

Information for Students doing a Practicum at a WRHA Pharmacy

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Learning Objectives

At the end of this presentation, participants will be able to demonstrate (Routine Practices) or identify (all others) the correct course of action related to:

- The First Day of Practicum at a WRHA facility
- Routine Practices (Infection Control measures)
- Needle-stick injury
- Emergencies (e.g., a "Code")
- Handling sharps & hazardous pharmaceuticals
- PHIA & Respectful Workplace Policies
- Client/Resident/Patient Policies



Our Commitment to You



- To provide a safe, challenging environment in which you can learn and meet your placement requirements.
- To provide not less than 3 hours of contact time with a pharmacy preceptor per placement week.
- To make extra learning opportunities available to you that are suited for your level of capability, to the extent possible within available time, supervision, legal, and team/patient consent limits.
- To listen to you, to hear you, and to treat you with respect and dignity.
- To work with you and your placement coordinator to resolve concerns or differences of opinion.

Our Expectations



- Arrive prepared, enthusiastic, and motivated to get the most out of your practical experience.
- Think and behave as an "almost a pharmacist" or an "almost a pharmacy technician":
 - You are providing health care to real, sick people. Provide that care willingly, promptly, and to your fullest capability within your scope of practice.
 - Be empathetic, compassionate, caring, and ethical in your interactions with others.
 - Respect the workplace and your preceptor: show up, be on time, do the work, contribute to making care better, show initiative to seek opportunities to contribute more.
 - Accept and give feedback respectfully and effectively
 - Recognize, respect, and work within our policies and priorities ("Patient First" mentality)

To obtain an Orientation Handout, Routine Practices Learning Package, or view Pharmacy/Placement Descriptions, go to:
http://www.wrha.mb.ca/prog/pharmacy/student_info.php



What to leave at home...



- Large book bags or backpacks
- Reference textbooks
- Lecture notes from school
- Items of value (e.g., large amounts of cash, credit cards, electronic devices, etc)
- Your cell phone (unless indicated otherwise, all cellular phones and radio-wave devices must be turned off upon entering a health facility)



Dress Code



- Dress code lists what is expected for personal and patient safety and a suitable working/service environment. Persons who do not comply with the dress code may be sent home (no make up days).
- Do not wear fragrances or scented body/hygiene products.
- Pharmacy falls into the direct patient care staff category regardless of their service location. Nails must adhere to routine practices requirements:
 - No gel nails, artificial nails, nail extensions
 - No nail polish
 - Trim fingernails to 0.6cm (¼ inch)
 - Clean (includes under nails)

Dress Code – Clothing & Footwear



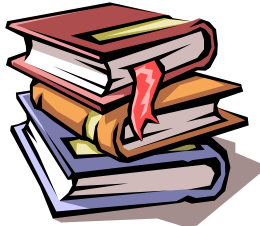
- You must wear a clean, neat, unstained lab coat and your ID badge (visibly) at all times.
- Clothing is "business casual":
 - Clean, neat (no holes, rips or tears), and of appropriate length, design and fabric
 - Not inappropriately revealing and does not display offensive language, logos, or images
 - No jeans unless authorized by your pharmacy supervisor (e.g., pharmacy warehouse; selected patient care units)
 - No sweats, shorts, or risqué outfits. No low rise pants.
 - Footwear must be clean, comfortable, quiet, meet safety requirements, and provide for safe mobility (e.g., non-slip, fasten securely). Winter boots and flip flops are not permitted. Closed toe footwear is strongly recommended.

Dress Code – Hair & Personal Items



- Hair must be neatly styled and of suitable length for job task. If hair is long, bring a hair clip or tie to use if needed. Hair coverings must be worn in designated areas.
- Carry personal keys and wallet with you at all times.
- Leave rings or other hand jewelry at home OR slide the rings onto a chain around your neck. Consider personal and patient safety and security when selecting jewelry to wear at work.
- Use of personal music devices (e.g., iPod, MP3, etc.) while wearing headphones/ear buds is not permitted. Radios or other music devices without headphones/ear buds may be used with permission in appropriate areas, at appropriate volumes, and to appropriate media types.

Please don't...



- Phone the Pharmacy in advance of your first day (e.g., to confirm your start date). We know you are joining us for a practicum. We look forward to meeting you on your first day of practicum.
- Worry about what to study or read in advance of your practicum (pre-readings are not required).

Infection: An Occupational Risk



- Most health workers are exposed to & transfer more germs than patients, because of the nature of their work.
- Complete protection from occupational risk is possible, but not practical.

Why are Routine Practices Important?



- They help to prevent transmission of infections in all healthcare settings
- They require that all patients be treated as if they were infectious every time contact occurs, regardless of presumed infection status.
- They recognize that micro-organisms can be transferred between patients through use of commonly shared equipment, and direct care activities.

Routine Practices are the level of care recommended for all patients by Health Canada.

Routine Practices responsibilities of Students and Trainees



- Recognize, understand and use Routine Practices signage to prevent infection transmission.
- Maintain good personal hygiene and respiratory etiquette.
- Eat and store food in the designated location.
- Consider the risks of infection transmission when reporting for practicum (e.g., if you are ill).

Elements of Routine Practices

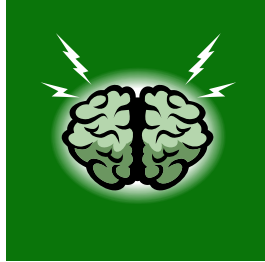


- **Hand hygiene**
- **Gloves**
- **Gowns**
- **Masks**
- **Eye/Face protection**
- *Patient accommodation*
- *Patient care equipment*
- *Environmental controls*
- *Specimen collection*
- *Visitor guidelines*
- *Education for health care workers, patients, visitors*
- *Post-mortem care*

Routine Practices: Getting down to the Specifics



- Refer to the WRHA Routine Practices Self-Learning Package for detailed information (Available: http://www.wrha.mb.ca/prog/pharmacy/student_info.php)
- Before arriving for your practicum you must:
 - review the information in the learning package
 - watch the video
 - demonstrate an ability to glove/mask/gown



Hand Hygiene...Why?



- Frequent hand washing is the most important method to prevent infection transmission
- All hospital surfaces are considered to be potentially contaminated.
- Frequent hand washing = fewer workdays lost due to colds, GI illness

If you get ill while at your practicum site, or within 2 weeks after your practicum...



- If still on practicum, notify your preceptor that you are ill, describe the nature of your illness, and obtain permission to leave the facility.
- Phone your preceptor to let them know you won't be in that day, if illness is identified after you leave work.
- If your practicum has ended and you are sick enough to seek medical attention, tell your doctor you were at "Facility X" & the dates of your practicum. If your illness is communicable, it may be necessary to trace back people you came in contact with while on practicum.

Hand Hygiene...When?



- **Before:** meals; shift start; breaks; preparing food or medication; hands-on contact with a patient
- **After contact with:** items thought to be contaminated; blood, body fluids, mucous membranes; non-intact skin; gloves
- When arriving at work, before leaving work, when arriving home



Hand Hygiene: What if you need a Hand or Wrist Splint/Brace?



- Be prepared to provide documentation (Rx or physician note) attesting that a hand or wrist splint/brace is medically necessary
- "Hand" hygiene must be done on splint/brace surfaces (go to site coordinator if questions)

Hand Hygiene: Soap Method



- With soap if visibly soiled; with antimicrobial soap in selected settings (e.g., ICUs, etc.)
- Use warm running water
- Rub hands to make a good lather (for at least 15 seconds)
- Wash all surfaces (fingernails, web spaces, thumbs and palms)
- Rinse, dry gently & completely using disposable towel
- Use a clean disposable towel to turn off the faucet



Hand Hygiene: Alcohol-Based Sanitizer Method



- Not for use if hands are visibly soiled
- Dispense dime size amount of product into palm of hand
- Rub hands together covering all surfaces (fingernails, web spaces, thumbs and palms)
- Allow product to dry completely (~15-20 seconds)
- Ensure hands are completely dry before performing another task
- **DO NOT** return excess product to dispenser



Respiratory Etiquette



- **COVER YOUR COUGH**
- Cover your nose and mouth with a tissue OR cough/sneeze into your upper sleeve, **NOT** your hands
- Put used tissue in waste basket immediately
- Perform hand hygiene after coughing, sneezing, or wiping or blowing your nose
- You may be asked to wear a mask to protect others

Additional Precautions Signs



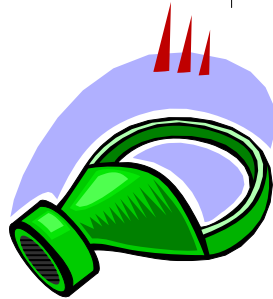
- **SIGNAGE** is an alert to increased risk of infection transmission
- **READ** the sign that is posted outside the room.
- **OBEY** the instructions on the sign (gown, type of mask, gloves, goggles, door open vs closed, etc)
- **TAKE** only yourself into the room (ie: no pens, paper or other items that cannot be cleaned or sterilized; if you're required to gown, you'll need to leave your lab coat outside the room).
- **DO NOT** enter the signed area if you are uncertain what you're supposed to do. **ASK** your preceptor for help.

Additional Precautions Example: Patient with suspect, probable or confirmed H1H1



- Gloves**
- they are worn when entering the room or patient's designated bed space in a shared room
 - are **removed before leaving the room or the patient's designated bed space**
- Gowns**
- they are worn if clothing or forearms will have direct contact with the patient
 - are **removed before leaving the room or patient's designated bed space**
- Surgical / Procedure Mask**
- they are within 2 metres of suspect or confirmed H1N1 patient
 - they perform patient care procedures that are likely to cause splashes, sprays or aerosols of blood, body fluids, secretions or excretions
 - **removed after exit of the isolation room/cubicle**
- NIOSH approved N95 respirators (you are required to do a seal check whether or not you've been fit tested)**
- they are performing aerosol generating procedures on a Suspect, Probable or Confirmed Influenza patient.
 - they are present in a room where an aerosol-generating procedure is being performed on a patient with a Suspect, Probable or Confirmed case of influenza
 - when the patient is coughing forcefully and is unable or unwilling to comply with respiratory hygiene (e.g. coughing patient who is unable or unwilling to wear a surgical/procedure mask
 - **removed after exit of the isolation room.**
- Eye or Face Protection**
- they are within 2 metres of a coughing patient and for performing patient care procedures that are likely to cause splashes, sprays or aerosols of blood, body fluids, secretion and excretions to the HCW's eyes. This includes aerosol generating procedures.
 - Regular eye glasses are not a suitable eye protection.
- For additional information about how to put on a Pleats Plus or N95 mask, go to:
<http://www.wrha.mb.ca/professionals/students/index.php>

Personal Protective Gear Demo: Procedure Mask vs N95 Mask



Personal Protective Gear Demo: Gown, Mask and Glove



Handling Sharps



- **Sharps** are anything that could pierce your skin (e.g., broken glass; needles).
- **Potential sharps** are things that have the potential to pierce skin if their integrity is destroyed (e.g., an intact glass vial is a potential sharp).
- Sharps can be a source of serious infection.
- Discard Sharps only in approved containers (ask staff)

**NEVER recap or manipulate
used Sharps by hand!**

If you stick yourself with a Sharp object...



- Remove & identify the object.
- Wash the injured area thoroughly with soap & water.
- **IMMEDIATELY** notify your preceptor or the closest staff member in the area.
- Follow the preceptor/staff member's directions regarding the facility's procedures for Injury at Work, and Post-Exposure Prophylaxis (if appropriate).



Discarding Pharmaceuticals



- Contaminated, expired or damaged pharmaceuticals must be discarded in approved containers.
- **DO NOT** throw oral solid dosage forms in regular garbage.
- **DO NOT** pour oral liquid dosage forms or injectable medications down the sink or toilet drain.

Hazardous Pharmaceuticals

- **WHMIS does not apply to pharmaceuticals!** Instead, look at the Hazardous Pharmaceuticals Chart
- **Personal Protective Gear** must be worn when handling these agents (a staff member will provide instructions).
- **BIOHAZARD** (e.g., vaccine) and **CYTOTOXIC** (e.g., anti-neoplastic) agents must be discarded in containers labeled specifically for those types of waste.



Personal Health Information Act: What's Required...?

- ...if a patient asks you to provide a copy of their DPIN profile?
- ...if you want to take information home (including laboratory data) so that you can prepare a presentation?
- ...if you are accessing or documenting patient information in a primary care clinic? a hospital? a personal care home? a long term care facility?



What if you identify an error?

- We report errors that we catch before they go through to a patient ("good catch" or "near miss"), and errors that actually do make it through to a patient.
- If you identify an error of any kind, ask your preceptor to help you fill out an "occurrence report form". You will not be punished for identifying an error or filling out a form.
- The occurrence report you complete will be added to others. That's how we figure out recurring errors, and make plans to prevent the same or similar mistakes from happening again.
- We share the findings of our error analyses with others across the WRHA and nationally where appropriate (you will not be named).



What is a CODE?



25	Medical Emergency
WHITE	Violent Incident
BLUE	Cardiopulmonary Arrest
RED	Fire
BLACK	Bomb threat/search
ORANGE	External Disaster
GREEN	Evacuation of Facility
PINK	Infant Abduction
GREY	External Air Contamination
YELLOW	Missing Patient
BROWN	Internal Chemical Spill

What to do if there is a "CODE"?



- Call for help (push call bell; grab another staff member).
- If you are trained and able to assist, then do so.
- If you are untrained or don't know what to do, then get out of the way (return to the Main Pharmacy).

If you find a Fire, or a CODE RED /Fire Alarm occurs



- CODE RED or Fire Alarm:
 - Do not leave area until "All Clear" is announced or you are given instructions on how to evacuate patients.
- If you find a fire, **RACE**:
 - Remove yourself and patient(s) from danger.
 - Activate the fire alarm.
 - Call for help (FIRE).
 - Extinguish the fire (if you know how to use an extinguisher).



WRHA Respectful Workplace Policy



- We support a climate of respect in the workplace.
- Staff & trainees are entitled to work/train in an environment that is free from harassment or discrimination.
- A full copy of the WRHA Policy is contained in your Student Handbook (U of M Pharmacy Students) or has been provided to you during placement orientation.
- Familiarize yourself with this policy before arriving on your first day of practicum.

Abuse or Suspected Abuse of Patients, Residents or Clients



- As a health professional, you are reminded that you have a duty to take appropriate action if you become aware of a patient who is or may be experiencing abuse, and be in need of assistance or protection.
- The action you need to take is governed by:
 - Child & Family Services Act (Manitoba)
 - Vulnerable Persons Living with a Mental Disability Act (Manitoba)
 - The Protection for Persons in Care Act (Manitoba)
 - WRHA Policy (family violence, domestic abuse, elder abuse)
- You are required to read the WRHA "Reporting of Abuse" Policy. If you are uncertain what to do, talk to your preceptor immediately upon identifying an abuse situation or potential abuse situation.

Patient/Resident Rights



In providing pharmacy care, we need to respect the rights of patients and their families. Although it might seem like it's your work or study location, that hospital, long term care facility or personal care home is your patient's "home", however temporarily, first and foremost:

- Privacy, courtesy, dignity, respect
- "Charter Rights"
- Freedom from discrimination, retribution, reprisal, abuse, harassment
- Freedom to give or refuse consent
- Choice/autonomy in care, activities, attire, etc.
- Access to information, policies, procedures
- Safe, clean (home-like) environment

WRHA Student ID badges & Pharmacy Access Cards



- Ensure that your WRHA PHIA card and (if you have one) your WRHA "Student" ID badge are safe & secure for the duration of your studies!
- At the end of each placement, return supplemental pharmacy access cards **immediately**.
- **U of M Pharmacy Students:** Immediately upon withdrawing from the Faculty of Pharmacy OR upon completing your last (4th year) hospital placement, return your WRHA Student ID/facility access badge to the Faculty of Pharmacy's Clinical Placement Coordinator.



Once again, welcome!
We hope you enjoy your practicum.