

SHEFFIELD HALLAM UNIVERSITY
OPERATING DEPARTMENT PRACTICE
BSc (Hons)
YEAR 3 (LEVEL 6)
CLINICAL PLACEMENT DOCUMENTATION

From September 2019

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INTRODUCTION TO CLINICAL DOCUMENTATION

This document covers the required clinical competencies you, a third year ODP student on placement and is part of the 'ODP PREPARATION FOR PROFESSIONAL PRACTICE' module within our curriculum at Sheffield Hallam University. You must complete all sections and act professionally at all times to be able to complete year 3 of our programme. The documentation is there to support both you, the student and the Practice Educators, and clearly states the requirements within each section of the paperwork. Sheffield Hallam University has a website for continual professional support which addresses all aspects of the student learning on clinical placement. This site is available to support Practice educators.

<https://www3.shu.ac.uk/HWB/placements/OperatingDepartmentPractitioners/>

Further support is accessible via the named Visiting Lecturer/Academic Advisor for each placement site can be found on page 7 & 8 of this document. By the end of Level 6 you should be able to achieve the following: (please note some of these skills may have been completed at level 5 i.e. PACU)

Anaesthetics

"At Level 6 students should be able to effectively assess, plan, implement and evaluate care for a diverse range of patients, including complex, non-scheduled and emergency cases. It is expected at the end of Level 6 that students will have been exposed to a wide range of patient presentations, during their programmes; this must include paediatric, shared airway, dual life and emergency procedures" (CODP, 2018, page 26).

Surgery

"At Level 6 students should be able to effectively assess, plan, implement and evaluate care for a diverse range of patient's, including complex, non-scheduled and emergency cases undergoing surgical procedures. It is expected that they will also demonstrate proficiency in enhanced surgical skills, commensurate with Surgical First Assistant; demonstrating the responsibility and autonomy inherent in this role. Students should lead the Team Brief and be able to interpret information gained from that process to plan equipment and care strategies and also lead the surgical Time Out and Sign Out processes in order to plan and monitor care in intervention resulting from the processes.

At the end of Level 6 it is anticipated that students will have been exposed to a wide range of patient presentations, during their programmes; this must include paediatric, shared airway, dual life and emergency procedures" (CODP, 2018, Page 29).

PACU

"At Level 6 students should be able to effectively and systematically assess, plan, implement and evaluate holistic care for a diverse range of patients, including complex, non-scheduled and emergency cases. They should be developing resuscitation and critical care skills and be increasingly proficient in independent management of care, including a deep understanding of the pharmacotherapeutics utilised; demonstrating the responsibility and autonomy inherent in this role.

At the end of Level 6 it is anticipated that students will have been exposed to a wide range of patient presentations, during their programmes; this must include paediatric, shared airway, dual life and emergency procedures" (CODP, 2018, page 32).

College of Operating Department Practitioners (2018), *Bachelor of Science (Hons) in Operating Department Practice; Curriculum Document*. London: CODP

MODULE DESCRIPTOR

TITLE	ODP – Preparation for Professional Practice
SI MODULE CODE	66-607218
CREDITS	20
LEVEL	6
JACS CODE	B990
SUBJECT GROUP	ODP
DEPARTMENT	AHP
MODULE LEADER	Martin Reilly

MODULE STUDY HOURS (based on 10 hours per credit)*			
Scheduled Learning and Teaching Activities	Placement (if applicable)	Independent Guided Study	Total Number of Study Hours
100	460		560

MODULE AIM

Provide you with the opportunity to critically apply your enhanced practice skills and underpinning knowledge through a justified evidenced based approach.

MODULE LEARNING OUTCOMES

By engaging successfully with this module a student will be able to

- Apply and rationalise safe clinical skills within wider practice, including more challenging and diverse situations, evaluating the effectiveness of your interventions.
- Demonstrate a pro-active approach in your ability to take responsibility for the wellbeing of staff and patients, practicing with increasing autonomy, as you safely and effectively manage complex patient's caseloads.
- Demonstrate appropriate professional behaviours, communication and skills related to your current scope of practice. Ensuring you demonstrate appropriate health care values and adherence to placement policy and procedures.
- Reflect on feedback and learning experiences demonstrating your own readiness for professional practice.

INDICATIVE CONTENT

- Duty of Care
- Gaining Consent for enhanced practice
- Communication Skills
- Electronic patient records
- Anaesthetics
- Surgery
- Recovery
- Critical Care

- Clinical Emergencies
- Obstetrics
- Role of the Surgical First Assistant.
- E-portfolio development

LEARNING, TEACHING AND ASSESSMENT - STRATEGY AND METHODS

You will be supported in your learning in the following ways:

Knowledge development via modules specific to practice skills will be developed concurrently within the programme.

This is a preceptorship style placement to support your development towards autonomous professional practice - this will include mirroring real world practice such as 7 day working. You will have the opportunity to work in areas including:

- Obstetrics
- Emergency/Trauma

Hi and lo fidelity simulation will be used to support skills advancement where practice on patients could result in harm.

You will complete an Immediate Life Support Certificate developing enhanced care skills to benefit the patients within their care.

An e-professional development portfolio will enable you to reflect, self-assess and develop action plans thus exploring your own practice and the practice of others.

Formative feedback

Formative feedback will occur within sessions

Formative assessment of such activities will include practical tasks within the University/clinical environment dependant on access to learning resources.

Formative feedback will be provided by your placement educators and through your halfway review process. You will also be encouraged to seek feedback from service users, colleagues, and peers to support your self-development.

ASSESSMENT TASK INFORMATION

Task No.*	Short Description of Task	Task Weighting %	Word Count or Exam Duration**	In-module retrieval available
1	Clinical Competence	Pass/Fail	N/A	N
2	Poster	100%	N/A	N

Task 1

Your learning on placement will be monitored and assessed via Clinical Placement Documentation.

Task 2

You will develop a poster which demonstrates an area of key learning you have experienced on placement which you feel has impacted on your development towards being an autonomous practitioner.

FEEDBACK

You will receive both formative and summative feedback at timely intervals by academic tutors in accordance with SHU guidelines, which will allow you to identify your own learning needs. The feedback may take the format of verbal or written comments from lecturers, academic tutors, peers or in the form of computer based feedback. All summative feedback will be received on the 15th working day from submission in accordance with assessment feedback regulations.

You will also receive feedback in placement via mentor/supervisor discussions, giving you a clear indication of your progressions through the clinical practice competence Gateways. This will include verbal and written feedback regarding your current skills and knowledge throughout the programme, enabling you to develop in a timely manner, towards a successful completion.

LEARNING RESOURCES FOR THIS MODULE

Learning will be primarily undertaken whilst working within the clinical environment, supplemented with a combination of taught sessions via other modules on the programme, group work and use of practical demonstration allowing you to practice a range of skills in a safe and controlled environment within the university. This will allow you to make valuable connections between core theoretical principles and the application of these in practice. Resources include the clinical environment itself, Blackboard, Resource Lists online, learning centre resources and the clinical skills suite.

Reading lists via the 'Resource Lists Online' will mainly be electronic where possible to aid accessibility and will include key subject books, professional journals, and other professional peer assessed websites. These will be updated annually to reflect the ever changing world. The reading lists will be made available via Blackboard at the commencement of each learning pathway.

CLINICAL PROGRESSION THROUGH YEAR 3

Week No.	Date	Year 3	
9	20/09/21	Notes	University
10	27/09/21		
11	04/10/21		
12	11/10/21		
13	18/10/21		
14	25/10/21		
15	01/11/21		
16	08/11/21		
17	15/11/21		
18	22/11/21		
19	29/11/21	Friday in Uni	
20	06/12/21	Monday in Uni	
21	13/12/21	Friday in Uni	
22	20/12/21		
23	27/12/21		
24	03/01/22		
25	10/01/22	Friday in Uni	
26	17/01/22	Friday in Uni	
27	24/01/22	Monday in Uni	
28	31/01/22		
29	07/02/22		
30	14/02/22		
31	21/02/22		
32	28/02/22		
33	07/03/22		
34	14/03/22	Friday in Uni	
35	21/03/22	Mon & Fri in Uni	
36	28/03/22		
37	04/04/22		
38	11/04/22		
39	18/04/22		
40	25/04/22		
41	02/05/22		
42	09/05/22		
43	16/05/22		
44	23/05/22		
45	30/05/22		
46	06/06/22		
47	13/06/22		
48	20/06/22		
49	27/06/22		
50	04/07/22		
51	11/07/22		
52	18/07/22		
53	25/07/22		

You are required to complete a yearlong placement in year 3 of the BSc (Hons) ODP. The hours you will complete in practice is 37.5 per week. You are also expected to complete some out of hours work by the time you complete the course.

Throughout the year there are 3 review points to ensure that you are progressing effectively. This is so that the academic and clinical teams can support your learning. The dates for these review periods are November, January and towards the end of the programme. At each review point, you are required to complete and pass a mid-term review and a professional behaviours competency. Your academic advisors will be available to review this with you and your practice educators should it be required.

The submission of your Year 3 Clinical competencies is like any other academic hand in. The actual date of the hand in will be scheduled as per any other assessment and your portfolio will be marked by a member of the academic team during a visual inspection of your paperwork. You **must attend and present your work** on this day **and then upload to PebblePad** in order to pass the year. You will be provided with more information throughout the year, but if you are struggling at any point in the programme we urge you to talk to your Practice Educators and contact your academic advisor as soon as possible.

Year 3 contains 2 clinical pathways. Both pathways are required to be completed successfully in order to pass this element of the module. They are:

- Clinical placement learning –this is a rotational placement more like that of a qualified practitioner. Within this period, you will be expected to practice a preceptorship style placement. As you progress you are likely to experience more challenges, complex patients and procedures, as well as developing into a more autonomous practitioner. Obstetrics and emergency anaesthetics and surgery will be covered in this year. You will continue to develop the skills already practiced in years 1 & 2, but a deeper understanding and ability to adapt these skills is now required. Furthermore, you are being educated to become a future Practice Educator and teacher in the clinical environment, and therefore your ability to support learners will be assessed.
- Simulated placement learning – you will come to the University to practice enhanced skills deemed by the College of Operating Department Practitioners as essential for future practitioners. These knowledge and simulated skills will provide you with fundamental theory and skills to take forward so that these can be developed should you or your employer require these in future, once qualified.

Failing placement

If you fail your placement you will be expected to commence your referral period. You will be given a 6 weeks referral period. During this period you are required to redo all competencies which you have failed. Failure to complete in this period will mean you have failed the programme.

Please note that you will not be granted extensions for clinical placements. If you miss a significant amount of time you must contact the Academic Advisor and student support, to plan your continuation on the programme.

ABSENCE REPORTING

You must attend your allocated placement for the whole day/shift on all dates assigned to you by your placement provider you are expected to complete 34 hours a week.

Please report sickness absence as soon as possible when you know that you will be unable to attend your placement because of sickness.

Please note that you should report both 'Practice Placement Absence' and 'Taught Session Absence' by completing the [Student Absence Form](#) . If you are not currently logged in to Google Drive, clicking on the link will require you to log in using your email address as per the below example (username@my.shu.ac.uk). This will then take you to the Sheffield Hallam University login page where you would login using your single sign on Sheffield Hallam University login details. The HWB Student Absence Google Form will then open for your completion.

New Google Form Student Absence Form

Example Email Login username@my.shu.ac.uk

The image shows two side-by-side screenshots. The left screenshot is a Google sign-in page with the text 'Sign in to continue to Forms'. An email address 'b2058763@my.shu.ac.uk' is entered in the 'Email or phone' field, which is circled in red. Below the field are links for 'Forgot email?' and 'Not your computer? Use Incognito windows to sign in. Learn more'. A 'NEXT' button is at the bottom. The right screenshot is the Sheffield Hallam University login page. It asks for a username and password. The 'Username' field contains 'b2058763' and the 'Password' field contains masked characters, both circled in red. There is a 'Logon' button at the bottom.

WE WILL CLOSELY MONITOR ATTENDANCE IN ACADEMIC AND CLINICAL PLACEMENT AS THIS IS A PROFESSIONAL REQUIREMENT . POOR ATTENDANCE IN PRACTICE CAN DIRECTLY AFFECT YOUR PROGRESS IN THE PRACTICE BASED LEARNING ENVIRONMENTS AND ON THE COURSE. IF YOU ARE GOING TO REQUIRE SIGNIFICANT TIME OUT OF PLACEMENT DUE TO SICKNESS YOU MUST TALK TO PLACEMENT PROVIDER, STUDENT SUPPORT OFFICERS AND YOUR ACADEMIC ADVISOR WHO WILL ADVISE AND SUPPORT YOU PLEASE SEE THE ABSENCE POLICY.

ODP TEAM CONTACT INFORMATION

Martin Reilly - *Principal Lecturer/Professional Lead*

Direct Line: 0114 225 5612

Mobile: 07919 696004

Email: m.reilly@shu.ac.uk

Academic advisor for Barnsley and Leeds

Victoria Cadman - *Senior Lecturer/ Course Lead*

Direct Line: 0114 225 5781

Mobile: 07879 803338

Email: v.cadman@shu.ac.uk

Frankie Milton - *Senior Lecturer*

Direct Line: 0114 225 5431

Mobile: 07919 696056

Email: f.milton@shu.ac.uk

Academic advisor for Nottingham

Jenny Ward *Lecturer-Placement lead*

Direct Line: 0114 225 5686

Mobile: 07385491129

Email: jw4120@exchange.shu.ac.uk

Academic Advisor for Sheffield

Marie Stanton - *Senior Lecturer - Year 1 tutor*

Direct Line:0114 225 2412

Mobile: 07909873297

Email: m.stanton@shu.ac.uk

Academic Advisor for Chesterfield and Rotherham

Katie McCallum - *Senior Lecturer- Assessment lead*

Direct Line:0114 225 5673

Mobile: 07766774008

Email: K.McCallum@shu.ac.uk

Academic Advisor for Doncaster and Lincoln

Nicola Murdock- Lecturer- Admissions lead

Direct line: 01142256572

Mobile 07867407224

Email nm5487@exchange.shu.ac.uk

Academic Advisor for SCH and Mansfield

Mel Hogan - Senior Administrator

Direct Line: 0114 225 5458

Email: m.hogan@shu.ac.uk

Student Support Advisor

To contact you must go through Hallam Help on 01142252222

Email: hallamhelp@shu.ac.uk

Multi Faith advisor support

To contact you must email [LSSS-MultifaithChaplaincy-
mb@exchange.shu.ac.uk](mailto:LSSS-MultifaithChaplaincy-mb@exchange.shu.ac.uk)

CPC Contact Information

<p>Sheffield Teaching Hospitals NGH/RHH Sinead Peckham/ Noella Wood Sinead.peckham@nhs.net noella.wood@nhs.net 0114 2715194 NGH 0114 2713247 RHH</p>	<p>Sheffield Children's Hospital Chris Matthews christopher.matthews3@nhs.net Direct Line 0114 2717793</p>
<p>Thornbury Hospital Lesley Hibbert and Sam drabble Lesley.hibbert@bmihealthcare.co.uk samantha.drabble@bmihealthcare.co.uk Theatre 01142674532</p>	<p>Claremont Hospital Jessica Wale Jessica.Wale@claremont-hospital.co.uk Reception 01142630330 ask to be put through to theatres.</p>
<p>Rotherham Trust Direct line 01709 427100</p>	<p>Doncaster Trust Linda Walker linda.walker15@nhs.net Kirsty Stanley Kirsty.stanley8@nhs.net direct line 01302644649</p>

<p>Barnsley Trust Caroline (Katy) North cnorth@nhs.net 01226435473 Katy 07795181015</p>	<p>Mansfield Hospital (Kings Mill) Caroline Robinson CPC/clinical education lead caroline.robinson3@nhs.net 01623622515 ext 2049/3717/3707</p>
<p>Lincoln Hospital Barton Sarah (ULHT) Sarah.Barton@ULH.nhs.uk 01522 573752</p>	<p>Nottingham Hospital Tess Smith and Gaz Dawe Tendai.Smith@nuh.nhs.uk garry.dawe@nuh.nhs.uk 0115 9249924 ext 86425 QMC Ext 56957 City</p>
<p>Leeds Teaching Hospitals Stanimira Stoeva/Holly Cartwright and Michelle Hardcastle/ Megan smith megan.smith41@nhs.net Stanimira.stoeva@nhs.net Michelle.hardcastle@nhs.net holly.cartwright@nhs.net Tel 011320 66106/66403 St James LGI 0113 3923673</p>	<p>Chesterfield Royal Hospital NHS Foundation Trust Leanne Stevens Melissa Price- Earnshaw Melissaprice1@nhs.net Leanne.stevens1@nhs.net Tel 01246512307</p>

TRAINING RECORD

As part of your professional development you are required to complete mandatory training the ones highlighted are undertaken within university however for your continuous professional development use this space to demonstrate and record the training that you have completed.

Content	Comments	Trainer Sign/date
BLS		
Moving and Handling		
Information Governance		
Fire		
Student name:	Practice Educator name:	
Student signature:	Practice Educator Signature:	
Date of agreement:	Placement:	

SHEFFIELD HALLAM UNIVERSITY
OPERATING DEPARTMENT
PRACTICE
BSc (Hons)
YEAR 3 (LEVEL 6)
CLINICAL COMPETENCIES

Student Name

Student Number

Completion date

Pass/Fail

CLINICAL COMPETENCIES INTRODUCTION

Year 3 clinical portfolio concerns the development of proficiency in the skills already learned in years 1 and 2. It also focuses on the development of new skills, which enable you to effectively care for patients who have specific or complex needs and to care for patients in emergency situations. By the end of the year it is expected that you are able to competently care for patients to the level of a newly qualified practitioner. In addition to this, **you are required to demonstrate competence in supporting other learners** in the clinical environment, as preparation and personal development towards being a practice educator. To pass placement in year 3 the student is required to complete the following: -

C.1 Professional Behaviours

C.2 Anaesthetics

C.3 Surgery

C.4 Anaesthetics – Obstetrics & Emergencies/Trauma

C.5 Surgery - Obstetrics & Emergencies/Trauma

C.6 Complex Care

Practice Educators must ensure that the student is effectively supported during their time on placement by:

- Allocating a named Practice Educator to complete all aspects of the paperwork
- Ensuring there is an effective introduction to the clinical area
- Completing all aspects of the paperwork including the introduction and learning agreement, mid-term review and progression statement with the student.

INTRODUCTION TO THE CLINICAL AREA

PLEASE COMPLETE THIS FORM FOR EACH NEW PLACEMENT AREA

This section should be completed by the Practice Educator/supervisor with the student, before or as soon as possible after, the student has commenced in the new work area and prior to completing their learning agreement. The purpose of this introduction is to ensure the student has been fully orientated to their new placement area and has been made aware of specific policies, procedures and protocols related to this work area. By completing the checklist, and signing and dating this declaration, the 'introducer' and the student confirm a thorough introduction was carried out to the satisfaction of both parties.

Content	Requirements	TICK
Practice Educators	Designated Named Practice Educator and at least one other identified.	
Security and safety	Security badges and key codes. Fire procedure and incident reporting	
Orientation	Department geography / layout and facilities	
Staff changing and recreation facilities	Protocol and any specific requirements e.g. lockers, padlocks, personal items	
Storage areas- equipment, instruments, consumables.	Equipment and items used for Anaesthetics, Surgical and PACU. Stocking and storage protocols	
Communication	Work area contact numbers	
Attendance	Expected protocol for the work area and sickness reporting policy.	
Shift Patterns	Staff shift patterns	
Sickness Policy	Sickness policy discussed and telephone number for the department given	tel no.
Emergency Protocol	Discussion about emergency protocols and location of equipment	
Previous experience	Previous achievements and areas for improvements discussed	
<p>Comments- please identify any specific issues discussed in the initial meeting i.e. shift pattern of Practice Educators, student requests for shift patterns e.g. cannot work on certain days, travelling distance or child care issues. <u>Any concerns / potential problems are required to be identified and documented at induction, otherwise they may not be considered later.</u></p>		
Student name:	Practice Educator name:	
Student signature:	Practice Educator Signature:	
Date of agreement:	Placement:	

LEARNING AGREEMENT YEAR 3 PLACEMENTS

Year 3 clinical period is yearlong and concentrates on two important aspects: -

1. To establish confidence and proficiency in the skills developed in years 1 and 2 by ensuring the student has a good understanding regarding all the practical competencies and,
2. Developing new skills in complex cases, emergency/trauma and obstetric specialities.

During this year, students will be expected to support other learners including their peers by delivering teaching sessions to year 1 and potentially year 2 students so that they can demonstrate their knowledge acquired over the previous 2 years. At some point during year 3 it is required for students to participate in 'out of hours' practice.

To complete the year 3 clinical competencies the student will be expected to; -

- Complete Competency Statements C.1 – C.3
- Be an effective member of the multi-disciplinary team (supernumerary)
- Improve the skills learned in year 1 & year 2 and adapt to more complex situations
- Treat the patient in a holistic way incorporating the 6 C's
- Peer support 1st and 2nd year students

Students should also engage with their Practice Educator for there midterm reviews) to ensure that they are proceeding as planned towards completion.

LEARNING AGREEMENT FOR YEAR 3 PLACEMENTS

PLEASE COMPLETE THIS FORM FOR EACH NEW PLACEMENT AREA

Initial interview	
Student name:	CPC/Mentor name:
Student signature:	CPC/Mentor signature:
Date of agreement:	

If there is a cause for concern or a lack of progression, then please consult the 'Cause for Concern' Process.

C.1A PROFESSIONAL BEHAVIOURS (REQUIREMENTS)

COMPETENCE	PASS	FAIL
Communication	Uses appropriate language and communication skills as required for their developmental level on the programme. Works effectively within professional boundaries	Unable to communicate with staff to effectively work as part of the team. Uses inappropriate language and displays a disregard for professional boundaries. They are unable to communicate with patients effectively.
Team working	Able to understand and evaluate the roles within the MDT and embraces a team ethic towards patient care.	The student does not understand the various roles of the operating team and show no understanding of what it is to be a 'professional' within the MDT team
Commitment & Motivation	Motivated towards learning and working within the various roles within the theatre environment. All aspects of theatre practice should be considered. Students display a commitment to develop and learn.	The student has not studied materials to support learning or developed skills to achieve a pass. They are reluctant to do roles within their scope of practice due to personal preference. There is no commitment to learning being displayed.
Application of theory to practice	Able to demonstrate clinical reasoning for their actions and is able to discuss their understanding and evaluation of activities within the clinical environment in relation to clinical and theoretical concepts.	Cannot demonstrate clinical reasoning for their actions, nor demonstrate understanding of why activities occur at a particular time in relation to the working environment.
Care & Compassion	Is aware of patient care pathways and is able to contribute where possible towards the continuity of care within a department to ensure patient, personal and staff safety using compassion where appropriate.	Does not display care and compassion where appropriate for patient care.
Punctuality and attendance	Understands the importance of being on time and adhering to the work schedule. If they are absent they use the appropriate lines of communication and process to report this and ensure that the work area and/or University are informed of their situation e.g .return to work dates.	Is frequently absent without authorisation, is late for shifts, has extended coffee or dinner breaks and/or does not use effective communications to keep the Practice Educator or workplace informed as to where they are. Is unaware or repeatedly does not use the absence policy and procedures to inform placement or University of their absence.
Courage	The student displays an ability 'to do the right thing' in relation to all of the above sections. Shows an understanding of the importance to speak up and can explain the term advocacy.	Clearly does not understand the concept of advocacy and cannot discuss what this means in terms of their patients. They fail to speak up when required for patient or staff safety issues.

C.1A PROFESSIONAL BEHAVIOURS ANAESTHETICS

PLEASE COMPLETE THIS FORM FOR EACH NEW PLACEMENT AREA

During the Operating Department Practitioner programme students, will be expected to uphold key professional attributes to be able to progress forward on the programme. In each area, the student should achieve a pass in all the sections below. Failure to do so will trigger a fail for this period.

Competence	Pass	Fail	Practice Educator Comments: Sign and Date
Communication			
Team working			
Commitment & Motivation			
Application of theory to practice			
Care & Compassion			
Punctuality and attendance + Timesheet (Signed Daily)			
Courage			
Student Name:		Placement:	
Student & CPC/Practice Educator declaration			
The student can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.			
Student signature and date		CPC/Practice Educator signature and date	

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern Process*.

C.2 ANAESTHETICS (REQUIREMENTS)

	COMPETENCE	PASS - THE STUDENT CONSISTENTLY;	FAIL - THE STUDENT CONSISTENTLY;
A	Demonstrates knowledge and skills to prepare and check anaesthetic equipment in readiness for the procedures to be carried out.	The student is able to set up, justify and correctly check all anaesthetic equipment required for the procedure.	The student cannot set up a list without being continuously prompted/or they in correctly check equipment prior to use and therefore demonstrate unsafe practice.
B	Demonstrates knowledge for the locations for equipment required for emergency situations.	The student when questioned can locate emergency equipment. They can provide clinical reasoning for why this is important.	The student cannot locate emergency equipment nor/or understand why this is important.
C	Help manage a patient's airway throughout the procedure, demonstrating knowledge of the variation in anatomy from a child to an adult.	When setting up the anaesthetic area the student demonstrates good understanding regarding the different airway requirements. They can carry out safe airway techniques if required under supervision.	The student does not understand the variation of airways from a child to an adult and is unable to demonstrate a safe airway management technique under supervision.
D	Demonstrates an ability to prepare IV giving sets observing local policies and procedures, inclusive of infusion devices utilised within the practice environment.	The student able to prepare IV lines observing local policies and ensure health and safety is maintained at all times. The student is being able to prepare any infusion devices required for the patient.	The student cannot successfully prepare an IV line and do not understand the local policy
E	Demonstrates knowledge for the utilisation of fluids and blood products within patient care. Understands the alternative therapies when discussing blood products and reasons for their use.	The student is able to follow local protocols when using blood products. They are able to propose and justify use of alternate therapies and the clinical reason for their use.	The student cannot follow correct procedures when dealing with blood and are unable to suggest alternate strategies or why these are needed.
F	Assist with IV cannulation, demonstrating that they understand the optimum sites for practice and follows guidelines for infection control	The student is able to assist successfully with the IV cannulation of a patient ensuring health and safety plus infection control standards are maintained.	The student does not performs safely maintaining infection control standards or assist correctly to aid cannulation.
G	Not only applies monitoring correctly but understands the normal patient parameters and the data being supplied. Also, needs to be able to interpret data with an awareness of adversity.	The student can apply monitoring correctly and understand the data being provided. They are able to acknowledge patient variances and evaluate why they occur.	The student cannot apply monitoring correctly and does not understand the values displayed or what they mean about patient care.
H	Demonstrates an understanding of the impact of patient positioning on anaesthesia through the safe positioning of patients prior to the commencement of surgery.	The student can assist in positioning a patient correctly for the surgery, and display an awareness and practical application when considering patient safety. They understand and can provide reasoning for the impact of the position on Anaesthesia.	The student cannot practice safe technique when positioning a patient and has no understanding of the dangers present. They do not understand the impact of patient positioning with regards anaesthesia.
I	To assist, in a supervised role, the anaesthetist through the entirety of an operating list, with help when required by the Practice Educator.	The student is able to effectively assist the anaesthetist throughout the surgery and utilise the support of the Practice Educator when needed.	The student requires continual prompting throughout the theatre list and requires close supervision of the Practice Educator to complete tasks.
J	Cell Salvage	The student is able to explain the need for cell salvage and is competent in setting up equipment with some support.	The student does not understand the need for cell salvage and is unable to competently set up equipment with support.
K	Airway management including supraglottic airways	The student can explain the reason for and use of pre ventilation and can manage an airway with an ambulatory bag. They provide rational for the insertion of airway adjuncts, know the location of airway adjuncts and be able to effectively insert and remove supraglottic airways.	The student is unable to explain the reason for and use of pre ventilation and cannot manage an airway with an ambulatory bag. They do not provide rational for the insertion of airway adjuncts, or know the location of airway adjuncts. They are unable to effectively insert and remove supraglottic airways.

C.2 ANAESTHETICS

Competence description		Practice Educator Comments: Sign and Date
The student should be able to explain and inform each of the below statements to 1 st or 2 nd year students, or members of staff. This should be done in a coherent manner, with the use of correct terminology to use as an educational resource.		
A	Demonstrates knowledge and skills to prepare and check anaesthetic equipment in readiness for the procedures to be carried out.	
B	Demonstrates knowledge for the locations for equipment required for emergency situations.	
C	Help manage a patient's airway throughout the procedure, demonstrating knowledge of the variation in anatomy from a child to an adult.	
D	Demonstrates an ability to prepare IV giving sets observing local policies and procedures, inclusive of infusion devices utilised within the practice environment.	
E	Demonstrates knowledge for the utilisation of fluids and blood products within patient care. Understands the alternative therapies when discussing blood products and reasons for their use.	
F	Assist with IV cannulation, demonstrating that they understand the optimum sites for practice and follows guidelines for infection control	
G	Not only applies monitoring correctly but understands the normal patient parameters and the data being supplied. Also, needs to be able to interpret data with an awareness of adversity.	
H	Demonstrates an understanding of the impact of patient positioning on anaesthesia through the safe positioning of patients prior to the commencement of surgery.	
I	To assist, in a supervised role, the anaesthetist through the entirety of an operating list, with help when required by the Practice Educator.	
J	Cell Salvage	
K	Airway management including supraglottic airways	
Student Name:		Placement:
Student & CPC/Practice Educator declaration		
The student believes they can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.		
Student signature and date		CPC/Practice Educator signature and date

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern* Process

PROGRESSION STATEMENT ANAESTHETICS

TO BE COMPLETED BY THE CPC/NOMINATED PRACTICE EDUCATOR WITH THE STUDENT - PLEASE REVIEW ALL COMPETENCIES AND ENSURE THESE ARE CORRECTLY COMPLETED

	Tick	Student strengths recognised on placement
Title page signed and dated by the student		
Skills Passport format		
Learning agreement completed		
Competence contents checked and correct		Any student weaknesses/ areas for improvements that require attention for future career learning
Practice Educators / Associate Practice Educators Signatures		
Case Logs		
Placement evaluations		

Please cross out which ever statement does not apply.

I the CPC/Practice Educator have checked the paperwork and agreed that this student has successfully completed year 3 clinical competencies.

Or

I the CPC/Practice Educator have checked the paperwork and in conjunction with other Practice Educators have agreed that this student has **FAILED** this section (reasons are outlined in the *Cause for Concern* form).

Student name:	CPC/Nominated Practice Educator name:
Student signature:	CPC/Nominated Practice Educator Signature:
Date:	Placement:

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern* Process

C.1s PROFESSIONAL BEHAVIOURS (REQUIREMENTS)

COMPETENCE	PASS	FAIL
Communication	Uses appropriate language and communication skills as required for their developmental level on the programme. Works effectively within professional boundaries	Unable to communicate with staff to effectively work as part of the team. Uses inappropriate language and displays a disregard for professional boundaries. They are unable to communicate with patients effectively.
Team working	Able to understand and evaluate the roles within the MDT and embraces a team ethic towards patient care.	The student does not understand the various roles of the operating team and show no understanding of what it is to be a 'professional' within the MDT team
Commitment & Motivation	Motivated towards learning and working within the various roles within the theatre environment. All aspects of theatre practice should be considered. Students display a commitment to develop and learn.	The student has not studied materials to support learning or developed skills to achieve a pass. They are reluctant to do roles within their scope of practice due to personal preference. There is no commitment to learning being displayed.
Application of theory to practice	Able to demonstrate clinical reasoning for their actions and is able to discuss their understanding and evaluation of activities within the clinical environment in relation to clinical and theoretical concepts.	Cannot demonstrate clinical reasoning for their actions, nor demonstrate understanding of why activities occur at a particular time in relation to the working environment.
Care & Compassion	Is aware of patient care pathways and is able to contribute where possible towards the continuity of care within a department to ensure patient, personal and staff safety using compassion where appropriate.	Does not display care and compassion where appropriate for patient care.
Punctuality and attendance	Understands the importance of being on time and adhering to the work schedule. If they are absent they use the appropriate lines of communication and process to report this and ensure that the work area and/or University are informed of their situation e.g .return to work dates.	Is frequently absent without authorisation, is late for shifts, has extended coffee or dinner breaks and/or does not use effective communications to keep the Practice Educator or workplace informed as to where they are. Is unaware or repeatedly does not use the absence policy and procedures to inform placement or University of their absence.
Courage	The student displays an ability 'to do the right thing' in relation to all of the above sections. Shows an understanding of the importance to speak up and can explain the term advocacy.	Clearly does not understand the concept of advocacy and cannot discuss what this means in terms of their patients. They fail to speak up when required for patient or staff safety issues.

C.1s PROFESSIONAL BEHAVIOURS SURGERY

PLEASE COMPLETE THIS FORM FOR EACH NEW PLACEMENT AREA

During the Operating Department Practitioner programme students, will be expected to uphold key professional attributes to be able to progress forward on the programme. In each area, the student should achieve a pass in all the sections below. Failure to do so will trigger a fail for this period.

Competence	Pass	Fail	Practice Educator Comments: Sign and Date
Communication			
Team working			
Commitment & Motivation			
Application of theory to practice			
Care & Compassion			
Punctuality and attendance + Timesheet (Signed Daily)			
Courage			
Student Name:		Placement:	
Student & CPC/Practice Educator declaration			
The student can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.			
Student signature and date		CPC/Practice Educator signature and date	

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern Process*.

C.3 SURGERY (REQUIREMENTS)

	COMPETENCE	PASS - THE STUDENT CONSISTENTLY;	FAIL - THE STUDENT CONSISTENTLY;
A	Demonstrate knowledge and skills required to prepare the surgical environment for the patient procedure.	The student is able to prepare a theatre area and ensure all equipment and stock items are available for the planned procedure.	The student cannot prepare a theatre ready for a surgical procedure.
B	To be able to scrub competently under supervision.	The student displays competent scrubbing skills and understands the clinical reasoning behind their actions.	The student cannot scrub correctly and displays unsafe practice
C	Use good communication skills when considering safe practice as part of the scrub team. This is inclusive of communication with the circulating team and surgeons	The student communicates effectively and uses correct and professional terminology when working as part of the scrub team.	The student cannot communicate effectively.
D	Can set up and maintain a sterile field and what to do should it be contaminated.	The student understands how to maintain a sterile field and displays good practices whilst scrubbed or circulating.	The student does not maintain a sterile field, or maintain good practices whilst scrubbed and displays unsafe practice.
E	Understand the functionality of surgical instruments, inclusive of any specialist items as part of the surgical speciality. This should include endoscopic and open surgeries.	The student demonstrates knowledge and understanding of the functionality of all the instruments used for their clinical procedure.	The student cannot explain the surgical instruments and their application in practice
F	Issues related to skin prep prior to scrub.	The student understands correct practice with regards skin prep and the clinical reasoning behind the choice or preps available.	The student is unaware of any issues relating to skin prep and is unsafe in their practice
G	Skin Prep and Draping (Includes assisting the surgeon to prep and drape a patient)	The student can effectively assist the surgeon to prep and drape a patient ready for the procedure. Explaining the impact of skin prep and draping on wound healing and infection control.	The student is unable to assist effectively a surgeon to prep and drape a patient. Is unable to explain the impact of skin prep and draping on wound healing and infection control.
H	Wound dressings, various types, inclusive of pressure and absorbent dressings. This also includes the use of drains.	The student utilises the correct wound dressing and is able to demonstrate through clinical reasoning why different types are used for a specific surgery.	The student does not have the required knowledge of dressings available for the surgery and do not know how to apply them.
I	Superficial suture cutting.	The student can explain and discuss the procedure in detail and considers the impact on wound healing and infection control. They are able to effectively perform the technique of superficial suture cutting and understand the limitations of their role.	The student cannot explain and discuss the procedure in detail and considers the impact on wound healing and infection control. They are unable to effectively perform the technique of superficial suture cutting and/or do not understand the limitations of their role.
J	Effective handover of care to the recovery practitioner with consideration to preoperative assessment	The student utilises an effective handover technique, using clear, precise and professional language and terminology to facilitate patient safety.	The hand over is ineffective missing important details that could impact on patient safety and recovery.
K	Cell Salvage	The student is able to explain the need for cell salvage and is competent in setting up equipment with some support.	The student does not understand the need for cell salvage and is unable to competently set up equipment with support.

C.3 SURGERY

Competence description		Practice Educator Comments: Sign and Date
	The student should be able to explain and inform each of the below statements to 1 st or 2 nd year students, or members of staff. This should be done in a coherent manner, with the use of correct terminology to use as an educational resource.	
A	Demonstrate knowledge and skills required to prepare the surgical environment for the patient procedure.	
B	To be able to scrub competently under supervision.	
C	Use good communication skills when considering safe practice as part of the scrub team. This is inclusive of communication with the circulating team and surgeons	
D	Can set up and maintain a sterile field and what to do should it be contaminated.	
E	Understand the functionality of surgical instruments, inclusive of any specialist items as part of the surgical speciality. This should include endoscopic and open surgeries.	
F	Issues related to skin prep prior to scrub.	
G	Skin Prep & Draping (Includes assisting the surgeon to prep & drape a patient)	
H	Wound dressings, various types, inclusive of pressure and absorbent dressings. This also includes the use of drains.	
I	Superficial suture cutting	
J	Effective handover of care to the recovery practitioner with consideration of pre operative assessment	
K	Cell salvage	

Student Name:	Placement:
Student & CPC/Practice Educator declaration	
The student believes they can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.	
Student signature and date	CPC/Practice Educator signature and date

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern* Process

PROGRESSION STATEMENT SURGERY

TO BE COMPLETED BY THE CPC/NOMINATED PRACTICE EDUCATOR WITH THE STUDENT - PLEASE REVIEW ALL COMPETENCIES AND ENSURE THESE ARE CORRECTLY COMPLETED

	Tick	Student strengths recognised on placement
Title page signed and dated by the student		
Skills Passport format		
Learning agreement completed		
Competence contents checked and correct		Any student weaknesses/ areas for improvements that require attention for future career learning
Practice Educators / Associate Practice Educators Signatures		
Case Logs		
Placement evaluations		

Please cross out which ever statement does not apply.

I the CPC/Practice Educator have checked the paperwork and agreed that this student has successfully completed year 3 clinical competencies.

Or

I the CPC/Practice Educator have checked the paperwork and in conjunction with other Practice Educators have agreed that this student has **FAILED** this section (reasons are outlined in the *Cause for Concern* form).

Student name:	CPC/Nominated Practice Educator name:
Student signature:	CPC/Nominated Practice Educator Signature:
Date:	Placement:

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern* Process

SHEFFIELD HALLAM UNIVERSITY

OPERATING DEPARTMENT

PRACTICE

BSc (Hons)

YEAR 3 (LEVEL 6)

Obstetrics and Emergencies

Competencies

Student Name

Student Number

Completion date

Pass/Fail

INTRODUCTION TO THE CLINICAL AREA - OBS/EMERGENCIES

PLEASE COMPLETE THIS FORM FOR EACH NEW PLACEMENT AREA

This section should be completed by the Practice Educator/supervisor with the student, before or as soon as possible after, the student has commenced in the new work area and prior to completing their learning agreement. The purpose of this introduction is to ensure the student has been fully orientated to their new placement area and has been made aware of specific policies, procedures and protocols related to this work area. By completing the checklist, and signing and dating this declaration, the 'introducer' and the student confirm a thorough introduction was carried out to the satisfaction of both parties.

Content	Requirements	TICK
Practice Educators	Designated Named Practice Educator and at least one other identified.	
Security and safety	Security badges and key codes. Fire procedure and incident reporting	
Orientation	Department geography / layout and facilities	
Staff changing and recreation facilities	Protocol and any specific requirements e.g. lockers, padlocks, personal items	
Storage areas- equipment, instruments, consumables.	Equipment and items used for Anaesthetics, Surgical and PACU. Stocking and storage protocols	
Communication	Work area contact numbers	
Attendance	Expected protocol for the work area and sickness reporting policy.	
Shift Patterns	Staff shift patterns	
Sickness Policy	Sickness policy discussed and telephone number for the department given	tel no.
Emergency Protocol	Discussion about emergency protocols and location of equipment	
Previous experience	Previous achievements and areas for improvements discussed	
<p>Comments- please identify any specific issues discussed in the initial meeting i.e. shift pattern of Practice Educators, student requests for shift patterns e.g. cannot work on certain days, travelling distance or child care issues. <u>Any concerns / potential problems are required to be identified and documented at induction, otherwise they may not be considered later.</u></p>		
Student name:	Practice Educator name:	
Student signature:	Practice Educator Signature:	
Date of agreement:	Placement:	

LEARNING AGREEMENT YEAR 3 - OBS/EMERG

Year 3 clinical period is yearlong and concentrates on two important aspects: -

3. To establish confidence and proficiency in the skills developed in years 1 and 2 by ensuring the student has a good understanding regarding all the practical competencies and,
4. Developing new skills in complex cases, emergency/trauma and obstetric specialities.

During this year, students will be expected to support other learners including their peers by delivering teaching sessions to year 1 and potentially year 2 students so that they can demonstrate their knowledge acquired over the previous 2 years. At some point during year 3 it is required for students to participate in 'out of hours' practice.

To complete the year 3 clinical competencies the student will be expected to; -

- Complete Competency Statements C.1 – C.3
- Be an effective member of the multi-disciplinary team (supernumerary)
- Improve the skills learned in year 1 & year 2 and adapt to more complex situations
- Treat the patient in a holistic way incorporating the 6 C's
- Peer support 1st and 2nd year students

Students should also engage with their Practice Educator for their midterm reviews) to ensure that they are proceeding as planned towards completion.

LEARNING AGREEMENT YEAR 3 OBS & EMERGENCIES

PLEASE COMPLETE THIS FORM FOR EACH NEW PLACEMENT AREA

Initial interview	
Student name:	CPC/Mentor name:
Student signature:	CPC/Mentor signature:
Date of agreement:	

If there is a cause for concern or a lack of progression, then please consult the 'Cause for Concern' Process.

C.1 OBS PROFESSIONAL BEHAVIOURS (REQUIREMENTS)

COMPETENCE	PASS	FAIL
Communication	Uses appropriate language and communication skills as required for their developmental level on the programme. Works effectively within professional boundaries	Unable to communicate with staff to effectively work as part of the team. Uses inappropriate language and displays a disregard for professional boundaries. They are unable to communicate with patients effectively.
Team working	Able to understand and evaluate the roles within the MDT and embraces a team ethic towards patient care.	The student does not understand the various roles of the operating team and show no understanding of what it is to be a 'professional' within the MDT team
Commitment & Motivation	Motivated towards learning and working within the various roles within the theatre environment. All aspects of theatre practice should be considered. Students display a commitment to develop and learn.	The student has not studied materials to support learning or developed skills to achieve a pass. They are reluctant to do roles within their scope of practice due to personal preference. There is no commitment to learning being displayed.
Application of theory to practice	Able to demonstrate clinical reasoning for their actions and is able to discuss their understanding and evaluation of activities within the clinical environment in relation to clinical and theoretical concepts.	Cannot demonstrate clinical reasoning for their actions, nor demonstrate understanding of why activities occur at a particular time in relation to the working environment.
Care & Compassion	Is aware of patient care pathways and is able to contribute where possible towards the continuity of care within a department to ensure patient, personal and staff safety using compassion where appropriate.	Does not display care and compassion where appropriate for patient care.
Punctuality and attendance	Understands the importance of being on time and adhering to the work schedule. If they are absent they use the appropriate lines of communication and process to report this and ensure that the work area and/or University are informed of their situation e.g .return to work dates.	Is frequently absent without authorisation, is late for shifts, has extended coffee or dinner breaks and/or does not use effective communications to keep the Practice Educator or workplace informed as to where they are. Is unaware or repeatedly does not use the absence policy and procedures to inform placement or University of their absence.
Courage	The student displays an ability 'to do the right thing' in relation to all of the above sections. Shows an understanding of the importance to speak up and can explain the term advocacy.	Clearly does not understand the concept of advocacy and cannot discuss what this means in terms of their patients. They fail to speak up when required for patient or staff safety issues.

C.1 OBS PROFESSIONAL BEHAVIOURS - OBS & EMERGENCIES

PLEASE COMPLETE THIS FORM FOR EACH NEW PLACEMENT AREA

During the Operating Department Practitioner programme students, are expected to uphold key professional attributes to be able to progress forward on the programme. In each area, the student should achieve a pass in all the sections below. Failure to do so will trigger a fail for this period.

Competence	Pass	Fail	Practice Educator Comments: Sign and Date
Communication			
Team working			
Commitment & Motivation			
Application of theory to practice			
Care & Compassion			
Punctuality and attendance + Timesheet (Signed Daily)			
Courage			
Student Name:		Placement:	
Student & CPC/Practice Educator declaration			
The student can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.			
Student signature and date		CPC/Practice Educator signature and date	

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern* Process.

C.4 ANAESTHETICS - OBSTETRICS & EMERGENCY/TRAUMA (REQUIREMENTS)

	COMPETENCE	PASS - THE STUDENT CONSISTENTLY;	FAIL - THE STUDENT CONSISTENTLY;
A	Demonstrate knowledge and skills required to prepare a theatre for an emergency/trauma procedure.	The student should be able to prepare for an emergency/trauma procedure and understand the issues that the case presents, especially when considering altered anatomy or physiology.	The student cannot address the requirement for an emergency/trauma procedure without being constantly reminded.
B	Can prepare equipment and assist the Anaesthetist with the insertion of CVP, Arterial lines and can also discuss key issues regarding the procedures.	The student can effectively and efficiently prepare CVP and Arterial lines and enable them to measure the patient's readings. The student is able to assist the anaesthetist during insertion of lines.	The student is unable to prepare a CVP or Arterial line correctly and is unable to assist an anaesthetist to insert one.
C	Understands issues related to anatomy and physiology for emergency/trauma patients with regards anaesthetics.	The student can discuss and evaluate several differences that emergency/trauma patients may present, and how these might impact on the anaesthesia required.	They unable to discuss and evaluate altered anatomy or physiology for the procedure and the impact it may have on anaesthetics.
D	Can assist with Rapid Sequence Inductions and have knowledge of what to do if a patient cannot be ventilated or intubated.	The student can successfully assist with an RSI and demonstrate understanding of the reasoning underpinning the procedure. The student understands what course of action needs to be followed if the patient cannot be ventilated or intubated.	They are unable perform a RSI and cannot explain the guidelines for a difficult intubation and a patient who is difficult to ventilate.
E	Understands issues related to dual life surgeries and the impact on the patient's anatomy and physiology with regards anaesthetics	The student understands the issues related to dual life scenarios in Obstetrics in relation to the additional equipment and MDT required in theatre.	The student has no understanding of the issues related to obstetric procedure about anaesthesia.
F	Demonstrates professionalism when dealing with family members	When dealing with family members the student uses a holistic and professional approach to care for their needs as required.	The student use inappropriate language and does not deal with family members in a professional manner.
G	Can assist on Anaesthetics during obstetric procedures	The student effectively assists the anaesthetist during obstetric cases and can discuss and evaluate the issues related to it.	The student is unable to effectively assist the anaesthetist during an obstetric procedure.
H	Demonstrates an understanding of the impact of patient positioning on anaesthesia through the safe positioning of patients prior to the commencement of surgery.	The student understands the range of issues related to patient positioning and the impact these positions have on the patient and the treatment they receive.	The student does not understand the implications for positioning or the impact they have on the patient's wellbeing.
I	Demonstrates knowledge or working with in other departments on planned/unplanned procedures and understands the need to be prepared.	The student proactively engages as a supervised participant in anaesthetics outside the theatre environment, in other departments and displays awareness of the issues that may occur. They demonstrate effective planning processes to ensure safe patient care.	The student is unable to engage in work outside of the theatre environment. They have a poor understanding of how to plan to a procedure outside the anaesthetic room.

C.4 ANAESTHETICS - OBSTETRICS & EMERGENCY/TRAUMA

	Competence description	Practice Educator Comments: Sign and Date
A	Demonstrate knowledge and skills required to prepare a theatre for an emergency/trauma procedure.	
B	Can prepare equipment and assist the Anaesthetist with the insertion of CVP, Arterial lines and can also discuss key issues regarding the procedures.	
C	Understands issues related to anatomy and physiology for emergency/trauma patients with regards anaesthetics.	
D	Can assist with Rapid Sequence Inductions and have knowledge of what to do if a patient cannot be ventilated or intubated.	
E	Understands issues related to dual life surgeries and the impact on the patient's anatomy and physiology with regards anaesthetics	
F	Demonstrates professionalism when dealing with family members	
G	Can assist on Anaesthetics during obstetric procedures	
H	Demonstrates an understanding of the impact of patient positioning on anaesthesia through the safe positioning of patients prior to the commencement of surgery.	
I	Demonstrates knowledge or working within other departments on planned/unplanned procedures and understands the need to be prepared.	

Student Name:	Placement:
Student & CPC/Practice Educator declaration	
The student can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.	
Student signature and date	CPC/Practice Educator signature and date

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern* Process

C.5 SURGERY - OBSTETRICS & EMERGENCY/TRAUMA (REQUIREMENTS)

	COMPETENCE	PASS - THE STUDENT CONSISTENTLY;	FAIL - THE STUDENT CONSISTENTLY;
A	Demonstrates knowledge and understanding when preparing for an emergency/trauma procedure.	The student is able to prepare a theatre safely and efficiently for an emergency/trauma procedure and check all the consumables, instruments and equipment required	The student is unable to prepare a theatre ready for an emergency/trauma case and does not adequately anticipate what stock or equipment is required.
B	Demonstrates knowledge and understanding when preparing for an obstetric procedure	The student is able to demonstrate the knowledge and understanding to effectively and safely prepare for an obstetric procedure, ensuring all consumables and instruments are available.	The student has no understanding of what is required in preparing for an obstetric procedure.
C	Understands issues related to dual life surgeries and the impact on the patient's anatomy and physiology with regards surgery.	They can clinically reason the issues related with scrubbing for obstetric procedures and the impact on the patient's anatomy and physiology.	The student is unable to discuss issues related to dual life scenarios even after been told.
D	Understands the impact on anatomy and physiology an emergency/trauma case may have with regards the surgical procedure.	The student understands the impact of the emergency/trauma and the procedure on the patient's anatomy and physiology.	The student has no appreciation of what the impact of the procedure has on the anatomy and physiology of the patient.
E	Demonstrates an understanding of the impact of patient positioning on anaesthesia through the safe positioning of patients prior to the commencement of surgery.	Understands the surgical procedures positioning requirements and the impact on anaesthesia. They can demonstrate a safe approach to patient positioning.	The student does not understand the danger associated with patient positioning and they are unable to demonstrate what this will mean for the patient.
F	To be able to scrub competently under supervision.	The student successfully scrubs for an obstetric, and emergency/trauma procedure.	The student does not meet requirements to scrub safely and does not understand local protocols.
G	Use good communication skills when considering safe practice as part of the scrub team. This is inclusive of communication with the circulating team and surgeons	The student can communicate effectively and use correct terminology and professional language when working as part of the scrub team to support safe practice.	The student fails to communicate effectively with the MDT in the obstetric theatre.
H	Understand the functionality of surgical instruments, inclusive of any specialist items as part of the surgical speciality	The student understands and can evaluate the use and functionality of the instruments and equipment required for the surgery.	The student does not understand the equipment or instruments they need to use for the procedure.

C.5 SURGERY - OBSTETRICS & EMERGENCY/TRAUMA

Competence description		Practice Educator Comments: Sign and Date
A	Demonstrates knowledge and understanding when preparing for an emergency/trauma procedure.	
B	Demonstrates knowledge and understanding when preparing for an obstetric procedure	
C	Understands issues related to dual life surgeries and the impact on the patient's anatomy and physiology with regards surgery.	
D	Understands the impact on anatomy and physiology an emergency/trauma case may have with regards the surgical procedure.	
E	Demonstrates an understanding of the impact of patient positioning on anaesthesia through the safe positioning of patients prior to the commencement of surgery.	
F	To be able to scrub competently under supervision for an emergency procedure.	
G	Use good communication skills when considering safe practice as part of the scrub team. This is inclusive of communication with the circulating team and surgeons	
H	Understand the functionality of surgical instruments, inclusive of any specialist items as part of the surgical speciality	

Student Name:	Placement:
Student & CPC/Practice Educator declaration	
The student can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.	
Student signature and date	CPC/Practice Educator signature and date

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern* Process

C.6 COMPLEX CARE (REQUIREMENTS)- OBS & EMERGENCIES

	COMPETENCE	PASS - THE STUDENT CONSISTENTLY;	FAIL - THE STUDENT CONSISTENTLY;
A	Advanced Resuscitation Council (UK) guidelines	The student can systematically work their way through the Resuscitation Council Guidelines for Advanced life support.	The student cannot follow the guidelines and do not understand the reasoning for the action points detailed on it.
B	Cardiac arrest drugs	The student can provide justification and reasoning for the use of Adrenaline, Amiodarone, Atropine and Sodium Bicarbonate in relation to cardiac arrests.	The student does not understand the doses required, side effect, of contra indications prior to use of drugs used in relation to a cardiac arrest.
C	The 4 H's and the 4 T's	Can discuss the 4 H's and T's, explaining how they recognise them and how they treat each condition	The student cannot identify the 4 Hs and 4 Ts, or explaining how they recognise them and how they treat each condition.
D	Anaphylaxis	Can discuss the anaphylaxis guidelines and clinically evaluate the use of Oxygen and Adrenaline during an event.	The student cannot follow the guidelines for the treatment of anaphylaxis and/or discuss the symptoms of the event. They do not know the dose of adrenaline and its use or why Oxygen is so important.
E	Can't Intubate, Can't Ventilate	Can discuss and follow the guidelines for this scenario.	They cannot follow the guidelines or recognise when they should be implemented.
F	Malignant Hyperthermia	Demonstrates understanding of the MH guidelines and what the signs and symptoms are. They are able to provide clinical reasoning about Dantrolene and the dose required during an episode.	The student cannot discuss the signs and symptoms or the treatment of MH in the theatre environment and they do not know the dose or how Dantrolene is used.
G	Obstetric Emergencies	Demonstrates awareness of the various emergencies that may occur and the drugs used in Obstetric theatres for emergency situations such as a post-partum haemorrhage. they are aware of the policies regarding pre-drawn drugs for obstetric emergencies	The student is unable to discuss scenarios for Obstetric emergencies or provide reasoning for the importance for have pre drawn drugs ready to use.
H	Major incident MAJAX	Is aware of the protocols in place for a major incident	Is unaware of the protocols for a major incident
I	Patient Transfers	Student can discuss preparations for in hospital patient transfer, inclusive of equipment required and utilising appropriate communication strategies.	The student is unable to discuss preparations for in hospital patient transfer, inclusive of equipment required and utilising appropriate communication strategies.

C.6 COMPLEX CARE -OBS & EMERGENCIES / TRAUMA

	Competence description	Practice Educator Comments: Sign and Date
A	Advanced Resuscitation Council (UK) guidelines	
B	Cardiac arrest drugs	
C	The 4 H's and the 4 T's	
D	Anaphylaxis Drugs	
E	Can't Intubate, Can't Ventilate	
F	Malignant Hyperthermia	
G	Obstetric Emergencies	
H	Major incident (MAJAX)	
I	Patient Transfer	

Student Name:	Placement:
Student & CPC/Practice Educator declaration	
The student can demonstrate practical competence and supporting knowledge regarding the above elements and this is supported by the CPC.	
Student signature and date	CPC/Practice Educator signature and date

If there is a cause for concern or a lack of progression, then please consult the *Cause for Concern Process*

SHEFFIELD HALLAM UNIVERSITY
BSC (HONS) OPERATING DEPARTMENT PRACTICE
YEAR 3 (LEVEL 6)
SIMULATED COMPETENCIES

INTRODUCTION

THIS IS THE CLINICAL PATHWAY FOR SIMULATED LEARNING. THIS SHOULD BE UTILISED TO SUPPORT STUDENT LEARNING WHILST PROVIDING A SAFE AND EFFECTIVE ENVIRONMENT. SOME OF THE SKILLS THAT ARE PRACTICED WITHIN THIS PATHWAY ARE NOT DELIVERED BY ALL OF OUR CLINICAL PARTNERS, THEREFORE TO ENSURE EQUALITY THEY ARE TAUGHT IN THE SIMULATED LEARNING ENVIRONMENT.

IT IS IMPORTANT TO NOTE THAT SUCCESSFUL COMPLETION OF THE SIMULATED SKILLS PACKAGE DOES NOT DEEM YOU COMPETENT IN THE CLINICAL PLACEMENT ENVIRONMENT, THIS IS FOR SHEFFIELD HALLAM UNIVERSITY SIMULATED PRACTICE ONLY. CLINICAL SKILLS AND SCOPE PACKAGES ARE DEPENDENT ON THE EMPLOYING ORGANISATION FOLLOWING SUCCESSFUL REGISTRATION WITH THE HCPC.

PLEASE NOTE THAT YOU WILL STILL ADHERE TO THE SAME STRINGENT PROFESSIONAL BEHAVIOURS WITHIN THIS PATHWAY AS YOU ARE EXPECTED TO IN PLACEMENT.

ENHANCED PRACTICE

	Competence description	Completed	Lecturer Comments: Sign and Date
A	Cannulation		
B	Catheterisation (Male and Female)		
C	Immediate Life Support including defibrillation		
D	IM injections		
E	Skin retraction during surgery		
F	Organ manipulation (for access during surgery)		
G	Camera Holding		