

RCH Nursing Competency Workbook

Chapter 1
Introduction

The Royal Children's Hospital (RCH) Nursing Competency Workbook is a dynamic document that will provide you with direction and assist you in your professional development as a nurse working at the RCH. The workbook also provides a record of your orientation and competency obtainment.

Chapter 1

- Includes resources for nurses and is complemented by the Royal Children's Hospital (RCH) New Starter Pack, Hospital Orientation and Nursing Orientation day, to provide an introduction to nursing at the RCH.

Chapter 2

- Generic Nursing Competency Assessment Forms

Chapter 3

- Specialty Nursing Competency Assessment Forms

Appendix 1

- Unit / Department Nursing Orientation

Appendix 2

- Index of **ALL** Specialty Nursing Competency Assessment Forms

Appendix 3

- Graduate Nurse Program Workbook

All chapters and appendices are downloadable as pdfs from the Mackinnon Nursing Education and Development Centre Website

http://www.rch.org.au/mcpc/index.cfm?doc_id=11861

The RCH Nursing Competency Workbook developed by the Mackinnon Nursing Education and Development Team with input from specialist nurses at the RCH

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Welcome to the Royal Children's Hospital (RCH)

The RCH occupies a very special place in the hearts of Victorians. Since its foundation in 1870, the hospital has become one of the great institutions of Melbourne, providing the very best care and treatment for generations of sick and injured children. A shared commitment to the health and welfare of children has motivated 125 years of dedicated service by nurses, doctors and all the hospital's staff, the committee of management, the auxiliaries, the volunteers and the hospital's supporters in the wider community.

The RCH is a specialist paediatric hospital and provides a full range of clinical services, tertiary care and health promotion and prevention programs for children and adolescents. The hospital is the major specialist paediatric hospital in Victoria, and also cares for children from Tasmania, southern New South Wales and other states around Australia and overseas.

As the major paediatric hospital in Victoria, the RCH provides clinical, academic and advocacy services for children and young people throughout the state. It is internationally recognised as a leading centre for research and education.

In its role as a leading paediatric teaching centre, the hospital has affiliations with the University of Melbourne and LaTrobe University and links with other universities in postgraduate studies.

The Royal Children's Hospital has a strong commitment to research. The Murdoch Children's Research Institute is based at the Royal Children's Hospital providing a bench to bedside process within our site.

Patients are referred to the RCH from all over Australia and the Asia-Pacific rim countries. The RCH has 230 beds and in 2008-09 the RCH treated more than 34,779 inpatients, 228,843 outpatient occasions of service, 7,740 children from the waiting list underwent surgery and 67,295 children presented at our emergency department.

RCH Vision

The Royal Children's Hospital, a GREAT children's hospital, leading the way.

RCH Mission

The Royal Children's Hospital improves the health and wellbeing of children and adolescents through leadership in healthcare, research and education

RCH Values

Unity

We work as a team and in partnership with our communities

Respect

We respect the rights of all and treat people the way that we'd like them to treat us

Integrity

We believe that how we work is as important as what we do

Excellence

We are committed to achieving our goals and improving outcomes

RCH Strategic Goals

Deliver excellence in healthcare
Realise the potential of the new RCH
Support and strengthen the RCH team
Enhance community and stakeholder support
Maximise campus led research
Provide excellent education, development and training

Family Centred Care

The RCH is committed to partnering with patients and families in the provision of care. The principles underpinning this are:

Dignity and Respect

Health care practitioners listen to and honour patient and family perspectives and choices. Patient and family developmental needs, knowledge, values, beliefs, and cultural backgrounds are incorporated into the planning and delivery of care.

Information Sharing

Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and useful. Patients and families receive timely, complete, and accurate information in order to effectively participate in care and decision-making.

Participation

Children and families are encouraged and supported in participating in care and decision-making at the level they choose.

Collaboration

Patients, families, health care practitioners, and leaders collaborate in policy and program development, implementation, and evaluation; in health care facility design; and in professional education, as well as in the delivery of care.

Nursing Service

For 140 years nurses have been providing leadership in paediatric nursing at The RCH. In 2010 more than 1,400 nurses work in a variety of roles: clinical practice, management, research, advanced practice and education. Nursing practice occurs in inpatient, outpatient, ambulatory care and community settings and we welcome nurses with all levels of skills, knowledge and experience into our teams.

The RCH Nursing Competency Framework provides the means through which you will be assisted to reach your potential and become an active member of your team, contributing to the ongoing development of nursing practice

RCH Nursing Competency Framework

We are committed to competency based practice and as such the RCH Nursing Competency Framework guides nurses' development

(http://www.rch.org.au/emplibrary/nursing/RCH_Nursing_Competency_Framework_doc.pdf). The RCH Nursing Competency Framework supports the domains of practice and competency standards for nurses identified by the Australian and Nursing Midwifery Council (ANMC). The ANMC national competency standards are the core competency standards by which nurses' performance is assessed to obtain and retain a license to practice in Victoria (ANMC, 2006).

Key components of the RCH Nursing Competency Framework include:

Familiarisation¹

- You will undertake a ten week familiarisation period, individualised with respect to your previous nursing experience. During familiarisation you will be provided with support and guidance to demonstrate the necessary capability to deliver safe care. Goal setting using the Professional Development & Achievement Plan (PDAP) will be completed by the end of the 10 week period.

Supernumerary Time²

- Supernumerary time allows for workload sharing with your preceptor and time away from direct patient care for orientation and additional learning. Supernumerary time is allocated by your Nurse Unit Manager (NUM)/Manager during the ten week familiarisation period and may vary for each nurse. The maximum supernumerary time for each area of practice is contained in Table 1.

Area	Nurses experience	Maximum supernumerary time
PICU, NNU, ED, Perioperative	New Graduate	Up to 10 weeks
	Experienced but new to above areas	Up to 6 weeks
	Experienced in above areas	Up to 4 weeks
RCH @ Home	Experienced in community	Up to 4 weeks
	Experienced with no community	Up to 6 weeks
All other RCH areas	New Graduate	Up to 6 weeks
	Experienced but new to Paediatrics	Up to 2 weeks
	Paediatric experienced but new to RCH	Up to 1 week
	RCH internal transfers	Up to 2 shifts

Table 1: Maximum supernumerary time

Preceptorship³

You will be formally assigned a preceptor to assist with your transition to your new practice setting. Your preceptor will serve as an educator and role model and assist your socialisation

¹ Due to the conditions of employment, familiarisation and supernumerary time varies for BARO staff. This is discussed with individuals and the manager of BARO.

² As above

³ As above

into the team. More comprehensive information regarding the RCH Nursing Preceptorship Model is available at http://www.rch.org.au/emplibrary/mcpc/Preceptorship_Model.pdf.

Demonstration of Competence

As the name implies, a core component of the RCH Nursing Competency Framework is to assist nurses in the attainment and demonstration of competence. The essential characteristics of a competent nurse are identified in Table 2 (Walker, 2008).

Knowledge Skills	Skills	Essence of Nursing
Basic Specialised	Assessment Communication Critical thinking Time management Customer Service Technical Skills Teaching	Caring Character Professional Presentation

Table 2: Competent Nurse Characteristics

A range of strategies may be employed to determine and demonstrate competence with regards to knowledge, skills and the essence of nursing. Within the RCH Nursing Competency Framework these strategies include

Self Assessment

Self assessment has traditionally played a large part in determining competence for nurses in Australia. Opportunities for documenting reflection and self assessment are built in to the RCH Nursing Competency Framework in the Feedback and Reflections form associated with each Nursing Competency Assessment Form and in the PDAP. You might also use your PPP for capturing self assessment.

Observations of Practice

Observation provides an opportunity for demonstration and assessment of practice. Many of the Nursing Competency Assessment Forms developed for the RCH Nursing Competency Framework include having practice evaluated through observation.

Discussion / Questioning / Interviewing

In completing the Nursing Competency Assessment Forms, the dating and signing of some competency elements by your assessor will provide evidence of conversations you have had in which you have demonstrated your competence. Your PPP and Performance Development and Assessment Program (PDAP) document also provide opportunity for you to capture evidence of discussions in which you have demonstrated your competence.

Learning Packages / Quizzes

There are many packages available to assist in your learning and demonstration of competence. Examples of these include Emergency Procedures, Medication Administration, and Central Venous Access Devices. Your preceptor, Clinical Nurse Educator/Facilitator (CNE/F) and/or NUM/Manager will be able to direct you to the location of learning packages. The RCH Nursing Competency Handbook, TrendCare and your professional practice portfolio (PPP) are examples of where you might document satisfactory completion of learning packages.

Professional Practice Portfolio (PPP)

The PPP is a tool that enables you to communicate to yourself and others your learning plans, achievements, professional development, performance capability and competency based on collated evidence. There is no single way in which a PPP should be put together. If you don't yet have a PPP an example of a template is available at http://www.rch.org.au/emplibrary/mcpc/Portfolio_Example_Nursing.doc.

Continuing Professional Development

Participation in continuing professional development (CPD) is a widely accepted method for measuring and demonstrating ongoing nursing competence. It is a requirement of the Nursing and Midwifery Board of Australia that nurses participate in at least 20 hours of CPD each year and that documentation of participation will include dates, a brief description of the outcomes, and the number of hours for each activity. In addition all evidence of CPD should be verified. A form for capturing your CPD is available at http://www.rch.org.au/emplibrary/mcpc/CPD_Record_Sheet.doc.

The RCH provides a wide variety of ongoing educational opportunities including in-service education, study days, workshops, seminars and short courses. Most nursing education is coordinated through the Mackinnon Nursing Education and Development Centre. A calendar of all nursing education opportunities is accessible on the intranet http://www.rch.org.au/mcpc/prof.cfm?doc_id=13987.

It is your responsibility that any days that you wish to attend are requested on the roster. It is important that you are aware of your professional development leave entitlements as covered by the Nurses (Victorian Public Health Sector) Multiple Business Agreement 2007-2011 as study leave will be allocated in accordance with the provisions. Please discuss with your NUM/Manager and CNE/F.

Performance and Development Assessment Program (PDAP)

The PDAP is a continuous process conducted over a 12 month period, which reflects on past performance and focuses on future outcomes. The PDAP is based on two principles

1. What we do (KPI's) AND how we do it (Values and Behaviours)
2. Managers/supervisors and their staff:
 - Working together to achieve desired outcomes
 - Communicating openly
 - Providing regular feedback to each other and
 - Formally reviewing individual performance at least twice per year.

The PDAP tool is dynamic document that you should be using from the commencement of your employment⁴ to record your KPIs and development plan. The tool is available at http://www.rch.org.au/emplibrary/hr/Staff_PDAP_Template_Oct_2010.doc

⁴ Graduate nurse program participants are provided with alternative Performance Assessment and Learning Objectives forms to be utilised throughout the Program. These are included in Appendix 3: Graduate Nurse Program Workbook

As part of your PDAP you are required to formulate objectives relevant to KPIs and development areas. The following two tools may help you in writing objectives that are attainable.

ABCD Approach (Ferguson, 1998)

Audience:

- Who is the focus of the objective?

Behaviour:

- Uses an action verb indicating the behaviour

Condition:

- Specific conditions in which the behaviour will be learned

Degree

- Quality
- Standard or level of performance
- Accuracy of outcome behaviour

SMART Approach (Royal College of Nursing, 2007)

Specific

- Well-defined
- Clear to anyone

Measurable

- Know if the goal is obtainable and how far away completion is
- Know when it has been achieved

Agreed upon

- Agreement with all stakeholders or participants on what the goal should be

Realistic

- Can be achieved within the availability of resources including knowledge, skill and time

Time-based

- Enough time to achieve the goal
- Is not time or resource expensive

RCH Nursing Pathway

Dates should be set in consultation with your Unit Manager / Manager / CNE/F.

Prior to starting	Due dates
Letter of acceptance and pre reading information from People and Culture	
↓	
<p style="text-align: center;">First week</p> <p style="text-align: center;">Introduction to RCH Nursing Competency Framework Unit / Department Orientation Hospital Orientation (if start date coincides) Unit orientation with preceptor Meet with NUM / Manager and CNE/F</p>	
↓	
<p style="text-align: center;">Weeks 2-4 (possibly more if required)</p> <p style="text-align: center;">Hospital orientation (if not already attended) Supernumerary (if required) with preceptor Complete mandatory annual competencies Develop learning objectives Discuss progress with NUM / Manager and/or CNE/F and preceptor</p>	
↓	
<p style="text-align: center;">By week 10</p> <p style="text-align: center;">Complete RCH Nursing Competencies required by week 10 10 week performance assessment with NUM / Manager FAMILIARISATION COMPLETE</p>	
↓	
<p style="text-align: center;">By 12 months</p> <p style="text-align: center;">Continue to complete and develop new learning objectives Complete RCH Nursing Competencies required by 12 months 12 month performance assessment with NUM / Manager <i>(6, 9, and 12 month performance assessments for graduate nurse program participants with NUM, CNE/F, preceptor and program coordinator)</i></p>	
↓	
<p style="text-align: center;">Ongoing</p> <p style="text-align: center;">Mandatory annual competencies Yearly performance assessments Continue to complete and develop new learning objectives Maintenance of professional practice portfolio</p>	

Useful Resources

You are encouraged to explore and utilise the vast array of resources available to you. Some that you might be particularly directed towards on the intranet include:

RCH Website:	www.rch.org.au
RCH Nursing Services	http://www.rch.org.au/nursing/index.cfm?doc_id=10944
Mackinnon Nursing Education and Development Centre	http://www.rch.org.au/mcpc/index.cfm?doc_id=11861
RCH Clinical Practice Guidelines	http://www.rch.org.au/clinicalguide/
RCH Clinical Guidelines (Hospital)	http://www.rch.org.au/rchcpg/index.cfm
Paediatric Pharmacopoeia Medications	http://www.rch.org.au/pharmacopoeia/ http://www.rch.org.au/pharmacy
Frank Shann Drug doses	http://www.rch.org.au/clinicalguide/cpg.cfm?doc_id=5309
Infection Control	http://www.rch.org.au/infection_control/staffhealth/
Bulletin Board	http://www.rch.org.au/...tins/?fuseaction=input.emailConfirm
Nurses (Victorian Public Health Sector) Multiple Business Agreement 2007-2011	http://www.rch.org.au/emplibrary/hr/Bul-1470 Attachment C.PDF
Payroll	http://www.rch.org.au/payroll/faq.cfm http://www.rch.org.au/payroll/timesheets.cfm?doc_id=9530
Human Resources (People and Culture)	http://www.rch.org.au/hr/intranet/contact/ http://www.rch.org.au/hr/intranet/faq/ http://www.rch.org.au/policy_rch/?doc_id=12637
Information Technology	http://www.rch.org.au/it/help

Recommended paediatric nursing texts include

- Engel, J. (2006). Pocket guide to paediatric assessment (5th edition). St Louis: Mosby.
- Hockenberry, M. & Wilson, D. (2007). Wong's nursing care of infants and children (8th Edition). St Louis: Mosby.
- Sheridan, M. (2008). From birth to five years. Children's developmental progress. (3rd Edition). Revised and updated by A. Sharma & H. Cockerill. New York: Routledge.

An Overview of Key Clinical Areas

The RCH is laid out over a number of buildings and floors. Some of the key clinical areas include:

8th floor, main block: Neurosciences

The Children's Neuroscience Centre is a 32 bed specialist unit which delivers care to infants, children and adolescents with neurology, neurosurgery, metabolic and general medical conditions. The unit is comprised of a 4 bed high dependency unit and a six bed video EEG monitoring suite and is also the home to the Victorian Paediatric Rehabilitation Program Inpatient Service and the Children's Epilepsy Program.

7 West, main block: Cardiac and Renal

The cardiac and renal unit comprises of 25 beds, eight of which are high dependency and six special care nursery beds. We provide specialist cardiac and renal services to newborns through to adolescents, from all over Australia and some international patients from our region. We are part of the nationally recognized centre for: Bridging to Transplant; Heart Transplantation; and Pulmonary Hypertension.

6th floor, main block: Oncology (including Day Oncology)

The Children's Cancer Centre (CCC) is the largest treatment centre for children with cancer in the Southern Hemisphere. It is the primary provider of oncology services to children with cancer in Victoria. The CCC provides both inpatient and outpatient services for children of all ages, at all stages of treatment and beyond. There are currently 24 inpatient beds including a 4 bed Bone Marrow Transplant unit and a 12 bed day oncology unit. The CCC treats approximately 160 newly diagnosed children each year. Treatment may range from simple regimes to complex management such as unrelated bone marrow transplants

5th floor, main block: Medical

The 5th floor medical unit is a 32 bed specialist medical unit that has five medical specialties: general medicine, respiratory medicine, endocrinology, gastroenterology, and developmental medicine. Children who have had a tracheostomy are cared for on the 5th floor which is also home to the children's Ventilation Support Unit, caring for children who require non-invasive ventilatory support such as CPAP and BiPAP, and full ventilation via tracheostomy. In conjunction with the department of respiratory medicine sleep studies are conducted on the 5th floor. The 5th floor is also the home unit for the pre and post-operative management of children who have undergone liver transplantation.

4 Main, main block: Burns, Plastics, Orthopaedics

4 Main is a 28 bed orthopaedic, burns and plastics unit with two high dependency beds. In addition, the unit provides care to patients requiring long term nutrition. 4 Main provides care to children undergoing an extensive array of surgical procedures with varying complexity and acuity.

4 North, north west building: General Surgical

4 North is a 16 bed paediatric surgical unit whose admissions comprise of emergency and elective surgical patients from general surgery, urology, ENT and trauma specialties. 4 North also includes four beds allocated to 23 hour surgical model.

3 East, main block: Adolescent Unit

The adolescent unit (3 East) is a 22 bed ward that delivers developmentally appropriate inpatient care and treatment services to young people between the ages of 12 to 20. Care is provided to adolescents with all manner of acute and chronic health issues, admitting patients under any medical, surgical, or specialty unit. Consequently this provides a very diverse and challenging environment where nurses develop specific skills and expertise in caring for adolescents but also gather a very diverse and broad knowledge base in all aspects of nursing care. We are committed to enabling young people to take control of their own health within a supportive environment.

3rd floor, main block: Neonatal Unit

The neonatal unit is a level 3 unit that provides a state-wide service for infants with complex medical and surgical conditions requiring the full range of subspecialty services. It is a 24 bed unit consisting of 12 intensive care beds and 12 high dependency beds and is staffed at a 1:1 or 1:2 nursing ratio depending on acuity. Our patients are referred from Level 3 perinatal centres both in Melbourne and interstate, maternity hospitals throughout Victoria, southern NSW and Tasmania and the emergency department. It has a 4 bed post natal mothers unit where new mothers can stay once well enough to leave the maternity hospital and is covered by a midwife during the day.

3rd floor, south east building: RCH@Home

RCH @ Home coordinates and provides a range of in-home support services for families of children with increased medical care needs. There are five programs available through RCH @ Home; Family Choice Program, Hospital in the Home (HITH), Post Acute Care, Homecare Program and School Care Program. All programs at RCH @ Home are for children between 0 -18 years. HITH is an inpatient substitution allowing patients to receive acute care within their home environment under the care of the RCH medical staff. HITH is a 20 bed unit. Post Acute Care (PAC) is designed to assist children to recuperate at home and prevent them from needing to stay or be readmitted to hospital. The Homecare Program is fee for service and is purchased through RCH @ Home to enable children with ongoing medical care needs to be safely cared for by trained support workers in their own home and local community. Family Choice Program is designed for children who have complex medical care needs and require frequent monitoring and medical intervention. The program provides flexible and tailored services to assist the family, to ensure that the child is able to remain safely in their home and local community. School Care Program is designed to train support workers within the school environment to care for children with complex medical care needs.

2nd floor, main block: Paediatric Intensive Care Unit

The paediatric intensive care unit (PICU) at the RCH is the largest PICU in Australia. Approximately 1300 infants and children are admitted to our PICU each year, representing all medical and surgical paediatric subspecialties. The unit has a high acuity, with 70% of admissions requiring intubation and mechanical ventilation. In addition to providing tertiary PICU services for Victoria and Tasmania, several national programs are catered for,

including heart transplantation, respiratory ECMO, long-term VAD, surgical treatment of hypoplastic left heart syndrome and intestinal transplantation. A large proportion of the workload (40-45% of patients) arises from the cardiac services program, providing cardiac surgery to Victoria, Tasmania, South Australia and the Northern Territory. Emergency and elective patients are admitted from within the RCH and external emergencies from Victoria and neighbouring states are predominantly admitted via the Paediatric Emergency Transport Service (PETS).

2nd floor, main block: Theatres

The operating suite consists of eight general theatres that undertake approximately 16,000 operations annually. Our nurses, surgeons and allied health team provide the best quality care for patients undertaking surgery ranging from newborn premature babies to adolescents. The operating suite combines care of the child and family with demands of a diverse range of complex procedures and technology.

2nd floor, main block: Cardiac Theatres

Cardiac operating rooms A and B are two of nine specialist operating rooms in the operating suite. Procedures performed yearly exceed 800, including all open and closed surgery, from uncomplicated to complex. Patients range in age from newborn to young adults. We are the National Heart Paediatric Transplant Centre of Australia and have an international reputation for state of the art cardiac care and support services. Cardiac services also include mechanical support procedures such as ECMO, VAD and bridge to transplant e.g. the Berlin Heart. Cardiac theatres are closely affiliated with the perioperative services.

2nd floor, main block: Recovery Room

The recovery room is part of the perioperative services. It provides pre & post anaesthesia care to patients in the hospital. Services include patients from main theatres, selected closed heart surgery patients, complex patients in day of Surgery procedure rooms, MRI, ultrasound and CT patients. The preoperative holding bay has a seven bed capacity, and the recovery room a 12 bed capacity.

2nd floor, front entry building: Day of Surgery Centre

The Day of Surgery Centre (DOSC) is open Monday to Friday 0700-2000. We admit all elective surgical patients on the day of their surgery. This number can range from 40 to 75 patients per day. The DOSC consists of two procedure rooms, a five bay recovery area, and a 14 bed post-op ward. In addition to admitting all surgical patients we also assist in the endoscopy suite, recover all patients from our two procedure rooms, and discharge of all day surgery patients. We care for all ages of patients and a wide variety of patient groups such as ENT, gastroenterology, ophthalmology, haematology, urology, general surgery, plastics, orthopaedics, and dermatology.

2nd floor, main block: Medical Imaging

The medical imaging department aims to provide the best possible medical imaging and interventional care for approximately 87,000 paediatric patients and their families per year on an inpatient and outpatient basis. Imaging and interventional procedures, ranging from simple to very complex are performed with specialized paediatric skills and techniques with modern equipment in a friendly environment reducing discomfort and minimal irradiation. The

department includes : one emergency and three general x-ray rooms, a multi-slice CT (Computed Tomography) scanner, two nuclear medicine rooms, two MRI (Magnetic Resonance Imaging) units, three ultrasound rooms, one digital fluoroscopy room and a DSA (Digital Subtraction angiography) lab which is also used for cardiology interventional procedures. Nurses work alongside a diverse multidisciplinary team, co-ordinating and assisting with individual specialized care which includes, recovery, scrub and scouting for procedures (diagnostic and interventional), and sedations among other responsibilities.

1st floor, main block: Ambulatory Care Centre

Located on the 1st floor main building the RCH Ambulatory Care Centre assists in the care and diagnosis of patients ranging in age from birth to 18 years of age, from a large number of specialty medical departments. Haemodialysis, the Day Medical Unit and the Allergy Centre currently operate from the Ambulatory Care Centre. Current hours of operation are Monday to Friday between the hours of 0800-1800. The nursing staff (with medical consultant support) are responsible for the cannulation, treatment and ongoing management of patients with chronic medical conditions such as blood disorders, bone and joint disorders, gastroenterological disorders and immune deficiencies and patients requiring long term haemodialysis. The Ambulatory Care Centre also undertakes to assist medical staff perform minor medical procedures under sedation.

Ground floor, main block: Emergency Department

The emergency department provides urgent medical care to children and adolescents who present to the RCH. The department operates 24 hours a day, seven days a week. Approximately 66,000 children are seen annually ranging from newborns to teenagers. The department is staffed by medical, nursing, clerical, administrative and PSA staff. The clinical area has two resuscitation rooms, 24 cubicles, three procedure rooms, three examination rooms and a radiology room. The emergency department works closely with the 12 bed Short Stay Unit.

Ground floor, main block: Short Stay Unit

The Short Stay Unit (SSU) is a 12 bed unit accommodating children who require observation and nursing care for up to 36 hours. The model of care adapted by the SSU is one which is complementary to that of the Emergency Department to enhance patient flow through the Emergency department and therefore improving bed access. The SSU was developed to provide short-term care to common diagnostic groups such as Asthma, Gastro-enteritis, Pneumonia, Croup, Plastic surgery cases such as lacerations, and Orthopedic cases such as fractures.

Ground floor, main block: Outpatients

The outpatient department at the RCH provides a comprehensive range of outpatient services to 160,000 patients per year. There is an extensive range of medical, surgical and allied health outpatient clinics held throughout the hospital at various locations. Most outpatient clinics are held between 0900 and 1700 Monday to Friday.

Footscray: Banksia Unit (Inpatient Mental Health)

The Banksia Unit, currently located in Footscray, is a 24-hour 12 bed residential unit, providing mental health assessment and treatment, and educational programs to

adolescents aged 12 to 18 years. Young people experiencing difficulty in their social, emotional and mental health are referred to Banksia by community clinicians when community based supports and strategies indicate admission to the Banksia Unit will benefit the young person. Care is provided by the multidisciplinary team with a holistic view including ensuring family and carer participation. Banksia is part of the Integrated Mental Health Program for Children and Adolescents (RCH IMHP).

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