‘Physiotherapy Student Induction’

June 2016

Review Date: June 2017
Physiotherapy Student Induction

Welcome to the physiotherapy team at the National Rehabilitation Hospital. The National Rehabilitation Hospital is a 123 bedded hospital offering a service to adults and children following neurological illness, injury or limb amputation. In partnership with the patients and families, it endeavours to achieve health and social gain through the effective treatment and education of patients who, following illness or injury, require dedicated, specialist interdisciplinary rehabilitation services. The hospital operates under the CARF (Commission on the Accreditation of Rehabilitation Facilities) framework, which adopts an interdisciplinary goal orientated treatment approach with the patient at its centre.

We hope your time with us is both professionally and personally rewarding. We look forward to helping you learn and develop new skills, as we do from you. We would ask that if you have any questions or suggestions at any stage to let us know. Good luck!

General Housekeeping:

Address: Rochestown Avenue, Dunlaoghaire, Co Dublin

Bus: 46a bus from City Centre to Bakers corner, hospital sign posted.
7, 45, 75, 4 (infrequent or longer walks needed)

Dart: Dun Laoghaire then 46a bus to Bakers corner

Car: Car parking is limited. We would encourage students to carpool where possible

Bike: Facilities for locking bikes are available. Please ensure you have an appropriate bicycle lock. Bicycles are left at the owner’s risk.

Clinical Practice Tutors: Sorcha Barry sorcha.barry@nrh.ie
Niamh Leonard Niamh.leonard@nrh.ie

Hours of work: 08:30 – 17:00 (Monday – Thursday)
09:00 – 17:00 (Friday)

Please note the 1st day start is 09:00

Breaks: 15’ minute break at 11:15, lunch from 12:30 to 13:30. There are microwave facilities available in the canteen and you are allowed bring your own lunch.

Clinical Hours: Morning: 08:30 – 12:30 (this is to allow ward staff adequate time to get patients to therapies and also to accommodate lunch which depending on the patient may be at ward level or in the patient canteen) To note: patients can attend therapies at 08:30 if able, and also after 12:30 if able (you may need to liaise with ward staff as medications are dispensed at 12:30)

Afternoon: 14:00 – 17:00

Sick Leave: If you are sick please contact the main department on 01-2355321 and speak to your relevant practice educator or call the practice tutor 01-2355332

Telephone: Dial ‘0’ for outside line; internal phone numbers are usually located beside the phone. Switchboard can be contacted by dialling 9.

Bleep System: To bleep – dial the bleep number followed by your extension. Wait until after two rapid beeps together and the beeping stops before leaving the message.
Facilities Available to Students:

Lockers: You will have an individual locker where you will store clothes, books etc. Please keep locker room tidy. Locker key must be returned on your last placement day. There is a charge €5 for lost keys.

Changing Facilities: Yes, and showering facilities also. Showering facilities can be busy so ensure you are in early enough to avail of showers as necessary.

Staff Room: Yes, no eating/drinking permitted in the staff room.

Library: Yes, there are a number of study areas with a small onsite medical library that can be accessed by students.

Additional Facilities: There are inservice materials, reference literature and some books available to you. When loaned, they will become your responsibility and will need to be reimbursed if lost. Books do not leave the department.

Study Area: Yes

Computer Access: Students will receive usernames and passwords for computer and internet access. Printers and copying can also be accessed with a personalised code. We ask that you regularly check and use internal e-mail for communicating with colleagues.

Professional Behaviour:

Uniform: Your uniform must adhere to your school of physiotherapy uniform policy and NRH uniform policy, and be clean and neat. It must not be worn outside the hospital. No black tops under white tunics/t-shirts. Runners are not allowed. Any shoes must be wipeable.

Uniforms must not be worn in or out of the hospital including break times.

Name badges must be worn and be visible at all times.

It is recommended to bring a thin navy cardigan/jumper to the placement site as the temperature changes can be great in different areas of the hospital. However this is not to be worn in any clinical areas.

Long hair must be tied back neatly.

Minimal make-up only.

No jewellery is allowed, the only exception is a single plain wedding band.

We operate a bare below the elbow policy for infection control purposes.

Additional Requirements: As you may have the opportunity to attend hydrotherapy, it is advisable to bring swimwear and keep it in your locker for the duration of the placement as slots may come up at short notice.

Personal Appointments: It is important not to schedule appointments during placement time but where this is inevitable, let the practice tutor & educator know on the first day of placement.

Punctuality: Lateness will not be tolerated unless in exceptional circumstances.

Placement Preparation: As far as is possible you will know your specific placement area before arrival. It is your responsibility to have adequately prepared for the placement by...
reviewing all the core requirements for background knowledge and the recommended reading in the pre-placement pack (in table below). Should the reading list not be available in your library you need to let the tutor know and she will liaise with the university to update their library stocks. It is expected that you will have some preparation done for the placement so if you are unclear as to where you’re being placed then contact the practice tutor

Learning Goals: Learning objectives will be set between you and your practice educator/tutor at the end of the first week of placement. These goals must be realistic and every effort must be made to achieve these goals.

Confidentiality: Follow code of conduct outlined by specific institution and ISCP. As a student at the NRH you will be signing a student agreement which presupposes you have been informed of the relevant policies when working in a clinical environment. Please make sure you are aware of these policies but you will have the opportunity to refresh on these while on placement.

Patient Records: All notes and patient documentation must be co-signed by your supervising practice educator/tutor.

Photocopying: Full chapters / books are not permitted to be photocopied under copyright law. Practice tutor / educator will advise you when permitted to photocopy in-service etc.

Accidents/Incidents: Report immediately to practice educator who will advise on procedure for completing accident/incident forms. Incident forms must be filled in within 48 hours of incident.

Practice Tutor Cover: If the practice tutor is absent/ unavailable for a scheduled teaching session then link back with individual practice educator.

CLINICAL INFORMATION

Placements offered as a full day or in combination

- Spinal Cord Injury/mixed spinal pathologies-traumatic and non-traumatic
- Brain Injury- Acquired brain injury traumatic and non traumatic
- Exercise therapy- Aerobic interventions, strength training, sport specific skills, group exercise therapy
- Paediatrics – mixed pathologies on an in-patient basis
- Amputee Rehabilitation (POLAR service; prosthetic orthotic limb absence rehab) - Primarily lower limb in-patient/day patient rehabilitation

Brain Injury Team: Lesley Corcoran – Clinical Specialist (3rd floor)
Catherine Cornall – Clinical Specialist (2nd floor)
Sarah O'Mahony – Senior (2nd floor)
Orla Friel – Senior (3rd floor)
– Senior (3rd floor)
– Senior (2nd floor)
– Senior (2nd floor)
Fiona Conroy-Acting Senior (3rd floor)
3.5 rotating staff grades

Spinal Injury Team: John Lynch – Clinical Specialist
Mairead Navin – Senior
Sorcha Barry – Senior
Ronan Langan – Senior
2.5 rotating staff grades

POLAR Team: Geoffrey Yu – Senior
1.0 rotating staff grade

**Paediatrics Team:** Una Cusack – Senior
0.5 rotating staff grade

**OPD Team:** Maeve Turner – Senior
Natasha Leonard – Senior
Sinead Clarke – Senior

**Exercise Therapy:** Lorenza Cafolla – Senior
Agnieszka Michalkiewicz – Sports therapist

****Please note the placement area you will be attending and source some of the textbooks/check relevant websites for your placement****

**Useful Background Knowledge for all placement areas**

Our programmes of care use the International Classification of Functioning (ICF) to detail the patient’s clinical information. We also undertake goal planning both within disciplines and on an interdisciplinary basis. Knowledge of the ICF and theory behind goal setting in rehabilitation will be beneficial. A useful website is the ICF core sets [www.icf-core-sets.org](http://www.icf-core-sets.org) or [www.icf-research-brand.org](http://www.icf-research-brand.org)

<table>
<thead>
<tr>
<th>Placement</th>
<th>Caseload</th>
<th>Background knowledge</th>
<th>Recommended reading</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brain Injury (BI) and Mixed</td>
<td>Traumatic brain injury</td>
<td>Neuroanatomy and physiology</td>
<td>• Motor control – theory and practice (Shumway, Cook and Wollacott)</td>
</tr>
<tr>
<td>Neurology</td>
<td>Non Traumatic brain injury Stroke Persistent Disorder of Consciousness</td>
<td>Functions of the lobes Principles of assessment Principles of normal movement Tone Outcome measures 24 hour postural management</td>
<td>• Neurological physiotherapy- a problem solving approach (Sue Edwards) • Neurological physiotherapy (Maria Stokes) • Muscle testing and function (Kendal Mc Creary Provinc) • 2015 Splinting for contracture management guidelines • SIGN Stroke Guideline 2008 • American Heart Association Stroke Guidelines 2016</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Neuro Paediatrics</td>
<td>(up to 17 Years old) - SCI - BI - Amputee</td>
<td>Developmental stages Principles of normal movement Principles of assessment</td>
<td>Steps to follow Right in the middle Tetraplegia and paraplegia (Sue Edwards)</td>
</tr>
<tr>
<td>Amputee Rehabilitation</td>
<td>Vascular amputation Traumatic amputation Primarily Lower limb</td>
<td>Anatomy and physiology of the cardiovascular and respiratory system Diabetes/PVD Principles of assessment Beurgers disease Osteoporosis PPAM aid Principles of gait analysis Physiology of exercise Psychology of loss and grief</td>
<td>• BACPAR student guidelines 2013 Therapy for Amputees (Engstrom and Van der Ver) Cash’s textbook of Vascular Disease</td>
</tr>
</tbody>
</table>

Useful websites:
- [www.rehabmeasures.org](http://www.rehabmeasures.org)
- [www.askdoris.org](http://www.askdoris.org)
- [www.strokengine.org](http://www.strokengine.org)
- [http://www.ebrsr.com](http://www.ebrsr.com)
- [http://www.neuropt.org/professional-resources/neurology-section-outcome-measures-recommendations](http://www.neuropt.org/professional-resources/neurology-section-outcome-measures-recommendations)
- [http://www.thechildrenstrust.org.uk](http://www.thechildrenstrust.org.uk)
- [www.auspar.com](http://www.auspar.com)
- [www.amputee.ie](http://www.amputee.ie)
- [www.rehabmeasures.org](http://www.rehabmeasures.org)
- [www.amputee.ie](http://www.amputee.ie)
- [www.rehabmeasures.org](http://www.rehabmeasures.org)
Outpatients
All patient groups – except paediatrics
A combination of all of the above client groups. There will also be a lot of involvement in clinics and group classes
Highlighted books from above sections.

Useful websites:
www.rehabmeasures.org

Your Schedule:
You will be provided with a weekly schedule. Your practice educator may also have a schedule for you which will be located in the relevant ward floor by the area’s physiotherapy desk.

Located behind the schedules is a copy of the patient timetables. Check these timetables when a patient is finished in physiotherapy to see if they are needed at another therapy.

Time Tabling:
Physiotherapist schedules are done on a Wednesday evening or Thursday morning by senior therapists for the following week. It is important if you have any scheduled leave, joint sessions, or need indirect clinical time that you write this in the brain injury diary.

Conferences:
Each patient in their relevant programme should have each of the following during their admission:
- Goal setting conference
- Review goal conference
- Discharge conference
- Family conference

Goal setting conference should occur within 2 weeks of admission. At the goal setting conference, goals will be jointly agreed by the team with date of discharge and family conference also decided. The content of the goal setting document is communicated back to the patient and family by medical social work.

Review conference generally happens midway through the admission. At this conference an update is provided by the relevant team members and goals can be revised as necessary.

Family conference dates are decided upon at goal setting. This meeting is a chance to meet the team collectively, for therapists to outline progress and plans for the future and for the patient and family members to ask questions. If you cannot attend due to leave a senior team member should attend or a handover may be given to another discipline. Discuss this with one of your seniors where necessary.

Discharge conference usually occurs in the final week of admission. The team go through initial and revised goals to see if they are ‘Achieved’, ‘Partially Met’ or ‘Unmet’. Also, it is an opportunity to discuss plans for referral to other services.

Conference days for each ward are outlined below. It is essential that you check the conference schedules when they are emailed out to see if you have a patient up for goal setting conference, review conference or discharge conference. For these conferences you should attend and this should be scheduled by the senior therapists on your team. Also it is essential that the interdisciplinary team discharge report is complete before the discharge conference so that it can be signed off and sent.
If you don’t have a relevant conference as outlined above. It is essential that you fill in an update of your patients in the ‘Chart Round’ folder. This should be done on the day before or morning of the relevant conference. To note: some conferences begin at 08:30.

Number of sessions: 3 – 4 individual 1:1 physiotherapy sessions.

This can be further complemented by additional therapy such as exercise therapy, hydrotherapy and physiotherapy assistant or physiotherapy volunteer sessions. Any opportunity to provide increased dosage and intensity should be thought of in conjunction with the team.

Getting to/from Wards: There is no portering service within the NRH.

Generally patients are dropped down by ward staff to the gym. If you want to see a patient at ward level this should be written on their ward schedule behind their bed so relevant staff are aware. At the end of a physiotherapy session a patient may be able to make their own way to their next session, an assistant can bring them or you should drop them. You should check their schedule (behind our timetables) to see if they are for another therapy after physiotherapy.

Length of sessions: Generally 1 hour.

Sessions on occasion may be shorter or longer as necessary. Generally, the 11:30 time slot is often used for those patients who need longer time i.e. until 13:00. It is worth remembering if you are keeping a patient after 12:30 that they may potentially be missing lunch or their medications.

Education:

Tutorials: Daily

Interdisciplinary Tutorials: Weekly

Inservice Training: Wednesday mornings from 08:30 – 09:30

Neurobehavioural Lecture: Once a month, on a Monday, check your email for the topic to be presented

Radiology Conference: Once a month, Tuesday morning at 08:00

Grand Round: Bimonthly – see email notification

By signing the below you confirm that this document has been gone through with the named senior staff member, an opportunity for questions and answers has been provided and you understand the information to begin working within the National Rehabilitation Hospital as a physiotherapy student

____________________________   ____________________ ________
Physiotherapy student signature   Senior staff member signature

____________________________   ____________________ ________
Physiotherapy student (PRINT NAME)   Senior staff member (PRINT NAME)

July 2015