

Metro North Hospital and Health Service *Putting people first*

Surgical, Treatment and Rehabilitation Service (STARS) Nursing

STARS Nursing Orientation Pre-Reading

Completion of this package, if relevant to the context of practice, attracts one (1) Continuing Professional Development (CPD) hours of learning. The listed eLearning modules will attract additional CPD hours based on time taken to complete. CPD hours can contribute to the nurse / midwife CPD requirements as per the Nursing and Midwifery Board of Australia Continuing Professional Development.

V1 Effective: October 2020 Review: October 2023



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Statement of Indemnity

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Version Control

This is Version 1 of the STARS Nursing Orientation Pre-Reading and will remain current until 2021 or earlier when modifications required. The current version will be available for access on the Intranet and identified hyperlinked address as required.

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Introduction

Congratulations on the appointment to your new role and welcome to the STARS nursing team!

We are excited to have you on board and look forward to learning about you, your past experiences and what you can bring to our amazing team. We trust that your time working at STARS will be enjoyable and will enhance your personal and professional development as a nurse and leader in the provision of safe, quality healthcare services to our valued patients and consumers.

The STARS Nursing Orientation Handbook provides new nurses with the information that will support you to begin progressing through your orientation, induction and transition to STARS. Additional information will be provided within the Herston Health Precinct Program, STARS Nursing Orientation and work unit specific orientation and induction programs. You will also receive a specific ward/clinical area specific Orientation Package from your service line Nurse Educator once you commence in your role which will aim to support your seamless orientation, induction and transition to workplace and integration within the team.

The STARS Nursing Orientation Program is a 1.5-day orientation program embedded within an integrated orientation, induction and training schedule. Please note that the orientation, induction and training schedule for each nurse may present differently depending on prior learning or experience, nursing grade or classification and the work unit whereby employment is occurring. Additional orientation, induction and training programs that new nurses may be required to attend upon employment include:

- Herston Health Precinct Program (for employees new to MNHHS)
- Integrated electronic medical record (ieMR) training
- Specific work unit induction training (i.e. equipment, systems, applications, electronic medication management etc).



Please use the Commencement Checklist in Appendix 1 to assist you in identifying and completing relevant orientation activities prior to commencing in your clinical area. These are detailed throughout the STARS Nursing Orientation Handbook.

STARS Nursing Orientation Program Information

As outlined in the MNHHS Nursing and Midwifery Orientation and Transition Procedure¹, attendance at a Nursing/Midwifery Orientation Program is mandatory for:

- All nursing/midwifery staff commencing employment within MNHHS for the first time (permanent, temporary or casual appointments)
- All nursing/midwifery staff resuming duties after leave of more than 12 months
- All nursing/midwifery staff transferring between MNHHS facilities who completed orientation prior to January 2016
- Currently employed Grade 1 to 4 nurses who have transferred to a higher classification.

Newly employed nurses/midwives are required to complete a Nursing/Midwifery Orientation Program within 30 days of employment; however, it is recommended that this is completed within the first two weeks¹.

The STARS Nursing Orientation Program has been developed to provide nurses with an overview of nursing services at STARS, address the nursing responsibilities and expectations relating to the Australian Commission on Safety and Quality in Health Care (ACSQHC) National Safety and Quality Health Service (NSQHS) Standards and equip staff with the skills and knowledge required for mandatory and requisite training prior to role commencement.

Program

The 1.5-day STARS Nursing Orientation Program has been provided in Appendix 2. Various sessions within the STARS Nursing Orientation Program attract continuing professional development (CPD) hours. If relevant to the context of practice and nursing grade (i.e. Grade 3 +), these hours can contribute to nurse CPD requirements as per the Nursing and Midwifery Board of Australia (NMBA) CPD requirements². Nurses are required to attend all components of the one-day STARS Nursing Orientation Program.

¹ MNHHS. (2020). Nursing and Midwifery Orientation and Transition Procedure 003835. Retrieved from: https://qheps.health.qld.gov.au/_data/assets/pdf_file/0038/1479935/003835.pdf

² Nursing and Midwifery Board of Australia. (2016). Registration standard: Continuing professional development. Retrieved from: <https://www.nursingmidwiferyboard.gov.au/Registration-Standards/Continuing-professional-development.aspx>

Coordinator Contact Details

The STARS Nursing Orientation Program is coordinated by the STARS Facility Nurse Educator. Questions or concerns relating to the program should be directed to the STARS Facility Nurse Educator via phone or email:

- **Phone:** 07 3175 2165
- **Email:** STARSNursingEducation@health.qld.gov.au

Sick Leave

If you are sick or unable to attend the STARS Nursing Orientation that you have been registered for, please contact your Line Manager in addition to the STARS Facility Nurse Educator using the details listed previously.

Catering

The STARS Nursing Orientation Program is not catered. Participants are required to bring their own morning tea, lunch and afternoon tea. Food and beverages can be purchased in the retail section of STARS on level 3 or at the small café on ground floor. Alternatively, the Skybridge will take you to Level 6 of the RBWH where you can access more dining options. We would very much appreciate and encourage you to bring your own cup/water bottle and to support recycling and minimising waste whenever possible.

Dress Code

Participants are encouraged to wear comfortable clothing with shoes that are closed/covered and non-permeable to fluids and sharps to the STARS Nursing Orientation. You are welcome to wear your uniform if you have it, however this is not a mandatory requirement. The same dress code will apply during any other orientation, induction or training activities/sessions that you attend (i.e. work unit induction training).

Basic Life Support

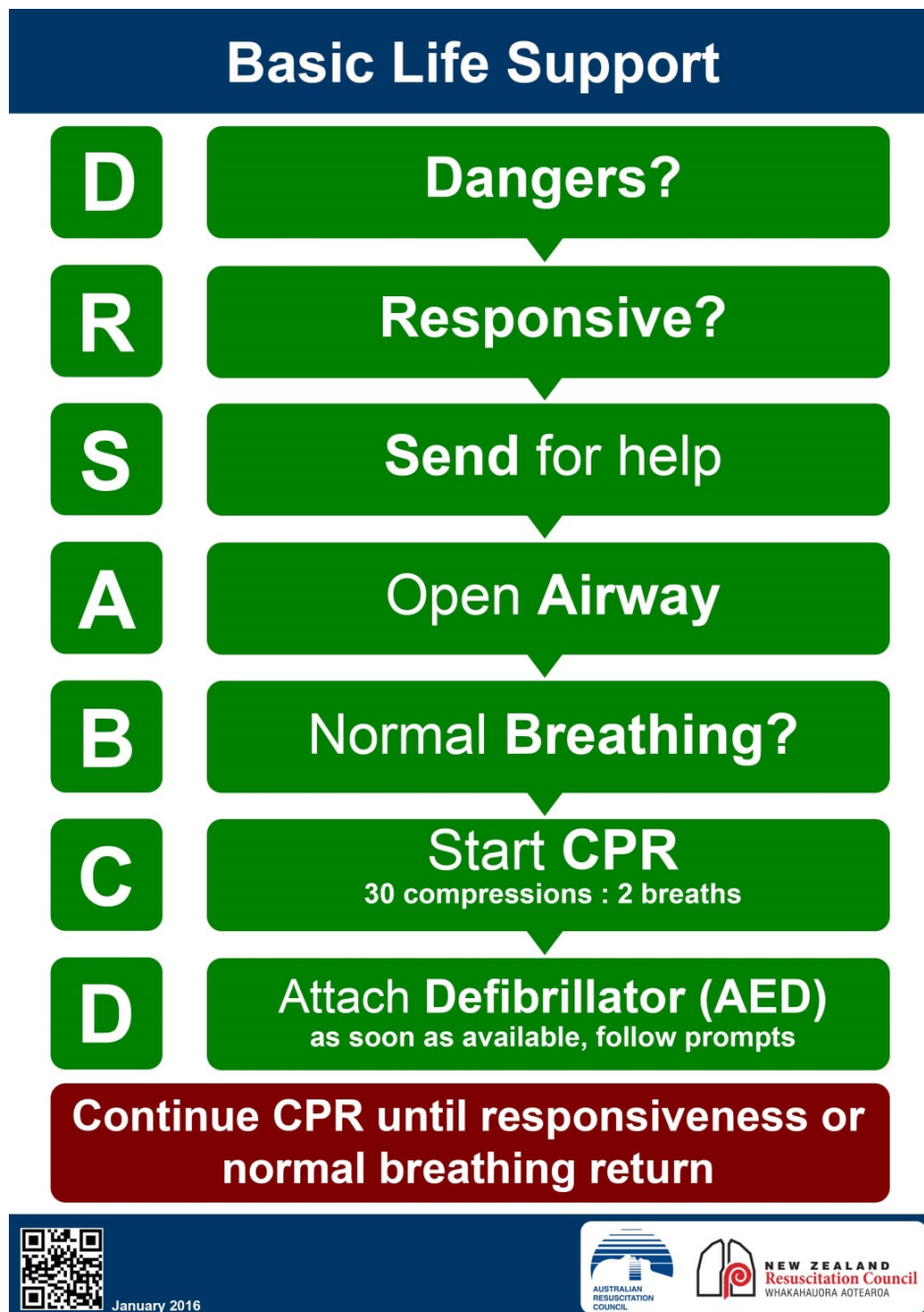
All clinical staff involved in direct patient care are mandated to be assessed as competent in providing basic life support (BLS) and in the safe use of an automated external defibrillator (AED) to effectively manage a patient in cardiac arrest. This includes nurses (AINs, ENs and RNs), midwives, medical officers and allied health staff. Clinical Staff are responsible for maintaining the appropriate knowledge and skills pertaining to BLS and are expected to demonstrate competency upon induction and annually thereafter.

It is important that clinicians are prepared for their basic life support assessment. You will be provided with a theoretical session on basic life support principles during the STARS Nursing Orientation and complete your assessment during your work unit induction training once you

feel adequately prepared. The STARS Basic Life Support Assessment Tool has been included in Appendix 3 to assist you in familiarising yourself with the assessment requirements before attending the STARS Nursing Orientation Program.

The Australian and New Zealand Committee on Resuscitation (ANZCOR) BLS flowchart, of which the Australian Resuscitation Council (ARC) are a member, demonstrates the principles of BLS supported within STARS³ (see Figure 1).

Figure 1: BLS Algorithm



³ Australian Resuscitation Council. (2016). ANZCOR Basic Life Support Flowchart. Retrieved from: <https://resus.org.au/guidelines/flowcharts-3/>

Feedback and Evaluation

Your feedback on the STARS Nursing Orientation Program is important to us. All feedback is appreciated and will assist to inform program improvements for future STARS Nursing Orientation Programs. Feedback can be provided through the MNHHS Consultation Hub. You may use the following link <https://metronorth.citizenspace.com/rbwh-stars/f330ab94> to provide feedback or scan the QR code below.



If you are unfamiliar on how to use/scan a QR code, please refer to the following information: <https://www.dummies.com/business/marketing/social-media-marketing/how-to-scan-a-qr-code/>.

Nursing Pre-Commencement eLearning

The Talent Management System (TMS) is used to view training records and to complete or record legislative, mandatory or requisite training. Each employee is assigned a TMS account.

Your internal TMS account will not become live until after your commencement date and your commencement work has been processed (i.e. you are in the payroll system and have a payroll number). In the meantime, employees are provided with a temporary 'pre-hire' account in the TMS. The pre-hire account allows you to access the TMS in the short term whilst your internal account is still being created. Once your commencement paperwork has been processed and you have commenced in your role, your pre-hire account will be merged with your internal account. This will transfer any existing completed training or certifications on your pre-hire account to your internal account.

In order to complete eLearning prior to commencement in your role, you will require access to your pre-hire TMS account (if you are not already aware of an internal TMS account being created for you). To search for a specific course, utilise the search bar at the top of the page or access the Catalogue. The TMS can be accessed via the desktop icon on work computers, through a mobile application on your phone or on your home computer.

Please refer to the MNHHS extranet site for quick reference guides on how to:

1. Download the Saba Cloud App (TMS) onto your mobile device
2. Access/log in to the TMS from a home computer
3. Access/log in to your TMS pre-hire account

N.B You are required to complete the eLearning activities listed below within 30 days of commencement in your role. However, if you wish to complete these activities prior to commencement, you are welcome to do so.

MNHHS Mandatory Training

The Herston Health Precinct Program comprises of three hours of face-to-face training (0800-1100hrs) with the remainder of the program being delivered online.



If you are an AIN, EN or RN, it is a requirement that you complete the following mandatory training components **within 30 days of commencement**. The following mandatory training components can be accessed via the TMS. In the TMS, search for the individual title below to locate the training in the course catalogue:

- Aboriginal & Torres Strait Islander Cultural Practice Orientation
- Australian Charter of Healthcare Rights
- Code Of Conduct
- First Response Evacuation Instructions (FREI)
- Fraud Awareness
- Health and Safety Orientation
- Healthcare Ergonomics Theory
- Infection Control Awareness
- Public Interest Disclosure (PID)
- SaFE - Child Safety Awareness

Medication Calculation Assessment



RNs and ENs only:

If you are a RN or EN, it is a requirement that you complete the STARS Nursing Medication Calculation Assessment within 30 days of commencement¹, however completion is encouraged as soon as possible to facilitate administration/checking of medications and intravenous fluids. **RNs and ENs are required to achieve a score of 100% to be able to administer and/or check medications and intravenous fluids in the clinical area.** The STARS Nursing Medication Calculation Assessment is an online competency assessment which is to be completed through the TMS. In the TMS, search for the term “STARS

medication calculation and medication safety”* to locate the assessment in the course catalogue.

*Please note this may not be available in TMS until February 2021.

Please note that the same assessment is to be completed by RNs and ENs. Some medicines require an independent two-person (or double) check prior to administration. An EN may be asked to perform the second check for a medication by a RN in STARS. ENs are not permitted to perform a second check for another EN⁴. The two-person check process is detailed below:

A Two-Person Check

1. Each authorised person independently checks
 - a. the medicine order
 - b. the medicine (and compatibility of the diluent, if required)
 - c. correct volume (as required)
 - d. correct route
 - e. calculates the dose without prior knowledge of any previous calculation.
2. The medicine and calculation are compared, and any discrepancies are re-checked to confirm the correct medicine and dose is prepared.
3. Preparation of the medicine is witnessed (if required).
4. Paediatric, DS4, S8 and high-alert medicines require both authorised persons to take the medicine to the bedside and perform the 6 rights of medication administration check with the patient prior to administration.
 - a. Both authorised persons must stay at the bedside until the medicine has been administered.

Both authorised persons are to document on the relevant approved prescribing system or medicine chart.

Medication Calculation Assessment Information

The online medication calculation assessment must be completed by yourself and with no assistance. You will be provided with the formulae relevant to the questions in the assessment and you are permitted to use a calculator to support assessment completion. All questions must be answered.

The purpose of the assessment is to identify strengths and weaknesses in the application of knowledge related to the safe calculation and administration of medications and intravenous fluids, and to assist new nurses to achieve a standard of safe practice¹. Competent numerical and drug calculation skills are essential for nurses as errors can put patients’ lives at risk⁵.

RNs and ENs are required to achieve a score of 100% to be able to administer and/or check medications and intravenous fluids in the clinical area. Nurses who are unsuccessful in the

⁴ Metro North Hospital and Health Service. (2020). Medicines Administration 004791. Retrieved from https://qheps.health.qld.gov.au/_data/assets/pdf_file/0024/2352813/004791.pdf

⁵ McMullan, M., Jones, R., & Lea, S. (2010). Patient Safety: Numerical Skills and Drug Calculation Abilities of Nursing Students and Registered Nurses. *Journal of Advanced Nursing*, 66(4), 891-899. doi: 10.1111/j.1365-2648.2010.05258.x.

medication calculation assessment (i.e. a score of 100% is not achieved) are unable to administer and/or check medications and intravenous fluids in the clinical area until a re-assessment is completed and a score of 100% is achieved¹. Refer to Department of Health Orientation, Induction and Mandatory Training Policy G6⁶.

During the initial online assessment, if one to three question/s are answered incorrectly, nurses will be provided with one opportunity to re-attempt these question/s. If nurses are able to self-correct the answer/s, a score of 100% will be achieved. If nurses are unable to self-correct the answer/s OR more than three questions are answered incorrectly on the first attempt, the nurse will be marked as unsuccessful. The relevant service line Nurse Educator and Line Manager will be notified of the requirement for re-assessment.

Re-Sit Information

Re-assessment opportunities will be managed and provided by the respective service line Nurse Educator and tailored support, including additional opportunities for practice, will be negotiated and provided where knowledge deficits have been identified. Following the provision of tailored support, nurses will be provided with an opportunity to re-sit a paper-based assessment containing questions relating to the deficits identified in the initial assessment at operational convenience in conjunction with the service line Nurse Educator.

Re-Sit Assessment 1:

If one to three question/s are answered incorrectly, nurses will be provided with one opportunity to re-attempt these question/s. If nurses are able to self-correct the answer/s, a score of 100% will be achieved. If nurses are unable to self-correct the answer/s OR more than three questions are answered incorrectly on the first attempt, the nurse will be marked as unsuccessful. Nurses who are unsuccessful in assessment 1 (i.e. a score of 100% is not achieved) are unable to administer and/or check medications and intravenous fluids in the clinical area until a re-assessment is completed and a score of 100% is achieved. Re-assessment opportunities will be managed and provided by the service line Nurse Educator and tailored support, including additional opportunities for practice, will be negotiated and provided where knowledge deficits have been identified prior to completion of Assessment 2.

Re-Sit Assessment 2:

If one to three question/s are answered incorrectly, nurses will be provided with one opportunity to re-attempt these question/s. If nurses are able to self-correct the answer/s, a score of 100% will be achieved. If nurses are unable to self-correct the answer/s OR more than three questions

⁶ Queensland Health. (2019). *Human Resources Policy: Orientation, induction and mandatory training G6 (QH-POL-183)*. Retrieved from https://www.health.qld.gov.au/_data/assets/pdf_file/0034/395845/qh-pol-183.pdf

are answered incorrectly on the first attempt, the nurse will be marked as unsuccessful. Nurses who are unsuccessful in assessment 2 (i.e. a score of 100% is not achieved) are unable to administer and/or check medications and intravenous fluids in the clinical area until a re-assessment is completed and a score of 100% is achieved. The Line Manager will be notified in addition to the service line Nursing Director. Re-assessment opportunities will be managed and provided by the service line Nurse Educator and tailored support, including additional opportunities for practice, will be negotiated and provided where knowledge deficits have been identified prior to completion of Assessment 3.

Re-Sit Assessment 3:

If one to three question/s are answered incorrectly, nurses will be provided with one opportunity to re-attempt these question/s. If nurses are able to self-correct the answer/s, a score of 100% will be achieved. If nurses are unable to self-correct the answer/s OR more than three questions are answered incorrectly on the first attempt, the nurse will be marked as unsuccessful. Nurses who are unsuccessful in assessment 3 (i.e. a score of 100% is not achieved) are unable to administer and/or check medications and intravenous fluids in the clinical area. Further actions will be considered and determined by the service line Nursing Director and Director of Nursing. The Assessment Process Flowchart in Appendix 4 outlines the re-assessment process and actions for assessment 1, 2 and 3 in diagrammatic format¹.

Practice Medication Calculation Questions, Formulae and Pre-Readings

You may wish to practice medication calculations prior to undertaking the assessment. The formulae that you will require for the assessment are included in Appendix 5. Practice medication calculation questions have been provided to support nurses in undertaking a self-assessment of medication administration knowledge prior to formal assessment. Please note, completion of the practice medication calculation questions is not mandatory and evidence of completion is not required. Please access the following link access links for revision to check your competency:

<https://nursing.flinders.edu.au/students/studyaids/drugcalculations/page.php?id=1> You are encouraged to complete the following revision quizzes:

- Unit Conversions
- Enteric (oral) medication calculations
- Oral suspension volume calculations and injectable solution volume calculations
- Infusion rate calculations
- Drops per minute calculations.

The following readings are suggested as pre-readings prior to medication calculation assessment completion:

- [APINCHS Classification of High Risk Medicines](#)
- [National Standard for User-applied Labelling of Injectable Medicines, Fluids and Lines](#)
- [Recommendations for Terminology, Abbreviations and Symbols Used in Medicines Administration](#)
- [NSQHS Standard 4: Medication Safety](#)
- [NSQHS Standard 6: Communicating for Safety](#)

Please contact the STARS Facility Nurse Educator using the contact details listed previously if you have any questions or concerns relating to the STARS Nursing Medication Calculation Assessment.

Cytotoxic Safety

The Antineoplastic Drug Administration Courses (ADAC) provide standardised education to support health professionals to develop the necessary knowledge and clinical skills to safely administer antineoplastic drugs and handle related waste safely. Nurses involved with the preparation, transport and/or administration of cytotoxic/antineoplastic drugs, or disposal of cytotoxic waste, require the appropriate training to ensure the protection of the operator, the environment, the patient and visitors⁷. eViQ Education provide eLearning resources to support completion of this training as relevant.

As STARS does not provide cancer care services, nurses are required to complete the Antineoplastic Drug Administration for the Non-Cancer Setting course. The course consists of three modules and completion of each module is based on risk assessment according to the nursing role. Please identify which modules you are required to complete below.



If you are an AIN, EN or RN, it is a requirement that you complete the relevant cytotoxic safety eLearning **within 30 days of commencement**. The eLearning is available through eViQ Education: <https://education.eviq.org.au/courses/antineoplastic-drug-administration-course-adac/antineoplastic-drug-administration-for-the-non-can>

Module 1: Handling antineoplastic drugs and related waste safely (AINs, ENs & RNs)

Successful completion of this module (Category 1) requires completing online in TMS. Search TMS for “cytotoxic” and complete the eLearning package.

⁷ EviQ Education. (2020). Antineoplastic drug administration for the non-cancer setting. Retrieved from: <https://education.eviq.org.au/courses/antineoplastic-drug-administration-course-adac/antineoplastic-drug-administration-for-the-non-can>

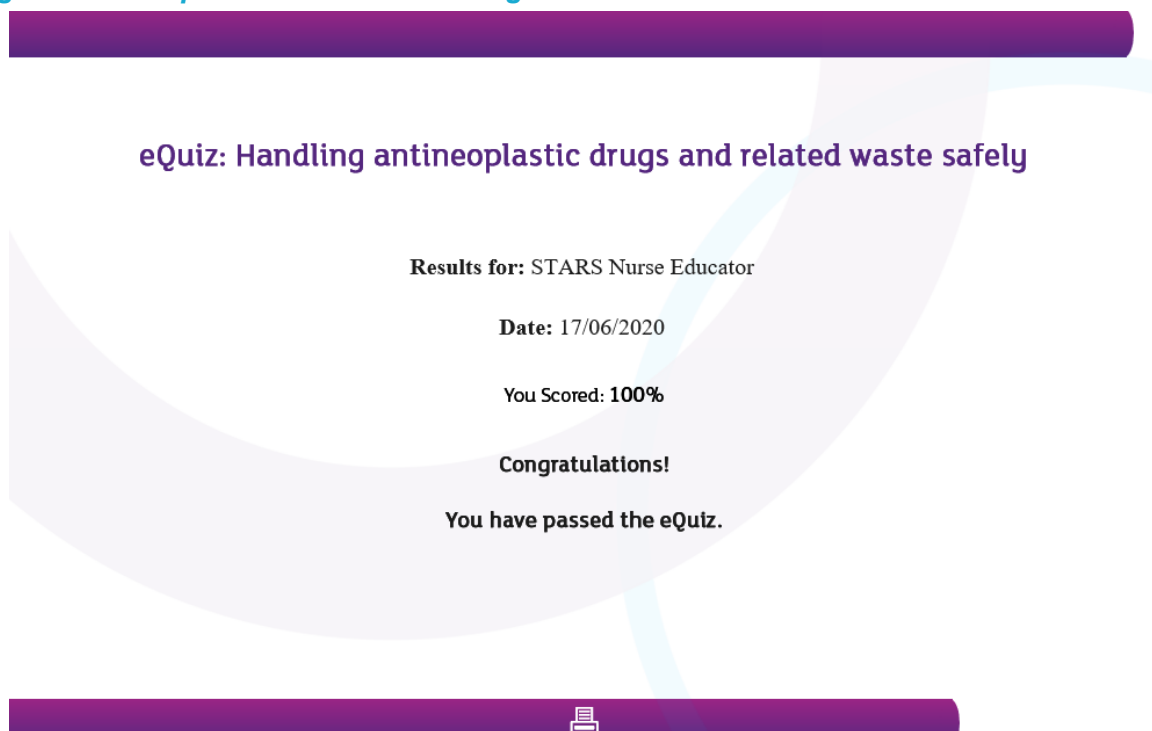
Any nurses administering oral cytotoxic medication are required to complete module 2 on eviQ. Those administering cytotoxic drugs other than oral (e.g. IV) are to complete module 3 on eviQ. Your Nurse Educator will provide information about the requirements for you in your work area.

If you use the eviQ Education eLearning, you can expect the following

- eLearning guide
- eQuiz

The required pass mark for the each eQuiz is 100%. If you do not achieve the required 100% pass mark, you may attempt the eQuiz again. Following module and eQuiz completion, please provide evidence of successful eQuiz completion by printing your results page (see Figure 2).

Figure 2: Example of eQuiz Results Page



N.B RNs and ENs may also be required to complete additional modules upon commencement based on clinical specialty risk assessment:

- **Module 2: Understanding antineoplastic drugs, assessing and educating patients receiving antineoplastic drugs**
- **Module 3: Administration of antineoplastic drugs.**

Your service line Nurse Educator will inform you of this requirement if applicable.

Blood Safety

The BloodSafe® Courses aim to improve outcomes for patients by developing participant's knowledge of safe clinical transfusion practice and effective patient blood management.



If you are an AIN, EN or RN, it is a requirement that you complete the relevant BloodSafe® eLearning within **30 days of commencement**. The BloodSafe® eLearning is to be completed through the TMS (refer to [Talent Management System](#) for information on how to access the training). In the TMS, search for the term 'clinical transfusion practice' or 'transporting blood' to locate the courses in the course catalogue.

Course 1: Clinical Transfusion Practice (ENs & RNs only)

Successful completion of this course requires completing:

- 6 x modules (approx. 2 hours)
- Multiple-choice assessment.

The required pass mark for the multiple-choice assessment is 80%. If you do not achieve the required 80% pass mark, you may attempt the multiple-choice assessment again.

Course 2: Transporting Blood (AINs & ENs only)

Successful completion of this course requires completing:

- 9 x modules (approx. 30 minutes)
- Multiple-choice assessment.

The required pass mark for the multiple-choice assessment is 80%. If you do not achieve the required 80% pass mark, you may attempt the multiple-choice assessment again.

Please note, you may be required to complete additional BloodSafe® Course/s according to risk assessment of individual staff role, functions and work/unit service delivery requirements.

Recognising and Responding to Acute Deterioration

We are currently awaiting the development of the MNHHS Deteriorating Patient Management Course (7 modules) and Electronic Acute Resuscitation Plan (eARP)/Paediatric ARP training modules.



1. MNHHS Deteriorating Patient Management Course
2. Electronic Acute Resuscitation Plan (eARP)/Paediatric ARP

MNHHS Deteriorating Patient Management Course (ENs & RNs only); Electronic Acute Resuscitation Plan (eARP)/Paediatric ARP (ENs & RNs only)

Conclusion

We look forward to meeting you at the STARS Nursing Orientation and welcoming you to our team! Please do not hesitate to contact the STARS Facility Nurse Educator if you have any questions or concerns prior to commencing in your new role.

Appendix 1: Commencement Orientation Checklist

Activity	Comments	Date
Payroll Number	Payroll number:	
Novell Login	Username: Password:	
Microsoft Outlook Email Address	Email address:	
myHR Access	Username: Password:	
ieMR Access	Username: Password:	
RiskMan Access	Username: Password:	
Identification Badge & Proximity Card Booking		
Uniform Services Booking		
First Roster Received		
Nurse Educator:		
Training/Orientation	Comments	Date
Herston Health Precinct Orientation Booking (if applicable)		
STARS Nursing Orientation Booking (if applicable)		
Computer Training Booking		
ieMR Training Booking		
Nursing Pre-Commencement eLearning		
MNHHS Mandatory Training: <ul style="list-style-type: none"> Aboriginal & Torres Strait Islander Cultural Practice Orientation Australian Charter of Healthcare Rights Code Of Conduct 	(AINs, ENs & RNs)	

<ul style="list-style-type: none"> • First Response Evacuation Instructions (FREI) • Fraud Awareness • Health and Safety Orientation • Healthcare Ergonomics Theory • Infection Control Awareness • Public Interest Disclosure (PID) • SaFE - Child Safety Awareness 		
Online Medication Calculation Assessment	(ENs & RNs only)	
Cytotoxic Safety eLearning <ul style="list-style-type: none"> • Module 1: Handling antineoplastic drugs and related waste safely 	(AINs, ENs & RNs)	
BloodSafe eLearning <ul style="list-style-type: none"> • Clinical Transfusion Practice • Transporting Blood 	(ENs & RNs only)	
	(AINs & ENs only)	
MNHHS Deteriorating Patient Management Course	(ENs & RNs only)	
Electronic Acute Resuscitation Plan (eARP)/Paediatric ARP	(ENs & RNs only)	

Appendix 2: STARS Nursing Orientation Program

STARS Nursing Orientation 1.5 Day Program

Day One

Time	Session	Facilitator	CPD Hours
0800 - 1100	<p>Herston Health Precinct Program</p> <p><i>The MNHHS Orientation has been designed to welcome new employees to the organisation with a focus on introducing our values and what they mean, to set expectations around the behaviours associated with the values and how these behaviours impact the organisation. New starters learn about the services and benefits available to them. Mandatory training is not included in the program.</i></p> <p>Morning tea: 0940 - 0955</p>	MNHHS Organisational Development	As per Herston Health Precinct Program information
1100 - 1110	Collection from Herston Health Precinct Program and escort to STARS	STARS Facility Nurse Educator	
1110 - 1130	Welcome to STARS Nursing Services	STARS Nursing Leadership Team	
1130 - 1215	<p>Values and Professional Standards</p> <ul style="list-style-type: none"> • MNHHS Values • NMBA Standards for Practice • Code of Conduct and Code of Ethics 	STARS Nursing Director – Rehabilitation and Geriatrics	45 minutes
1215 - 1245	Lunch		
1245 - 1315	SEALS	CNC SEALS	30 Minutes
1315-1415	<p>Basic Life Support Theory and Practice (Interdisciplinary)</p> <ul style="list-style-type: none"> • Management of the patient in cardiac arrest • COVID-19 considerations • Basic life support practice and feedback 	Basic Life Support	1.5 hours
1415 - 1445	<p>Documentation</p> <ul style="list-style-type: none"> • Digital documentation tips and tricks • Coding • Information security 	STARS Health Information Services	30 minutes
1445 - 1500	Afternoon Tea		
1500 - 1630	Safe Patient Handling in the Work Unit (Interdisciplinary)	Patient Handling Coaches (in work units)	1.5 hours

Day Two

Time	Session	Facilitator	CPD Hours
0800 - 0815	Welcome	STARS Nurse Educator	
0815 - 0830	STARS Education and Research Alliance (SERA)	Conjoint UQ Nursing Professor	15 minutes
0845 - 0930	National Safety and Quality Health Service Standards and Accreditation <ul style="list-style-type: none"> • ACHS Accreditation • Nursing responsibilities – Standards 1,2,5,6 &7 	Safety and Quality Team	45 minutes
0930- 1000	Clinical incident management (RiskMan)	Safety & Quality Team	30 minutes
1000 - 1020	Morning Tea		
1020 - 1100	Transition Support for the New Starter <ul style="list-style-type: none"> • Transition supports and resources • Performance and development planning (PDP) • Scope of Practice 	STARS Nurse Educator	40 minutes
1100- 1145	Infection Management and Prevention – Nursing	STARS CNC Infection Management and Prevention Service	45 minutes
1145-1215	Queensland Nurses & Midwives' Union (QNMU)	QNMU Representative	30 minutes
1215 - 1245	Lunch		
1245 - 1345	Basic Life Support Assessments (Interdisciplinary)	Basic Life Support Train the Trainers	15 minutes per assessment
1345 - 1400	Questions and Feedback	STARS Nurse Educator	
1400 - 1630	eLearning/Work Unit Induction	Service Line Nurse Educators	2.5 hours

Appendix 3: STARS Adult Basic Life Support Practical Assessment Tool

STARS Adult Basic Life Support Practical Assessment Tool

Date: _____ **Workplace:** _____

Name: _____ **Stream:** _____

Payroll

Number: _____ **Position:** _____

Nursing, Health Practitioner and Medical

<i>N.B This assessment tool has been developed based on the ANZCOR DRSABCD BLS Algorithm.</i>	Achieved	Not Achieved	Not Applicable
FIRST RESPONDER			
D – Danger?			
Assesses environment for danger and discusses appropriate management of situation.			
Dons personal protective equipment.			
R – Responsive?			
Assesses for response by talking to patient.			
Assesses for response by touching patient and providing painful stimuli (trapezius squeeze).			
S – Send for Help			
Calls out for local work unit assistance and/or activates emergency call button (if applicable).			
Uses phone to call 333 for facility wide assistance and states: <ul style="list-style-type: none"> Type of emergency _____ Exact location of the patient Treating medical team _____ OR Uses phone to call 000 based on location.			
A – Open Airway			
Assesses patient's airway for obstruction.			
Removes loose or foreign material obstructing airway and/or manages secretions by using suction and/or turning the head slightly and opening the mouth to allow foreign material and secretions to drain.			
Opens airway once cleared to assess for normal breathing using one of the following manoeuvres: <ul style="list-style-type: none"> Head tilt/chin lift. Jaw thrust (for patient with suspected cervical spinal injury). 			
B – Normal breathing?			
Assesses for breathing whilst opening the airway using the head tilt/chin lift or jaw thrust manoeuvre. <ul style="list-style-type: none"> Looks for movement of the upper abdomen or lower chest. 			

<i>N.B This assessment tool has been developed based on the ANZCOR DRSABCD BLS Algorithm.</i>	Achieved	Not Achieved	Not Applicable
<ul style="list-style-type: none"> Listens for escape of air from nose and mouth. Feels for movement of air at the mouth and nose. 			
C – Start CPR			
Places patient on their back on a firm surface to optimise effectiveness of compressions.			
Commences chest compressions if patient is unresponsive and not breathing normally.			
Demonstrates the following: <ul style="list-style-type: none"> Compression point: Middle of the lower half of the sternum. Compression depth: 1/3 of the chest (> 5 cm) allowing for full chest recoil. Compression technique: Heel of dominant hand with other hand on top and shoulders directly above compression point. Compression rate: 100-120 compressions per minute. 			
Places an obviously pregnant woman into the left lateral tilt position.			
Minimises interruptions/hands-off time to chest compressions.			
Provides a compression to ventilation ratio of 30:2 until a defibrillator is available.			
Pauses compressions for ventilations.			
SECOND RESPONDER			
D – Attach Defibrillator			
Appropriately prepares patient's skin for defibrillation by shaving excessive hair and removing moisture and/or medication patches.			
Connects defibrillator pads to defibrillator.			
Applies defibrillator pads to patient's chest whilst chest compressions continue.			
Places defibrillator pads in the anterior-lateral position (one pad slightly below the patient's right collar bone and one pad on the patient's left side below the arm pit). OR Places defibrillator pads in an anterior-posterior position (one pad placed on the patient's upper back between shoulder blades and one pad on the front of the patient's chest, slightly to the left side).			
Ensures defibrillator pads are placed at least 8cm from implantable devices.			
Defibrillator being used for this assessment: Lifepak 1000 <input type="checkbox"/> Lifepak 15 <input type="checkbox"/> Lifepak 20e <input type="checkbox"/>			
LIFEPAK 1000			
<ul style="list-style-type: none"> Turns on Lifepak 1000 by pressing green ON button. Follows prompts as per the defibrillator. Ensures no CPR or handling of the patient during analysis. Shockable Rhythm <ul style="list-style-type: none"> Ensures CPR is recommenced during charge. Loudly and clearly directs bystanders to stand clear once defibrillator has charged. 			

<i>N.B This assessment tool has been developed based on the ANZCOR DRSABCD BLS Algorithm.</i>	Achieved	Not Achieved	Not Applicable
<ul style="list-style-type: none"> • Performs a visual sweep to ensure that the environment is clear of oxygen and personnel. • Delivers shock to patient by pressing shock button and confirms shock delivery. • Advises to recommence CPR immediately following shock/motor response for 2 minutes. <p>Non-Shockable Rhythm</p> <ul style="list-style-type: none"> • Advises to recommence CPR immediately for 2 minutes if non-shockable rhythm is detected and no shock is advised. 			
LIFEPAK 15 AUTOMATIC MODE			
<ul style="list-style-type: none"> • Turns on Lifepak 15 by pressing green ON button. • Presses analyse button. • Ensures no CPR or handling of the patient during analysis. <p>Shockable Rhythm</p> <ul style="list-style-type: none"> • Ensures CPR is recommenced during charge. • Loudly and clearly directs bystanders to stand clear once defibrillator has charged. • Performs a visual sweep to ensure that the environment is clear of oxygen and personnel. • Delivers shock to patient by pressing shock button and confirms shock delivery. • Advises to recommence CPR immediately following shock/motor response for 2 minutes. <p>Non-Shockable Rhythm</p> <p>Advises to recommence CPR immediately for 2 minutes if non-shockable rhythm is detected and no shock is advised.</p>			
LIFEPAK 20e AUTOMATIC MODE			
<ul style="list-style-type: none"> • Turns on Lifepak 20e by pressing green ON button and keeps door closed (if applicable). • Follows prompts as per the defibrillator and presses analyse button. • Ensures no CPR or handling of the patient during analysis. <p>Shockable Rhythm</p> <ul style="list-style-type: none"> • Ensures CPR is recommenced during charge. • Loudly and clearly directs bystanders to stand clear once defibrillator has charged. • Performs a visual sweep to ensure that the environment is clear of oxygen and personnel. • Delivers shock to patient by pressing shock button and confirms shock delivery. • Advises to recommence CPR immediately following shock/motor response for 2 minutes. <p>Non-Shockable Rhythm</p>			

<i>N.B This assessment tool has been developed based on the ANZCOR DRSABCD BLS Algorithm.</i>	Achieved	Not Achieved	Not Applicable
<ul style="list-style-type: none"> • Advises to recommence CPR immediately for 2 minutes if non-shockable rhythm is detected and no shock is advised. 			
THIRD RESPONDER			
Brings a Workstation on Wheels (WOW) to the patient.			
Insert a backboard underneath the patient.			
Ventilates the patient effectively with a compression to ventilation ratio of 30:2 whilst maintaining airway patency through head tilt/chin lift or jaw thrust manoeuvre using one of the following methods: <ul style="list-style-type: none"> • Bag valve mask with room air. • Bag valve mask with 15L/minute oxygen (if available). 			
If ventilations are ineffective, demonstrates correct measurement and insertion of oropharyngeal airway adjunct.			BVM with O2 N/A for AIN
Places patient in the recovery position following return of spontaneous circulation by acknowledging normal breathing and purposeful movement.			N/A for AIN
Rapidly assesses the patient using the airway, breathing, circulation, disability, exposure (ABCDE) approach.			
Considers non-clinical requirements including: <ul style="list-style-type: none"> • Documentation. • Patient transfer. • Contacting next of kin. • Care of equipment and restocking/management of medication box after use. 			
Functions in accordance with Occupational Health and Safety Legislation, ANZCOR/ARC Guidelines and facility policy/procedures.			
Maintains professionalism and performs in an ethical and legal manner during resuscitation.			
Comments:			

Result (Circle):

Competent / Not Competent

Date:

Name of Assessor:

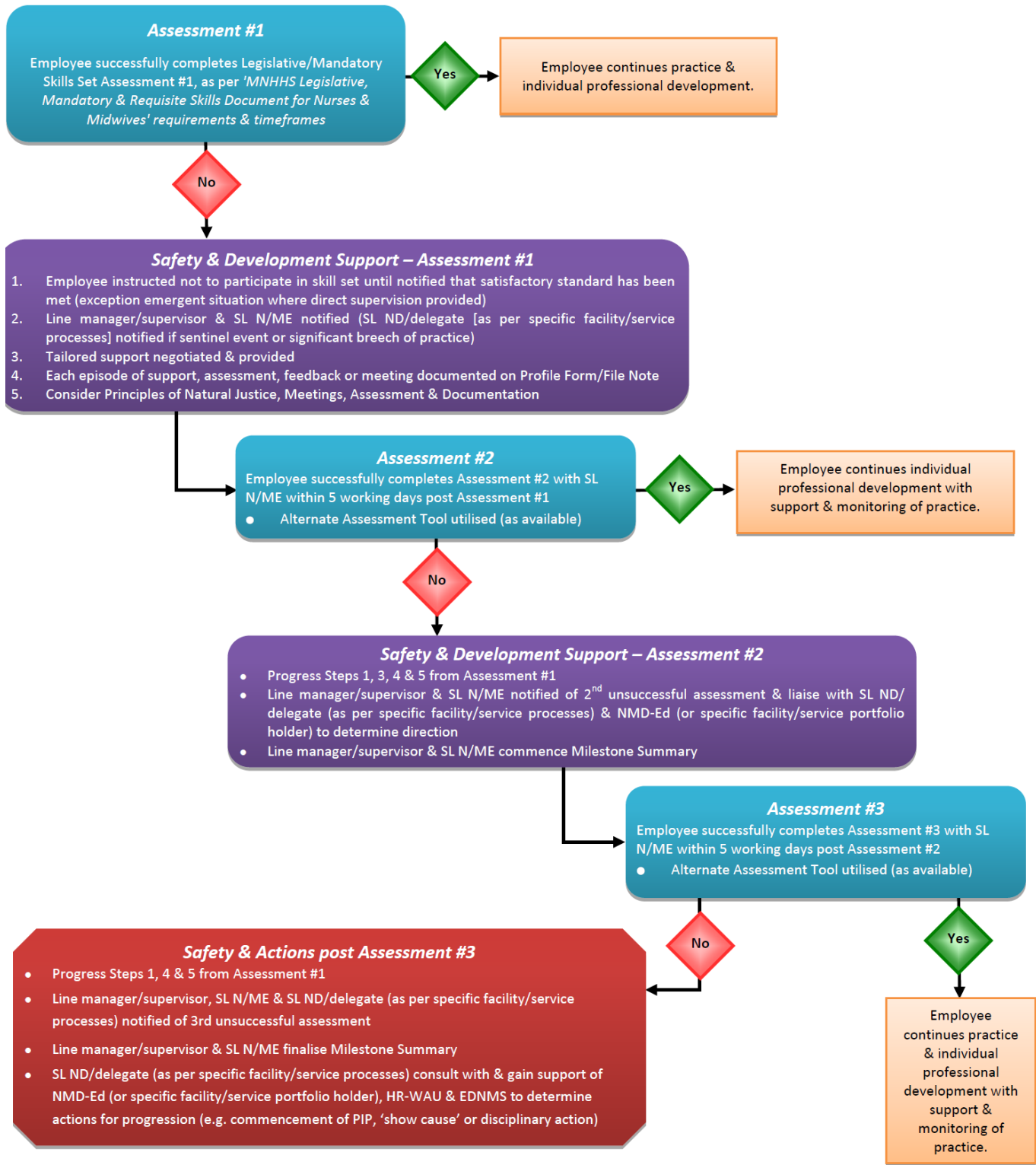
Signature:

Name of Participant:

Signature:

Appendix 4: Legislative and Mandatory Assessment Process Flowchart

This document should not be used in isolation but in alignment with the HR Policy G11: Performance Improvement & Performance Improvement Process Manual for Nursing & Midwifery Services – [Section 5](#).
N.B. These progressive assessments and remedial activities (as required) support Natural Justice and Assessment principles.



Appendix 5: Medication Calculation Formulae

Unit Conversions

To convert a larger unit to a smaller unit – multiply by 1000/move the decimal point three places to the right (e.g. 2.85 grams to milligrams = 2850 mg)

To convert a smaller unit to a larger unit – divide by 1000/move the decimal point three places to the left (e.g. 600 milligrams to grams = 0.6 g)

Enteric (Oral) Medication Calculations

$$\text{Number of tablets} = \frac{\text{Strength required}}{\text{Strength in stock}}$$

Oral Suspension Volume Calculations

$$\text{Volume required (mL)} = \frac{\text{Strength required}}{\text{Strength in stock}} \times \text{Volume of stock (mL)}$$

Injectable Solution Volume Calculations

$$\text{Volume required (mL)} = \frac{\text{Strength required}}{\text{Strength in stock}} \times \text{Volume of stock (mL)}$$

Infusion Rate Calculations

$$\text{Infusion rate (mL/hr)} = \frac{\text{Volume to be infused (mL)}}{\text{Duration of infusion (hrs)}}$$

Drops Per Minute Calculations

$$\text{Drip rate (drops/min)} = \frac{\text{Volume to be infused (mL)}}{\text{Time (minutes)}} \times \frac{\text{Drop factor}}{1}$$