

STUDENT HANDBOOK FOR CLINICAL PLACEMENT



Foreword

This handbook has been designed to provide you with information to make your experience within the Murrumbidgee Local Health District safe, valuable and enjoyable.

We hope it will provide you with some practical advice and assist in making your Clinical Placement a satisfying and rewarding experience.

Murrumbidgee Local Health District welcomes you and wishes you well for the exciting future that lies ahead.

Acknowledgements

Murrumbidgee Local Health District, would like to thank all involved for their collaboration in developing this document. We would also like to acknowledge the work that has gone before, and thank the past authors for their tireless efforts. We would like to also thank those who provided evaluations and constructive comments that further enable us to develop the Student Handbook for Clinical Placement.

Table of Contents

Foreword	1
Acknowledgements	1
Clinical Placements	3
Placement Requirements & Considerations	4
What it means to be supernumerary?	4
National Criminal Records Check.....	4
When you have a disclosable result	4
Immunisation	5
Workplace Health and Safety.....	6
Duty of Workers and Other Persons at the Workplace e.g. Visitors / Patients / Clients	6
Security	6
ID Badges	6
Fire Safety	6
Emergency Protocols	6
Infection Control.....	6
Sharp Objects.....	7
Occupational Exposure to Blood Borne Viruses	7
General Safety in the Workplace.....	7
Facilities available to students	8
Staff centre: Accommodation:	8
Employee Assistance Program (EAP)	8
Expectations of Student Behaviour.....	9
CORE Values – Collaboration, Openness, Respect, Empowerment.....	9
Student Performance Guidelines	10
Day 1 orientation.....	10
Should I answer that?	10
Mobile phones	11
Student Placement Survey.....	11
Appendix 1 – Student Checklist	12
Appendix 2 – Latex Sensitivity (Allergy).....	13
Appendix 3 – Work Health & Safety Induction	20
Appendix 4 – Employee Assistance Program	23
Appendix 5 – Clinical Placement Checklist	26

Clinical Placements

Please be sure to read through this handbook and complete the required documentation needed on your first day of orientation to the facility.

Consult the check list we have included so you have the correct paperwork ready for checking or you may be unable to start your placement.

Clinical Placements provide an opportunity to apply skills and theory in real life situations, in a variety of clinical settings.

Gaining experience in different types of health care environments is important for professional development. It helps inform career choice and enables students to apply and gain competence in the many different skills required across various health care settings.

On the first day of your placement you will meet with your supervisor and will then be given an Orientation of the facility which will include WHS (Work Health and Safety) induction. You will need to take the WHS forms with you to your placement.

NOTE: Please make sure that **prior** to commencing your placement you have advised your supervisor of any known allergies/medical conditions so that appropriate measures can be implemented to ensure a safe training environment.

Placement Requirements & Considerations

In preparing for a clinical placement, there are some important requirements to organise and particular information to gather. Some preparations are required by law and some are just good practice to help you get the most out of your clinical experience. Please ensure you have read the Workplace Learning Handbook from your own educational institution.

Look up the facility you will be visiting online. You can find out a lot about their services, the facilities available, parking, public transport and the mission of the organisation.

What it means to be supernumerary

Your presence is **in addition to** the regular staff, **not a substitution for** a member of staff. This doesn't mean you can stand back and watch. You are there to learn with all the duties, knowledge and skills that the role encompasses. This is your time to practice with the safety of being supervised and supported.

You are accountable for any delegated task you undertake.

Always ask for assistance if you are unsure.

National Criminal Records Check

All students must provide a National Criminal Record Check prior to commencement of placement. Under NSW Health Policy (PD2016_047) the National Criminal Record Check is valid for 3 years from the date of issue.

Overseas Police Certificates and Statutory Declarations are valid for the duration of the course. Keep these documents for presentation to your supervisor where your clinical placement is to be undertaken.

Students must advise the Health Service in a timely manner of any change made to their criminal record during their training.

When you have a disclosable result

If your National Police Certificate (or overseas Police Certificates /Statutory Declaration for overseas students) shows any offences or pending charges, you are required to apply to the NSW Department of Health, Corporate Governance and Risk Management, External Relations and Employment Screening Unit (ERESU) for authority to undertake clinical placements within NSW Public Health Facilities.

ERESU will complete a risk assessment and if deemed suitable for placements within NSW Public Health Facilities, you will be issued with a 'Clinical Placement Authority' card or a Conditional Letter.

Student Risk Assessment Form is available on the NSW Health Department website:

http://www.health.nsw.gov.au/careers/student_clearance/Pages/forms.aspx and emailed to HSNSW-esruenquiries@health.nsw.gov.au

Code of Conduct, Privacy and Confidentiality: The NSW Health Code of Conduct for all employees can be found on the NSW Health website http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2015_049

Please ensure that you read and understand the content of this document prior to placement and ask your supervisor about any aspects requiring clarification.

Driving whilst on Placement: Whilst on clinical placement students may not use Health Service vehicles other than to accompany a staff member for placement related activities, such as client home visits and meetings.

Alarms, buzzers and equipment: Don't turn anything on or off without asking first. Alarms are there to alert staff to various things and will be taken care of by them.

Non-smoking: All NSW Health sites are now smoke-free in buildings and grounds.

Child Abuse Protocol: As a student doing a clinical placement within a Local Health District you are obliged, pursuant to NSW Health Policy, to make a report to the Family and Community Services (FACS) if you have reasonable grounds to suspect that a child under 16 years of age is at risk of harm from abuse or neglect. Please consult with your Supervisor on the processes to be followed or contact the Area Child Protection (PANOC) Coordinator for further details.

Library and Internet use: If and where available, you may use these facilities, as directed and arranged by your Supervisor.

Non Discriminatory Practice: Murrumbidgee Local Health District has a strong access and equity focus in providing quality services. Patient/client care is our first priority. Your queries may be directed to your Supervisor. If you have concerns about your Supervisor's behaviour or practice you should address these with your university / college coordinator.

Immunisation

Immunisation is the responsibility of the student. Students should refer to a doctor of their choice for discussion and advice. Students will come into contact with a large variety of individuals while attending clinical placement. Some of these people may have a vaccine preventable disease. All students are categorised as a Category A Health Care Worker. **Category A** - denotes direct physical contact with patients/clients, deceased persons, blood, body substances or infectious material or surfaces/equipment that might contain these or contact that would allow acquisition and/or transmission of a specified infectious disease by respiratory means. (PD2018_009)

For the protection of students and of potential clients, evidence of vaccination status is required by certain clinical placement agencies prior to attendance.

Further information can be found at:

http://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2018_009 and HETI have created 3 videos to assist students <http://www.heti.nsw.gov.au/ICTN/Greater-Metro-ICTN/Student-verification1/>

Refer to:

- Attachment 1 Risk Categorisation Guidelines
- Attachment 4 Checklist: Evidence required from Category A Applicants
- Attachment 5 Specified Infectious Diseases: Risks and Consequences of Exposure
- Attachment 6 Undertaking/Declaration Form

Specified Infectious Diseases

- Diphtheria
- Pertussis
- Tetanus
- Measles
- Mumps
- Rubella
- Hepatitis B
- Varicella
- Tuberculosis
- Influenza (recommended)

Workplace Health and Safety

Duty of Workers and Other Persons at the Workplace e.g. Visitors / Patients / Clients

- Take reasonable care for their own health and safety.
- Take reasonable care that their actions do not harm the health and safety of others.
- Comply with any reasonable instruction that is given to ensure health and safety.
- Workers must cooperate with any reasonable policy or procedure that they have been made aware of relating to health and safety and report any hazard.

Security

Everyone needs to be aware of personal and professional security issues and precautions in their workplace and when coming and leaving their workplace. Always speak to your Supervisor or the staff in your area if you have any concerns, notice anything unusual or anyone acting suspiciously. Lock away your personal belongings in a safe place that the staff will show you. Minimize the amount of money and valuables that you bring with you.

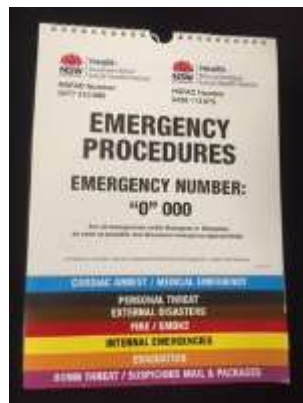
ID Badges

Students are advised that they must wear their University photo identification badge, clearly displayed at all times, while on placement.

Fire Safety

Fire-fighting and evacuation plans are in place in case of emergency. Please familiarise yourself with the procedures and note the exits from the area in which you work.

Emergency Protocols



Flip charts will be provided in all NSW Health facilities and emergency situations will be explained to you at your facility Orientation.

Infection Control

All students need to be aware of, and comply with, NSW Health Policy Directives relating to infection control and staff health. Your Supervisor will inform you of infection control Policy and Procedures.

Sharp Objects

If you see a needle, broken glass or anything that could cut or injure, please do not touch it. Seek assistance from a staff member for the correct disposal procedure.

Occupational Exposure to Blood Borne Viruses

(Used needle stick / blade injuries, body substance splashes)

Occupational exposure (OE) to blood borne viruses is an incident which can occur during the course of a person's employment and involves contact with someone else's blood or other body substances. Such exposures may put the employee at risk of acquiring HIV, hepatitis B or C.

Adherence to standard infection control practices, such as the use of standard precautions and point of use sharps disposal remain the first line of protection for health care workers against occupational exposure to blood borne viruses.

First aid:

- Wash the exposure site with soap and water (do not squeeze and cover with a dry dressing)
- Eyes – if contaminated rinse gently but thoroughly with water or normal saline
- Mouth – spit out and rinse several times with water
- Clothing – if heavily contaminated, change and shower if necessary

Report: Immediately report the incident to your manager who will arrange for OE incident management to occur. Every employee must report any OE sustained.

IIMS Report: this must be completed for each OE. The name of the injured HCW need not be included but information about the incident is required to ensure any necessary changes can be made to ensure the incident doesn't reoccur

Follow up: If you choose to be managed by the Murrumbidgee Local Health District, you will receive pathology forms for follow up blood tests at six weeks, 3 months and 6 months.

Note: These tests will have to be performed at a MLHD site.

The Infection Control Resource Centre, which runs the **Needle stick Hotline (1800 804 823)**, advise that Medical and Nursing students can access the Hotline but need to state that they are Health Care Worker students. Alternatively the student's Supervisor can phone on their behalf.

General Safety in the Workplace

WHS: The first consideration is always to yourself – to keep safe, whatever the situation. The second is to be alert to the environment. Thirdly, if you are concerned about anything at all, do not hesitate to speak to your Supervisor.

Moving Patients or Objects: Don't lift or move anything without assistance. There are proper techniques that must always be used to protect people's body from injury. The staff will demonstrate these to you as required.

Incident reporting: If you witness any incident that causes you concern, please report it immediately to your Supervisor.

Facilities available to students

Locations and access will be discussed at your facility Orientation:

Staff centre:

Accommodation:

Lockers:

My Emergency contacts:

Supervisor:

Unit / Ward:

Pastoral Care Service:

The Pastoral Care Service provides a pastoral and spiritual ministry to patients, families and staff appropriate to their particular beliefs and consistent with the Australian Council for HealthCare Standards requirements for chaplaincy and pastoral care.

Note:

1. The WHS Induction Checklist is to be completed both the student and supervisor at the commencement of each placement.
2. Students are to inform supervisors of any known medical condition, disability, pregnancy prior to the commencement of each placement

Employee Assistance Program (EAP)

EAP is a confidential counselling service for employees and their eligible family members, paid for by Murrumbidgee LHD at no cost to you. This service is provided by an independent, professional organisation called AccessEAP. All counsellors are qualified, experienced professionals who have extensive training and experience in counselling, coaching and workplace consulting. MLHD extends this service to students who may require confidential assistance whilst on placement with the LHD. For more information speak with your placement supervisor/facility manager.

Expectations of Student Behaviour

Before you can participate in the delivery of care to patients and/or residents, you need to understand the professional codes and guidelines that govern the profession. These will inform you of behaviours, attitudes and the general conduct that you will be expected to demonstrate while on clinical placement.

CORE Values – Collaboration, Openness, Respect, Empowerment

Whilst on their clinical placement students are expected and encouraged to demonstrate professional behaviour in the following ways:

- Behave in a respectful manner to supervisors, colleagues, patients and families
- Respect the dignity, culture, ethnicity, values and beliefs of people receiving care and treatment, and of their colleagues.
- Treat personal information obtained in a professional capacity as private and confidential. Students must be aware that confidentiality still applies after their placement has been completed.
- Dress in a manner acceptable to the Health Service and in accordance with work health and safety principles.
- Acknowledge and respond to constructive criticism.
- Be sure to discuss any issue or incident that causes you concern on your placement with your Supervisor or your college or university coordinator.
- Provide impartial, honest and accurate information in relation to care and healthcare products.
- Support the health, wellbeing and informed decision making of people requiring or receiving care.

Student Performance Guidelines

On all clinical rotations, students will be expected to:

- provide care with consideration for clients' age, language and cultural, socioeconomic, spiritual, auditory, vocal and visual needs
- promote effective communication with clients, clinical staff and peers
- uphold privacy and confidentiality principles
- observe professional responsibilities and conduct oneself in a professional manner consistent with ethical and legal principles
- comply with infection control policy and occupational health and safety policy
- gain an understanding of how multidisciplinary teams function in each environment, identify the roles and particular functions of the multidisciplinary teams in each clinical area they visit
- set personal and professional goals and actively seek learning opportunities
- be prepared to answer questions to explain the rationale for provided care.

It is important to remember that even if you have carried out a procedure competently once, you should take advantage of other opportunities to perform the procedure.

Only through time and repetition can confidence grow. You always learn more about the procedure when performing it on different people in various settings. The validity of the assessment lies in being able to demonstrate competence in a number of clinical contexts.

Day 1 Orientation

Orientation day is about meeting your supervisor and staff, and finding out about the expectations of you from your supervisor and the host organisation. The plan of how you are to be assessed will be discussed. It is the time for you to share the goals you have set for yourself, check to see if they are achievable in this setting and start working out strategies to achieve them.

The best thing is to observe how the systems are run. Try to use what you have learnt and apply it, but take on board the way other people perform their jobs

Remember you are a guest in the facility. Take an interest in everyone and what is happening. Be aware of your body language, because it is just as important as what you say. Be polite and respectful at all times.

Should I answer that?

It is important to understand your role and responsibilities as a student.

If you find yourself alone in the office when the phone rings, please answer it and be prepared to write down a message. Make sure you state your location, your name and designation. For example, 'Hello, Ward 12, student Sally Jones speaking.'

You need to record the caller's name and position (e.g. doctor, pharmacist, relative), the message, who the message is for, the date and time of the call. Then you note your name as the message taker, in case the recipient has any questions.

The guidelines for answering patient call systems (buzzers) may differ from ward to ward. Speak to your supervisor about what they expect of you if a patient rings the buzzer. Generally, it is important to be aware of what is happening in your allocated area.

If a buzzer in your area rings, please be prepared to assist by answering it promptly. Even if you are not able to help the patient with their enquiry or issue, answering promptly is reassuring to the patient. You can seek the assistance from your supervisor or another staff member. It is part of being a team. If you notice a patient from another area buzzing for some time, you can see what the concern is and follow up the enquiry with the allocated staff member.

You never know if a patient is calling because they have an urgent need, an emergency, or something simple like passing them a tissue. The point is, you won't know unless you go and check the patient!

Mobile phones

You are not to use your mobile phone **at all** while on duty. You **cannot** answer it or send and receive text messages.



Student Placement Survey

This survey has been designed for students from all disciplines undertaking a placement within MLHD. The responses to the questions will be a valuable tool in assessing the Health Service's placement program. The survey is anonymous and **all the information provided will be treated confidentially.**

<http://www.surveymonkey.com/r/QFM52MP>

Appendix 1 – Student Checklist

Information required before commencement	Notes	<input checked="" type="checkbox"/>
Facility details	Find out: <ul style="list-style-type: none"> • Name of the organisation • Address • Phone number • Location • Contact person 	
Facility amenities	<ul style="list-style-type: none"> • Are you able to order lunch or do you need to bring your own? • What is the closest public transport or parking (including cost) 	
Review facility website	Review: <ul style="list-style-type: none"> • History • Mission • Services provided 	
Type of placement	Rehab / Acute / Psychiatric / Community	
Dates of placement and your roster	Include orientation day information. Make sure you know the start time, person to meet and meeting place.	
Documentation		
National Criminal Record Check (NCRC)	All students must provide a National Criminal Record Check	
WHS induction checklist	Ensure you have the checklist ready for your first day of placement. Required for every clinical placement	
Latex allergy checklist	Make sure you have completed your section of the checklist (refer to attached documentation)	
Read the information on the Employee Assistance Program (EAP)	The EAP is a voluntary and confidential counselling service paid for by your employer	
Clinical placement checklist	To be completed on commencement by your supervisor	
The day before your placement (ensure you have ready)		
Uniform	You must have: <ul style="list-style-type: none"> • Covered leather-like shoes with non-slip soles • Clean, neat, professional attire • Bare below the elbows • Long hair secured above the collar • No jewellery <ul style="list-style-type: none"> – a plain wedding ring may be worn) – No engraving or stones • No nail polish, shellac artificial nails or tips 	
Photo ID badge	Must be worn and visible	
Stafflink ID number	Required for eMR access and is available from your education provider	
Stationery items i.e. pens, calculator, nurses' fob watch (if applicable)	No lanyards are to be worn	

Appendix 2 – Latex Sensitivity (Allergy)

Latex gloves have proven to be effective in preventing transmission of many infectious diseases to health care workers. But for some workers, exposures to latex may result in allergic reactions. Reports of such reactions have increased in recent years among health care workers.

What is Latex?

In this Factsheet, the term “latex” refers to natural rubber latex, the product manufactured from the milky fluid derived from the rubber tree, *Hevea brasiliensis*. Several types of synthetic rubber are also referred to as “latex”, but these do not release the proteins that cause allergic reactions.

What is latex allergy?

Latex allergy is a reaction to certain proteins in latex rubber. The amount of latex exposure needed to produce sensitisation or an allergic reaction is unknown. Increasing the exposure to latex proteins increases the risk of developing allergic symptoms.

In sensitised persons, symptoms usually begin within minutes of exposure; but they can occur hours later and can be quite varied. Mild reactions to latex involve skin redness, rash, hives, or itching. More severe reactions may involve respiratory symptoms such as runny nose, sneezing, itchy eyes, scratchy throat and asthma (difficult breathing, coughing spells and wheezing). Rarely, shock may occur; however, a life-threatening reaction is seldom the first sign of latex allergy.

Products containing Latex:

Note: MLHD Clinical Products and Corporate Support Unit have removed Non-sterile latex Examination Gloves from Inventory and replaced these with Nitrile (Latex Free) Examination Gloves. The tactile feel of the Nitrile gloves will be difference and workers may need to use a larger size.

A wide variety of products contain latex: Medical supplies, personal protective equipment and numerous household objects. Most people who encounter latex products only through their general use in society have no health problems from the use of these products. Workers who repeatedly use latex products are the focus of this Factsheet.

The following are some examples of products that may contain latex: (Some of the listed products are available in latex-free forms.)

Individuals who already have latex sensitivity should be aware of latex-containing products that may trigger an allergic reaction (see table).

Emergency Equipment	PPE	Hospital Supplies	Household Objects
Blood pressure cuffs	Gloves	Anaesthesia masks	Car/truck tyres
Stethoscopes	Surgical masks	Rubber tops of multi dose vials	Motorcycle and bicycle handgrips
Disposable gloves	Goggles	Wound drains	Carpeting
Oral and nasal airways	Respirators	Injection ports	Swimming goggles
Endotracheal tubes	Rubber aprons	Catheters	Racquet handles
Dental dams			Shoe soles
Tourniquets			Expandable fabric (waistband)
Intravenous tubing	Office Supplies	Miscellaneous Items	Dishwashing gloves
Syringes	Rubber bands	Poinsettia plants	Hot water bottles
Electrode pads	Erasers	Chewing gum	Condoms
			Diaphragms
			Balloons
			Pacifiers (dummies)
			Baby bottle nipples
			Buttons on a remote control unit

Who is at risk of developing latex allergy?

Health care workers are at risk of developing latex allergy because they use latex gloves. Workers with less glove use (such as housekeepers, hairdressers, and workers in industries that manufacture latex products) are also at risk.

Is skin contact the only type of latex exposure?

NO. Latex proteins become fastened to the lubricant powder used in some gloves. When workers change gloves, the protein/powder particles become airborne and can be inhaled. The LHD does not use powdered gloves, however you need to be aware and mindful of the products used at home (e.g. dishwashing / cleaning gloves etc.).

Sources of exposure

People who are sensitive to latex may have an allergic reaction if they come into contact with latex products, such as balloons, rubber bands, industrial gloves, rubber boots, shoes, condoms, dental dams, contraceptive sponges, adhesive tape, elastic bandages, tourniquets and bulb syringes.

Many fruits and foods have similar proteins to latex and can also cause allergic reactions. These foods include banana, avocado, chestnut, passionfruit, kiwi fruit, potatoes, tomatoes, figs, apples, celery, melons, pineapples, milk, papaya, grapes and pitted fruit.

Routes of exposure

There are various routes of exposure to latex:

Skin

Skin exposure can occur when handling latex products, for example, medical devices such as medical gloves, tourniquets and electrocardiogram electrodes, adhesive tapes, condom catheters and ileostomy bags.

Mucous membranes

Latex proteins contacting mucous membranes of the mouth, vagina, urethra or rectum can lead to severe reactions. This contact might happen during physical examinations.

Inhalation

Corn starch powder is applied to latex gloves during the manufacturing process to give the gloves a smooth feel and make them non-sticky. However, latex protein can adhere to the surface of the corn starch particles. When the person removes the glove, the corn starch powder is easily aerosolized and can cause asthmatic reactions if inhaled.

Intravascular

Exposure through intravascular administration of latex proteins can result from disposable syringe plungers, medications stored in vials with rubber stoppers and intravenous tubing with latex injection ports.

How is latex allergy treated?

Detecting symptoms early, reducing exposure to latex and obtaining early medical advice are important to prevent long-term health effects. Once a worker becomes allergic to latex, special precautions are needed to prevent exposures. Certain medications may reduce the allergy symptoms; complete latex avoidance, although quite difficult, is the most effective approach.

Are there other types of reactions to latex besides latex allergy?

YES. The most common reaction to latex products is Irritant Contact Dermatitis – the development of dry, itchy, irritated areas on the skin, usually the hands. This reaction is caused by irritation from wearing gloves and by exposure to the powders added to them. Irritant contact dermatitis is not a true allergy. Chemical Sensitivity Dermatitis results from the chemicals added to latex during harvesting, processing or manufacturing. These chemicals can cause a skin rash. Neither irritant contact dermatitis nor chemical sensitivity dermatitis is a true allergy.

How can I protect myself from latex allergy?

Take the following steps to protect yourself from latex exposure and allergy in the workplace:

1. Choose NON-LATEX gloves.
2. If you do not have any allergy symptoms and you choose latex gloves, only used powder-free gloves with reduced protein content.
 - Such gloves reduce exposures to latex protein and thus reduce the risk of latex allergy.
 - So-called hypoallergenic latex gloves do not reduce the risk of latex allergy. However, they may reduce reactions to chemical additives in the latex (allergic contact dermatitis).
3. Use appropriate work practices to reduce the chance of reactions to latex.
4. When wearing latex gloves, do not use oil-based hand creams or lotions which can cause glove deterioration.
 - After removing latex gloves, wash hands with a liquid neutral soap, running water and pat dry thoroughly using a paper towel.
 - Practice good housekeeping: frequently clean areas and equipment potentially contaminated with latex containing dust.
 - Take advantage of all latex allergy education and training resources provided and become familiar with procedures for preventing latex allergy.
5. Learn to recognise the symptoms of latex allergy: skin rash, hives, flushing, itching, and nasal, eye or sinus symptoms, asthma and (rarely) anaphylactic shock.
6. If you develop any of the symptoms listed, you need to complete the Latex Allergy Checklist with your manager and see your medical practitioner in the first instance for further advice.

What if I think I may have latex Allergy?

If at any time you develop symptoms of latex allergy, complete the Latex Allergy Checklist with your manager and avoid direct contact with latex gloves and other latex containing products until you can see your medical practitioner. Your medical practitioner may refer you to an allergy specialist.

Discuss with your manager what modifications can be made to the workplace to reduce the likelihood of you coming into contact with latex pending your appointment with your medical

practitioner. (E.g. total removal of all latex gloves and other non-essential products that contain latex in your work environment).

If your medical practitioner confirms that you are suffering a latex allergy and has issued you with a NSW WorkCover Certificate of Capacity, ensure this is immediately provided to your manager to enable the Workers Compensation guidelines be followed.

What if I have a confirmed Latex Allergy?

- If your Medical Practitioner/Allergy Specialist has confirmed you as suffering a Latex Allergy you will need to:
- Follow the medical advice given at all times.
- If prescribed, carry your Epipen at all times.
- Continue to discuss the medical restrictions and any recommendations with your manager so workplace adjustments can be made in line with the recommendations.
- Take advantage of all latex allergy education and resources provided and become familiar with and follow all safe work practices and procedures that have been implemented to minimise the risk of exposure to latex.

- Advise work colleagues, family and friends of your latex allergy/sensitivity to reduce the risk of exposure to latex at social gathering etc.
- Conduct an audit of your own home, with assistance from family and friends; totally eliminate products containing latex from your home environment.
- Remember to declare you allergy status to all your health care providers. It is very important that you advise your surgeon, pathologist and dentist if you are to undergo any surgery or procedure where latex may be used.

This Factsheet has been prepared to provide a general awareness of the risks associated with Latex use.

Latex Allergy Checklist



Diagnostic Checklist for the Identification of Health Care Workers/Students/Volunteers at Risk of Latex Allergy*

This questionnaire can be administered by a health care professional or self administered by the employee, student or volunteer. If self-administered, a health care professional should go through the questionnaire answers with the employee to ensure that all questions were understood.

Latex allergy checklist to be undertaken at induction, at annual PDP and at anytime staff member, student or volunteer experiences signs of sensitivity. i.e. dermatitis, rash, dry cracked skin etc.

Upon completion of this form, staff member, student or volunteer to return form and discuss any identified issues with immediate Manager and Infection Control Professional.

Indicate (☒) where appropriate – give details

	YES	NO
1. HAVE YOU EVER BEEN DIAGNOSED WITH LATEX ALLERGY?	<input type="checkbox"/>	<input type="checkbox"/>
2. HAS ANYONE IN YOUR IMMEDIATE FAMILY (E.G. PARENT, BROTHER/SISTER) SUFFERED FROM HIVES, HAYFEVER OR ASTHMA?	<input type="checkbox"/>	<input type="checkbox"/>
3. DO YOU WORK IN AREAS OF THE HEALTH SERVICE WHERE YOU WOULD BE EXPOSED TO LATEX PRODUCTS ROUTINELY?		
▪ Operating theatres/rooms	<input type="checkbox"/>	<input type="checkbox"/>
▪ Ambulance	<input type="checkbox"/>	<input type="checkbox"/>
▪ Dental	<input type="checkbox"/>	<input type="checkbox"/>
▪ Procedure rooms (e.g. cardiac catheterisation laboratories)	<input type="checkbox"/>	<input type="checkbox"/>
▪ Emergency department	<input type="checkbox"/>	<input type="checkbox"/>
▪ Intensive care or other related critical areas	<input type="checkbox"/>	<input type="checkbox"/>
▪ Cleaning	<input type="checkbox"/>	<input type="checkbox"/>
▪ Food handling	<input type="checkbox"/>	<input type="checkbox"/>
▪ Laundry	<input type="checkbox"/>	<input type="checkbox"/>
▪ Pathology laboratories/services	<input type="checkbox"/>	<input type="checkbox"/>
▪ Environmental waste collection and management	<input type="checkbox"/>	<input type="checkbox"/>
▪ Pharmacy	<input type="checkbox"/>	<input type="checkbox"/>
▪ Morgues	<input type="checkbox"/>	<input type="checkbox"/>
▪ Other areas where latex gloves and products are used Please specify _____	<input type="checkbox"/>	<input type="checkbox"/>
4. HAVE YOU HAD?	YES	NO
▪ Multiple operations	<input type="checkbox"/>	<input type="checkbox"/>
▪ Catheterisation	<input type="checkbox"/>	<input type="checkbox"/>
▪ Other medical procedures Please specify _____	<input type="checkbox"/>	<input type="checkbox"/>

5. HAVE YOU EVER SUFFERED FROM?

Page 1 of 3

Latex Allergy Checklist



- | YES | NO | | |
|--------------------------|--------------------------|--|--|
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Hives | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Hayfever | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Allergic Conjunctivitis/Rhinitis | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Unexplained Rash | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Bronchitis | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Eczema | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Sinus Problems | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Asthma | |
| <input type="checkbox"/> | <input type="checkbox"/> | ▪ Anaphylaxis (please specify cause) _____ | |

- | | | |
|--|--------------------------|--------------------------|
| 6. HAVE YOU EVER HAD A SKIN REACTION AFTER USING? | YES | NO |
| ▪ Band-aids | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Elastoplast | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Any sticky plaster | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Clothing with elastic (e.g. Bra, underpants) | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. HAVE YOU EVER HAD A REACTION AFTER HANDLING OR USING: | YES | NO |
| ▪ Balloons | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Poinsettia plants | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Rubber products | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Condoms | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Diaphragms | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. AFTER GOING TO THE DENTIST, HAVE YOU EVER SUFFERED FROM? | YES | NO |
| ▪ Itching | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Itchy watery eyes | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Facial swelling | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Throat or tongue swelling or discomfort | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Running nose | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Breathing difficulties | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. HAVE YOU EVER HAD A REACTION AFTER EATING? | YES | NO |
| ▪ Avocados | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Chestnuts | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Kiwi fruit | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Bananas | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Other foods (please specify) _____ | <input type="checkbox"/> | <input type="checkbox"/> |

STAFF MEMBER NAME (PRINT)

SIGNATURE

DATE

If you have checked 'Yes' to any of the above, reducing your exposure to latex is recommended.
i.e. use non-latex gloves

Any reported symptoms suggestive of latex sensitisation indicate that risk assessments and control measures for the work area/processes in which the symptoms originated should be formally reviewed to ensure current prevention strategies are adequate.

Page 2 of 3

Latex Allergy Checklist

The work environment must be made safe for latex allergic individuals. Early diagnosis and protection of symptomatic workers/student/volunteers from latex exposure are essential for preventing long-term health effects.

MANAGER TO COMPLETE

	YES	NO
1. Has the staff member/student/volunteer displayed evidence of latex sensitivity?	<input type="checkbox"/>	<input type="checkbox"/>
If YES, has a Risk Assessment been conducted?	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NO
2. Has the staff member/student/volunteer been reviewed by a medical practitioner?	<input type="checkbox"/>	<input type="checkbox"/>
If YES, what medical advice/restrictions are recommended?		

	YES	NO
3. If the staff member/student/volunteer is confirmed as latex sensitive, have you discussed the medical practitioners recommendations with staff member/student /volunteer?	<input type="checkbox"/>	<input type="checkbox"/>
If YES, what has been agreed?		

4. **What control measures have been implemented to minimise the risk of latex exposure in the workplace?**

Note: In consultation with staff review risk assessments of workplace, review control measures in line with medical recommendations. Seek assistance from the District WHS&W, Clinical Products & Corporate Support Unit and District Infection Control.

MANAGER NAME (PRINT)

MANAGER SIGNATURE

DATE

Review Date: _____

Note: If the staff member has been identified as latex sensitive, please retain a copy of this form together with completed Risk Assessments – ensure at least annual review.

For further information please refer to Latex Fact Sheet

Appendix 3 – Work Health & Safety Induction

Work Health and Safety Induction



Induction of New Staff, Students, Volunteers & Contracted Workers

Managers/Supervisors are responsible for the induction of new workers and must ensure that the WHS Induction is completed on their first day of work. Workers include new staff (including relocated personnel), students, volunteers and contracted workers. Managers/Supervisors may delegate responsibility to other staff members for certain aspects of the induction process; however the Manager/Supervisor remains responsible for ensuring that the process is completed with the new worker and the person with delegated authority.

Where there are specific hazards in an area, the person delegated as responsible for the induction must be familiar with those hazards and appropriate controls.

Worker's Details

Title	Given Name(s)	Family Name
Position	Employee Number (if applicable)	
Facility/Department	Commencement Date	
Supervisor Name	Supervisor Position	

Please complete this section for all new workers		Yes	No	Date
Fire and Evacuation	Shown the location of Fire Exits, Fire Extinguishers and Emergency Evacuation Area/s and the names of Wardens/Fire Safety Officers	<input type="checkbox"/>	<input type="checkbox"/>	
Security	Informed of Security Procedures for Facility/Department	<input type="checkbox"/>	<input type="checkbox"/>	
Disaster Management	Shown the location of Facility Disaster Plan	<input type="checkbox"/>	<input type="checkbox"/>	
First Aid	Advised of First Aid Procedures, location of First Aid Kits and names of Occupational First Aiders and Senior First Aiders	<input type="checkbox"/>	<input type="checkbox"/>	
WHS Commitment and Policy Statements	Shown a copy of LHD WHS Policy Statement, Return to Work Policy Statement, Safety Commitment Statements and site Consultation Statement	<input type="checkbox"/>	<input type="checkbox"/>	
WHS Responsibilities	Explained general WHS responsibilities of all workers as outlined in the Policy and Safety Commitment Statements for leaders and staff, along with department specific Safety Rules	<input type="checkbox"/>	<input type="checkbox"/>	
IIMS	Explained incident, injury and illness reporting requirements – IIMS	<input type="checkbox"/>	<input type="checkbox"/>	
Reporting	Explained procedures for reporting hazards and security incidents	<input type="checkbox"/>	<input type="checkbox"/>	
Injury Management	Shown and explained the Injury Management Flowchart and advised names of Return to Work Coordinators.	<input type="checkbox"/>	<input type="checkbox"/>	
Consultation	Explained consultation arrangements for WHS matters, e.g. staff meetings, HS Committee meetings as per facility Consultation Statement	<input type="checkbox"/>	<input type="checkbox"/>	

Document Number: WSHW-FOR-30
 Version Number: 1
 Document Author: WSH&W Unit
 Document Uncontrolled When Printed

Issue Date: 15 August 2018
 Review Date: 15 August 2018
 Page Number: Page 1 of 3



Work Health and Safety Induction

WHS Representatives	Provided details of Health & Safety Committee (HSC) (if applicable) and advised names of Health & Safety Committee members and Health & Safety Representatives (HSR).	<input type="checkbox"/>	<input type="checkbox"/>	
WHS Noticeboards and location of WHS information	Shown the location of WHS Noticeboards and provided information to worker in relation to location of policies & procedures either via Staffnet or site shared drive	<input type="checkbox"/>	<input type="checkbox"/>	
WHS Staffnet pages	Directed new worker to the BeSafe, BeWell and BeFit pages on Staffnet	<input type="checkbox"/>	<input type="checkbox"/>	
Job Hazards	Discussed the main WHS hazards associated with the job (e.g. Hazardous Manual Tasks, Slips, trips and falls)	<input type="checkbox"/>	<input type="checkbox"/>	
WHS Documentation	Provided information about Facility/Department Hazard Register, Safe Work Practices and Procedures relevant to the job	<input type="checkbox"/>	<input type="checkbox"/>	
HETI Training	Identified WHS initial training needs as per HETI Online mandatory training guide	<input type="checkbox"/>	<input type="checkbox"/>	
Training	Booked new worker into facility induction/ Mandatory Training sessions	<input type="checkbox"/>	<input type="checkbox"/>	
Ergonomics	Assisted worker to check the ergonomic setup of their workstation as per the Ergonomic Guidelines located on Staffnet	<input type="checkbox"/>	<input type="checkbox"/>	
Fatigue Management	Informed of the MLHD Fatigue Management Guideline and associated Fatigue Management Toolkit on Staffnet	<input type="checkbox"/>	<input type="checkbox"/>	
Health Conditions	Discussed any specific requirements or pre-existing health conditions	<input type="checkbox"/>	<input type="checkbox"/>	
Latex Sensitivity	Discussed latex sensitivities/allergies and provided worker with Latex Allergy Fact Sheet, ensuring they have completed the Latex Allergy Checklist if in a clinical role or a community based role.	<input type="checkbox"/>	<input type="checkbox"/>	
Occupational Exposure	Advised about Occupational Exposure Management at facility	<input type="checkbox"/>	<input type="checkbox"/>	
Screening and Vaccinations	Ensured the staff member has complied with the Occupational Assessment Screening & Vaccination against Specified Infectious Diseases PD2011_005	<input type="checkbox"/>	<input type="checkbox"/>	
Influenza Vaccinations	Advised and recommended the availability of annual influenza vaccinations via the Staff Health program	<input type="checkbox"/>	<input type="checkbox"/>	
Health Monitoring	Explained and/or arranged any baseline health monitoring/testing required for the position. e.g. audiometric testing, radiation monitors	<input type="checkbox"/>	<input type="checkbox"/>	
Employee Assistance Program (EAP)	Provided information regarding EAP	<input type="checkbox"/>	<input type="checkbox"/>	

Please only complete the following sections that are applicable			
Community Setting Workers	Yes	No	N/A
<i>Home Visiting, Working Off-Site with Consumers and Isolated Workers Procedure (MLHD-PROC517) has been discussed with community worker. Worker has been advised how to complete a Consumer Home Risk Assessment, designed to assist in managing workplace health and safety for community workers working in people's homes. Many common hazards can be found in the community services sector,</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Work Health and Safety Induction

<i>primarily in the home environment. These hazards need to be identified and solutions applied based on the principles of risk management.</i>			
Hazardous Chemicals	Yes	No	N/A
Shown the worker where to access the Hazardous Chemicals Register, including Safety Data Sheets (SDS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shown the worker how to access ChemAlert	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shown the worker chemicals risk assessments and safe work procedures for the substances/processes the staff member will be working with	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arranged for any Personal Protective Equipment (PPE) to be obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained how to do a risk assessment before working with a hazardous chemical.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Informed the worker of the local procedure for hazardous waste disposal including location of waste bins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infectious Agents	Yes	No	N/A
Explained the main hazards associated with possible exposure/s to infectious agents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained the correct use or handling of equipment, e.g. biological safety cabinet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ensure staff member has had training in the use of any safety engineered devices that they may be using.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arranged for any Personal Protective Equipment (PPE) to be obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained local waste disposal procedures including location of chemical waste bins, waste segregation etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained how to do a risk assessment before working with a biological agent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radiation	Yes	No	N/A
Explained the type(s) of radiation being handled and the protection methods to be followed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained how to do a risk assessment before working with radiation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outlined methods for detection, measurement when working with ionizing radiation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shown the worker safe work procedures for the irradiating equipment being handled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arranged for any Personal Protective Equipment (PPE) to be obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Informed the worker of any requirements and made arrangements for any baseline testing or ongoing monitoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explain safe practices for interactions with patients who attend external departments for nuclear medicine procedures who then return to MLHD facilities with radionuclides in their system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Machinery/Equipment	Yes	No	N/A
Informed the worker of the main hazards associated with machinery/equipment the person will be operating i.e. lifters, drills, trolleys, mowers etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained how to do a risk assessment before working with machinery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained and demonstrated the safe work procedures to be followed when operating the machinery/equipment, including location and operation of emergency stop buttons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shown the worker where to access instruction manuals for the machinery/equipment to be used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arranged for any relevant Personal Protective Equipment (PPE) to be obtained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments:

Supervisor's Signature: _____ Date: _____
 Worker's Signature: _____ Date: _____

Please provide a copy to Worker & save a copy on file.

Document Number: WHSW-FOR-30
 Version Number: 1
 Document Author: WHS&W Unit
 Document Uncontrolled When Printed

Issue Date: 15 August 2016
 Review Date: 15 August 2018
 Page Number: Page 3 of 3



Appendix 4 – Employee Assistance Program

What happens in counselling?

Our professional counsellor will work with you to assist in managing or resolving any concerns that negatively impact your life. EAP counselling is designed to be short term, solution focussed counselling. If you require further and/or specialised support, referral to other services will be provided. The aim is to discuss your concerns and work out some strategies or options to improve your coping skills.

Getting the help you need is simple

If you are needing guidance, give AccessEAP a call to find out how we can help. We're available by telephone 24/7 to provide immediate help for urgent matters.



CALL US

In Australia call

1800 81 87 28 or (02) 8247 9191

In all other countries, please refer to the 'contact us' page on our website.

For more information

w accesseap.com.au

e info@accesseap.com.au

To access the password protected Client Area of our website for the first time, register yourself with your company email address.



EMPLOYEE ASSISTANCE PROGRAM





YOUR WELLBEING STARTS HERE

Your Employee Assistance Program (EAP) is a voluntary, confidential and complimentary counselling service. It is a short-term, solution focused approach to help you enhance your overall wellbeing.

EAP can assist when personal, family or work related concerns are impacting on your health or quality of life and also when you need guidance on professional or personal goals or effective communication skills. Through professional and experienced counselling sessions, you can achieve your full potential.

This service is completely confidential. Your employer or colleagues will never be informed that you have contacted us; your privacy is guaranteed.

EAP appointments can be made by simply telephoning AccessEAP. Our Client Services Team can arrange face-to-face counselling at a time and location that's convenient to you. Counselling services are also available via telephone and online.

All our counsellors are independent of your organisation and focused on supporting you to address any issues impacting your wellbeing.

WHEN TO CONTACT US

Many life challenges and changes are best resolved with assistance from an experienced counsellor. You may want to consider seeing an AccessEAP counsellor for the following:

PROFESSIONAL CHALLENGES

- Needing support to help achieve your goals
- Missing deadlines
- Involved in conflicts frequently
- Needing new strategies on professional or personal goals

PERSONAL CHALLENGES

- Distracted by issues at work or at home
- Not feeling your usual self
- Feeling overwhelmed

Some reasons people contact AccessEAP are;

- Improving relationships/communication with others
- Facing crisis and trauma
- Grief and loss support
- Strategies for handling conflict with colleagues or managers
- Facing alcohol, drug or gambling addictions
- Handling anxiety and stress effectively
- Feeling depressed or down
- Improving work performance
- Assistance with financial and legal distress

Appendix 5 – Clinical Placement Checklist

Clinical Placement Checklist	
<input type="checkbox"/> Student approved to commence	
To be completed for all students undertaking placement within a Murrumbidgee Local Health District facility. This checklist should be used to ensure all procedures are followed when a new student commences.	
<input type="checkbox"/> Police Check (check expiry date)	
Procedure for First Day of Placement	
Student ID Badge - Sighted and student informed that badge must be visible at all times	<input type="checkbox"/>
Consent – Student aware that the client/patient must give consent prior to the Student being involved with their treatment/management	<input type="checkbox"/>
Incident / Accident / Adverse event – Student aware that they must advise staff of any incident, accident or adverse event that occurs during clinical placement	<input type="checkbox"/>
Allergy / Medical Condition – Supervisor and Student have discussed any known allergy / medical condition and agree to any restrictions or medical protocols that may be required	<input type="checkbox"/>
Orientation – Completed for facility / department, including WHS responsibilities and induction	<input type="checkbox"/>
My Health Learning – Modules attended	<input type="checkbox"/>
Latex Allergy – Fact sheet and checklist discussed and completed	<input type="checkbox"/>
EAP – Student is aware of the Employee Assistance Program (EAP)	<input type="checkbox"/>
Student Placement Survey – Student advised of survey available to complete at the end of their placement	<input type="checkbox"/>
ClinConnect – Mark attendance in ClinConnect	<input type="checkbox"/>

Student Name (please print)		Telephone No.	
Residential address whilst on placement			
Next of Kin (in case of emergency)		Relationship to Student	
		Telephone No.	
MLHD Staff signature		Date	
Student signature		Date	

This checklist and related paperwork must be kept on file at the facility