoskeletal and connective tissue diseases
- Mental diseases
- Digestive system diseases
- Skin and subcutaneous tissue diseases
- Nervous system and sense organ diseases
- Respiratory system diseases
- Circulatory system diseases
- Infectious and parasitic diseases
- Neoplasms (Cancer)
- Other diseases
- Other claims (specify):

Body Part please indicate the injured part(s)

- Teeth
- Brain
- Organ

Mechanism of incident

- Falls, slips and trips of a person
- Hitting object with a part of body
- Being hit by moving object
- Sound and pressure
- Body stressing
- Heat, electricity and other environmental factors
- Chemical and other substances
- Biological factors
- Other and unspecified mechanisms of incident

Agency of injury/disease

- Machinery and (mainly) fixed plant
- Mobile plant and transport
- Powered equipment, tools and appliances
- Non-powered hand tools, appliances and equipment
- Chemicals and chemical products
- Materials and substances
- Environmental agencies
- Animal, human and biological agencies
- Other and unspecified agencies

Note: If completing form online…

Go to View on the toolbar, select Toolbars then ‘Drawing’. The Drawing toolbar appears at the bottom of page. Select the circle tool and use it to indicate injured areas.

Special Follow-up procedures are required for injuries involving contaminated needles or sharps – contact Manager, WHS.

Medical treatment obtained

- Nil
- First Aid
- Doctor
- Admitted to hospital
- Other (specify)

First Aid provided by __________________________ Date __________________ Time __________________

Outcome for injured person

Time lost from work? ☐ No ☐ Yes ▶ Days ________ Hours ________ or ☐ Not yet returned to work
Placement Students only (NOTE: Copy of host organisation’s Accident, Incident and Injury Report must be attached)

Name of CDU Unit Coordinator: ____________________________
Contact no.: ____________________________

CDU Unit Coordinator’s e-mail address: ____________________________

OHS representative at host organisation: ____________________________
Contact no.: ____________________________

Host OHS representative e-mail address: ____________________________

Placement Students forward this form along with the Accident, Injury Report from the host organisation to Unit Coordinator.

Unit Coordinator is NOT required to complete section B, but must forward this form and the student’s Accident, Incident and Injury Report from the host organisation to the Manager, WHS, Human Resource Services, Orange 12, Level 2.

I give consent for the personal information in this report to be provided to my relevant Workplace Health and Safety Committee (WHSC) and Health and Safety Representative (HSR).

Signature of person injured / involved: ____________________________
Date: ____________
Contact no.: ____________________________

After completion of Section A forward to Supervisor / Lecturer to complete Section B.

Section B Corrective action

Section B to be completed by CDU Supervisor / Lecturer and forwarded to WHS within 5 working days.

Recommended Corrective Action

Change process/equipment/substance:  □ Repair/modify machinery
  □ Eliminate (remove)                         □ Provide/modify safe work procedures
  □ Substitute - less hazardous                □ Install safety signage
  □ Isolate (limit access/exposure)           □ Changes to work environment
  □ Redesign (change equipment/process)       □ Provide training (on the job training, course required)
  □ Provide/maintain personal protective equipment □ Other (specify) ____________________________

Specify details of corrective action recommended (attach further information if space is insufficient)

...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
...........................................................................................................................................................................
Action taken to correct procedure/process to prevent incident/accident or to minimise reoccurrence
(attach further information if space is insufficient)

.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................
.................................................................

Name of Supervisor/ Lecturer (print) __________________________ Contact no. __________________________
Signature of Supervisor/ Lecturer __________________________ Date __________________________
Witness to Accident/Injury Report

Please Note: for the purpose of this report a witness is:
- a person who saw the accident/injury occur
- a person who was present immediately before or soon after the accident/injury and who observed the injured person
- a person told of the event shortly after it occurred

Return completed form to – Manager, Health, Safety and Environment, (HSE), Human Resource Services (HRS) within 24 hours or as soon as possible thereafter.

<table>
<thead>
<tr>
<th>Accident / Incident Detail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of person involved in injury/accident</td>
</tr>
<tr>
<td>Where accident occurred</td>
</tr>
<tr>
<td>Date</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Particulars of Witness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surname</td>
</tr>
<tr>
<td>Phone numbers: Work</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement of Witness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you actually see the accident/injury occur?</td>
</tr>
<tr>
<td>If you did not see the accident/injury what did you see or hear before, during or after the accident?</td>
</tr>
<tr>
<td>If you did see the accident/injury occur what did you see or hear before, during or after the event?</td>
</tr>
</tbody>
</table>
Statement of Witness cont...

From what you saw, what injuries were suffered i.e. indicate left/right, leg/hand, etc?

........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
........................................................................................................................................................................
.......................................................................................................................................................................
INTRODUCTION

The student uniform process has been implemented to maintain a professional image and for ease of identification of CDU students. Students are to wear the designated CDU uniform for professional practice; when representing the university in a practice or professional capacity; on clinical practicum; working in simulation / clinical teaching blocks or practice tutorials or, as otherwise indicated by the Director of Clinical Education.

INTENT

The intent of this document is to clearly set out the uniform requirements of CDU students in the School of Health.

- CDU students project a professional appearance
- Students are readily identified through wearing the CDU student identification badge, clearly visible and by their neat professional appearance.
- The dress code reflects infection control and occupational health & safety standards

RELEVANT DEFINITIONS

In the context of this document:

**Student** has the same meaning that “Student of the University has in the Charles Darwin University (Student of the University) By-Laws.

**Staff member** means everyone employed by, or associated with, the University on a permanent casual, adjunct, honorary, voluntary or contractual basis whether fulltime or part time, volunteers or who are a member of a University committee.

**Uniforms** are specific clothing or apparel required by the employer to be worn by employees in their course of their duties.

PROCESS

The purpose of this process document is to maintain standards and professional appearance of all students enrolled in CDU School of Health programs. All students have an individual responsibility to maintain a professional manner in their choice of dress.

Consistent uniforms make CDU students easily identifiable and help present the University as one cohesive, professional organisation.

CDU’s student dress code is designed to be practical for delivering client care, minimise potential cross infection, promoting safety for students and clients, functionality, cultural and religious sensitivity, institutional rules and expectations and regard for the image of the University. Students are required to attend clinical placement and SBs / CTBs in the prescribed Charles Darwin University uniform unless otherwise advised by the Health Facility. The student uniform policy is as follows:

- Navy or black ‘dress’ trousers or knee length shorts/culottes/skirt. The length and fit of trousers, shorts and skirts should be adequate to ensure modesty and to allow freedom of movement.
• CDU nursing student polo shirt with a collar and sleeve (arms should be bare below the elbows when undertaking clinical activities). The shirt length should ensure the midriff is covered.
• Current student ID card in a holder with clip, should be visible to staff and patients.
• Shoes black or navy enclosed with non-slip soles. Shoes are to be clean and if required, polished. “Sandshoes/ runners, soft coverings and ballet style” shoes are unacceptable. Footwear should be capable of protecting staff from any injury or contact with sharp objects which may be accidently dropped. AS/NZS 2210.1:1994 - Occupational Protective Footwear.
• At least two pairs of ‘dress’ trousers/skirt/shorts and two polo shirts are required to permit laundering between shifts. Denim trousers/low cut/shorts/skirts are not acceptable. Shirts must be adequate length, no midriff or underwear showing. Garments are to be ironed or free of creases/wrinkles, and neat and tidy;
• Hair is to be worn off the collar, face and neck and appropriately contained/secured. If hair is long there is a risk that students will be infected by pediculi or trauma if patients grab the student's hair;
• Facial hair must be clean shaven or a neatly trimmed beard is acceptable.
• Fingernails are to be short with no sharp edges. Long nails are a potential risk to patients’ skin integrity and an infection control risk; Likewise nail polish and/or artificial nails are not to be worn;
• No jewellery, apart from a plain, non-engraved wedding ring and stud or sleeper earrings are to be worn. Engraved rings and jewellery containing stones are a potential risk to patient skin integrity and contribute to the transmission of infection.
• Wrist watches are not be worn when undertaking patient care or aseptic procedures. They are an infection control risk and a potential risk to patient skin integrity. Students must have a watch with a second hand which can be worn away from the wrist, such as a nurse's fob watch.
• Religious headwear, where worn, should complement uniform colour.
• Students must pay attention to their own personal hygiene and use deodorant. They should avoid the use of heavy make-up and perfume as some people are allergic or sensitive to strong perfumes.

**IMPORTANT:** Many Health Facilities have strict guidelines in relation to body piercing and coloured hair. The Health Facility retains the right to ask students to leave if the student does not meet their requirements.

If students are considered inappropriately dressed they will be given a verbal warning and will be sent from placement to return appropriately attired. The time lost will need to be made up. Further warnings of inappropriate dress will be considered a breach of professional conduct and will result in disciplinary action.

**Ordering**

CDU bookshop and Territory Uniforms is CDU’s preferred supplier and is aware of CDU uniform policies. To order uniforms, contact directly.

**ESSENTIAL SUPPORTING INFORMATION**

**Internal**

- Work Health and Safety Policy
- Code of Conduct

**External**

- Work Health and Safety (National Uniform Legislation) Act 2011 (NT)
- Work Health and Safety (National Uniform Legislation) Regulations 2011 (NT)
APPENDIX G: Registered nurse standards for practice

**Standard 1: Thinks critically and analyses nursing practice**

RNs use a variety of thinking strategies and the best available evidence in making decisions and providing safe, quality nursing practice within person-centred and evidence-based frameworks.

The registered nurse:

1.1 accesses, analyses, and uses the best available evidence, that includes research findings, for safe, quality practice

1.2 develops practice through reflection on experiences, knowledge, actions, feelings and beliefs to identify how these shape practice

1.3 respects all cultures and experiences, which includes responding to the role of family and community that underpin the health of Aboriginal and Torres Strait Islander peoples and people of other cultures

1.4 complies with legislation, regulations, policies, guidelines and other standards or requirements relevant to the context of practice when making decisions

1.5 uses ethical frameworks when making decisions

1.6 maintains accurate, comprehensive and timely documentation of assessments, planning, decision-making, actions and evaluations, and

1.7 contributes to quality improvement and relevant research.

**Standard 2: Engages in therapeutic and professional relationships**

RN practice is based on purposefully engaging in effective therapeutic and professional relationships. This includes collegial generosity in the context of mutual trust and respect in professional relationships.

The registered nurse:

2.1 establishes, sustains and concludes relationships in a way that differentiates the boundaries between professional and personal relationships

2.2 communicates effectively, and is respectful of a person’s dignity, culture, values, beliefs and rights

2.3 recognises that people are the experts in the experience of their life

2.4 provides support and directs people to resources to optimise health-related decisions

2.5 advocates on behalf of people in a manner that respects the person’s autonomy and legal capacity

2.6 uses delegation, supervision, coordination, consultation and referrals in professional relationships to achieve improved health outcomes

2.7 actively fosters a culture of safety and learning that includes engaging with health professionals and others, to share knowledge and practice that supports person-centred care

2.8 participates in and/or leads collaborative practice, and

2.9 reports notifiable conduct of health professionals, health workers and others.

**Standard 3: Maintains the capability for practice**

RNs, as regulated health professionals, are responsible and accountable for ensuring they are safe, and have the capability for practice. This includes ongoing self-management and responding when there is concern about other health professionals’ capability for practice. RNs are responsible for their professional development and contribute to the development of others. They are also responsible for providing information and education to enable people to make decisions and take action in relation to their health.

The registered nurse:

3.1 considers and responds in a timely manner to the health and wellbeing of self and others in relation to the capability for practice

3.2 provides the information and education required to enhance people’s control over health

3.3 uses a lifelong learning approach for continuing professional development of self and others

3.4 accepts accountability for decisions, actions, behaviours and responsibilities inherent in their role, and for the actions of others to whom they have delegated responsibilities

3.5 seeks and responds to practice review and feedback

3.6 actively engages with the profession, and

3.7 identifies and promotes the integral role of nursing practice and the profession in influencing better health outcomes for people.

**Standard 4: Comprehensively conducts assessments**

RNs accurately conduct comprehensive and systematic assessments. They analyse information and data and communicate outcomes as the basis for practice.
The registered nurse:

4.1 conducts assessments that are holistic as well as culturally appropriate

4.2 uses a range of assessment techniques to systematically collect relevant and accurate information and data to inform practice

4.3 works in partnership to determine factors that affect, or potentially affect, the health and wellbeing of people and populations to determine priorities for action and/or for referral, and

4.4 assesses the resources available to inform planning.

**Standard 5: Develops a plan for nursing practice**

RNs are responsible for the planning and communication of nursing practice. Agreed plans are developed in partnership. They are based on the RNs appraisal of comprehensive, relevant information, and evidence that is documented and communicated.

The registered nurse:

5.1 uses assessment data and best available evidence to develop a plan

5.2 collaboratively constructs nursing practice plans until contingencies, options priorities, goals, actions, outcomes and timeframes are agreed with the relevant persons

5.3 documents, evaluates and modifies plans accordingly to facilitate the agreed outcomes

5.4 plans and negotiates how practice will be evaluated and the time frame of engagement, and

5.5 coordinates resources effectively and efficiently for planned actions.

**Standard 6: Provides safe, appropriate and responsive quality nursing practice**

RNs provide and may delegate, quality and ethical goal-directed actions. These are based on comprehensive and systematic assessment, and the best available evidence to achieve planned and agreed outcomes.

The registered nurse:

6.1 provides comprehensive safe, quality practice to achieve agreed goals and outcomes that are responsive to the nursing needs of people

6.2 practises within their scope of practice

6.3 appropriately delegates aspects of practice to enrolled nurses and others, according to enrolled nurse's scope of practice or others' clinical or non-clinical roles

6.4 provides effective timely direction and supervision to ensure that delegated practice is safe and correct

6.5 practises in accordance with relevant policies, guidelines, standards, regulations and legislation, and

6.6 uses the appropriate processes to identify and report potential and actual risk related system issues and where practice may be below the expected standards.

**Standard 7: Evaluates outcomes to inform nursing practice**

RNs take responsibility for the evaluation of practice based on agreed priorities, goals, plans and outcomes and revises practice accordingly.

The registered nurse:

7.1 evaluates and monitors progress towards the expected goals and outcomes

7.2 revises the plan based on the evaluation, and

7.3 determines, documents and communicates further priorities, goals and outcomes with the relevant persons.