



Bachelor of Nursing Clinical Handbook 2025

School of Nursing | Te Kura Tapuhi

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INTRODUCTION

This handbook offers essential information about the expectations required during your clinical placements and will help you maximize your clinical learning experiences. It should be read alongside the Bachelor of Nursing Programme Handbook and clinical course outlines. Please ensure you are familiar with this content before starting your clinical learning experience.

Te Tiriti o Waitangi, Kawa Whakaruruhau and Cultural Safety

Te Tiriti o Waitangi, Kawa Whakaruruhau and Cultural safety underpin nursing practice in Aotearoa and apply to all contexts of care.

- Te Tiriti o Waitangi is our founding document placing Māori aspirations at the heart of health care with people, whanau, and communities in Aotearoa.
- The goal of the NZ Health Strategy (2023) is to achieve health ōritetanga/equity for our diverse communities and to improve health outcomes for all New Zealanders.
- Nurses are an integral part in maintaining sustainability of resources, tangata, whānau and hapori.
- Ōritetanga/equity and inclusivity are fundamental to nursing care provision. With a focus on advocacy and an understanding of ethical issues in health care in Aotearoa.
- Working interprofessionally is fundamental in supporting tangata, whānau and hapori to promote hauora.
- Cultural safety applies to the care of all people and is determined by the recipient of care.

Clinical learning

Clinical learning is an integral part of the nursing programme, offering hands-on experience that helps you to demonstrate you are meeting the Nursing Council of New Zealand's competency standards. This learning is scaffolded from year one to year three of your study programme. Clinical learning occurs on campus and while you are on your clinical placement. Each clinical placement provides you with numerous opportunities to grow as a nursing taura by enabling you to apply theory to practice, demonstrate competence standards and clinical reasoning processes when providing people centred care for individuals, whānau, hapori and iwi. The clinical curriculum is designed to offer you a diverse range of clinical practice experiences that align with Te Kaunihera Tapuhi o Aotearoa |Nursing Council of New Zealand (NCNZ). This includes adherence to the Nursing Education Programme Standards (2024) and for the Registered Nurse scope of practice (NCNZ, 2010) and the Competencies for Registered Nurses (NCNZ, 2007):.

TERMINOLOGY

Clinical Practice – The provision of nursing care within a clinical context.

Clinical Placement – A specific area of practice where the clinical learning experience takes place.

Clinical Coordinator – Is responsible for managing clinical placement allocation and liaises with clinical placement providers

Clinical Nurse Manager (CNM) – A senior nurse in charge of the ward or unit.

Course Coordinator – A nursing lecturer who coordinates a course in the BN programme.

Head of School – A registered nurse who is approved by Nursing Council and has overall responsibility, authority and autonomy for the programme.

Kaiako - An academic staff member who is responsible for facilitating the teaching of taura in the clinical practice placements

Preceptor – A registered nurse from the clinical practice area who provides on-site clinical teaching and supervision to their allocated taura in addition to their patient/client care responsibilities.

Nursing Council of New Zealand - The Nursing Council of New Zealand (NCNZ) is the regulatory authority responsible for the registration of nurses in New Zealand.

Programme Leader – A Principal Lecturer who is responsible for leading a year level teaching and learning team within the programme.

SAFE CARE FOR THE PUBLIC

The following criteria ensure taura are safe to provide care to the public during their clinical learning experience as specified by the Nursing Council of New Zealand, Nursing Education Programme Standards 2024.

Readiness for practice

Prior to attending your clinical learning experience, you must demonstrate that you have the pre-requisite knowledge, skills, and attitude. This will be outlined in the readiness for practice criteria in your course outline. Readiness for practice may include but is not limited to the following:

- Meeting attendance requirements
- Demonstrating competence in skills
- CPR
- Medication administration safety
- Drug calculations
- Professional behaviour

Fitness for practice

The School of Nursing | Te Kura Tapuhi, alongside the Head of Nursing, is responsible for ensuring that taura meet specific criteria before they are placed in clinical settings. This responsibility is guided by the “Fitness for Registration” standards outlined in section 16 of the Health Practitioners Competence Assurance Act 2003. The purpose of these criteria is to uphold public safety by ensuring that all nursing taura are fit for practice.

Taura must meet the following criteria:

- **Communication:** Taura can communicate effectively to practice as a nursing taura.
- **English language requirements:** Have English language and comprehension skills that are sufficient to ensure the health and safety of the public.
- **Health status:** A mental or physical condition which means they are unable to perform the functions required for the practice of nursing during their clinical placement.
- **Criminal convictions:** Taura must disclose any criminal convictions or pending charges. (Please refer to the BN Programme Handbook regarding additional information about criminal convictions)
- **Risk status:** There are no concerns that the taura has been deemed a risk to public health or safety.

If at any time during the programme taura do not meet the above criteria they may be withheld or excluded from attending their clinical learning experience at the

discretion of the Head of School. The Head of School may request that evidence is provided to satisfy the criteria listed above. Taura will be notified by the Head of Nursing regarding their progression in the programme.

Interim clinical standdown

If any action by taura raises concern of a serious nature in relation to clinical competence, unprofessional behaviour, and/or the compromise of health consumer/colleague safety, the kaiako has the delegated authority to remove the taura immediately from the clinical practice setting. The kaiako can do this using the provision of interim clinical suspension, pending investigation. This can occur at any time during the clinical learning experience. Please see Appendix A for the interim clinical stand down process.

Immunisations and health screening

Compliance with required vaccinations and health screening is necessary to prevent the spread of infectious diseases in clinical environments. Please note that Otago Polytechnic Student Health Dunedin will retain a copy of your immunisation reports while you are studying at Otago Polytechnic and clinical placement provider may ask for proof of immunity status. Please see Appendix B for health screening and immunisation requirements. Please be aware that if immunity requirements are not met progress in the programme may be impacted including the ability to attend clinical placements

CRIMINAL CONVICTIONS

Under the Children's Act 2014, all individuals that engage as children's workers must be appropriately safety checked before and throughout the programme. All nursing taura are required to consent to a criminal history check as part of the safety checking, this is carried out via the New Zealand Police vetting service. This must be completed every three years. If taura are subject to any investigation, disciplinary or criminal proceedings they must notify the Head of School.

CLINICAL LEARNING EXPERIENCE REQUIREMENTS

Te Kaunihera Tapuhi o Aotearoa |The Nursing Council of New Zealand sets the scopes of practice and standards of competence for nurses. They also set the standards that nursing education providers must meet for accreditation. In accordance with these standards, you can expect the following during your programme of study:

- Your first clinical learning experience will occur in your first semester of study
- You will receive 1128 clinical learning experience hours
- You will be super-numerary (extra) to existing staff
- A registered nurse preceptor will guide and support you during your clinical learning experience
- Clinical learning experiences will occur in a variety of different settings such as te ao Māori, community health, acute care, aged care, mental health, and disability

- In your final clinical learning course, you will complete 360 hours of clinical learning
- You can only have two enrolments in the same clinical course. Exemptions are made on a case-by-case basis and have to be approved by the Nursing Council.
- In the event of a state of enduring emergency please refer to Appendix G.

Please note: Your clinical learning experiences cannot be undertaken in an area where you are currently employed.

STANDARDS AND GUIDELINES

Adherence to professional and ethical standards is essential to your clinical practice. This includes maintaining appropriate behaviour, respecting confidentiality and demonstrating professional integrity. To assist you in meeting expectations you are required to apply the following standards and guidelines to your clinical learning experience.

- [Code of Conduct](#)
- [Guidelines: Professional Boundaries](#)
- [Guidelines: Social Media and Electronic Communication](#)
- [Guidelines for Cultural Safety, the Treaty of Waitangi and Māori Health in nursing, education and practice](#)
- [Health and Disability Code of Rights](#)
- [NZNO Code of Ethics](#)
- [Health Information Privacy Code](#)
- [NZNO Guidelines for Nurses on Administration of Medicines](#)
- [NZNO Documentation Guideline](#)

CODE OF CONDUCT

Prior to attending your first clinical learning experience at Health NZ |Te Whatu Ora you will be required to read, sign and return the Code of Conduct form to the School of Nursing administrator. Failure to do this means that you will not be able to proceed with your clinical learning experience at Health NZ |Te Whatu Ora. You may also be required to complete a Code of Conduct form as required by other clinical placement providers.

CLINICAL PLACEMENT ALLOCATION

Clinical allocation process

During your program of study, you will be assigned to placement areas for your clinical learning. To ensure fairness in the placement process, placements are not chosen by taura. Instead, the allocation is managed by the Clinical Coordinator and Course Coordinator in conjunction with the placement management system, InPlace. To facilitate this process, it is crucial that you input as much information as possible into InPlace. This platform is essential for locating your placements, updating placement details including accommodation options, any conflicts of interest,

(including your current part-time workplace), and verifying your health compliance status, such as your immunity status.

How to use InPlace

Please click on the link which provides step by step instructions [How to access and enter information into InPlace](#)

Placements outside of Dunedin

The Otago Polytechnic programme has a distributed placement network and there is an expectation that all taura across all year levels can attend a placement anywhere in this network. Clinical placements may be offered anywhere in the Otago region, including the Dunedin city boundary area, Palmerston, Oamaru, Waimate, Ranfurly, Naseby, Balclutha, Milton, Gore, Alexandra, Wanaka and Queenstown. Further placement areas may be added to this list. Due to the limited number of Dunedin opportunities and the numbers of taura in each year of the programme there is no limit to the number of placements you may be expected to take outside of Dunedin. Unless there are extenuating circumstances, we do not place taura outside these areas as other Schools of Nursing require placements for their own geographical area. All extenuating circumstances need to be discussed with the Programme Leader and Head of Nursing.

Accommodation and transport

It is your responsibility to arrange and cover the cost of your own transportation to your clinical placement. Additionally, you must make your own accommodation arrangements for the entire duration of the clinical experience, including any potential extension period. Please be aware that if your clinical placement needs to be extended due to unmet competencies or illness, you may need to extend your accommodation arrangements accordingly.

ATTENDANCE REQUIREMENTS AND RECORD

Te Kaunihera Tapuhi |The Nursing Council of New Zealand requires you to complete a minimum of 1000 hours of clinical practice for registration. Evidence of clinical hours are collected on your placement timesheet and are stored on your electronic student file. Outlined below are your professional responsibilities in relation to your attendance and clinical experience hours.

Rostered shifts

During all three years of your programme, you will be required to be available for rostered duties/clinical placements over seven days of the week (including public holidays). You may be rostered to work between 0700-1530hrs, 1430-2300hrs and 2300-0700hrs. You may also be required to work alternate shift patterns based on placement requirements. Shiftwork may have implications for taura with dependents. It is your responsibility to make arrangements if necessary, so you are available for all shifts.

Notification of absences/lateness

- **Kaiako:** Notify your kaiako via email if you can't attend placement due to illness or any other reason.
- **Placement:** Inform the clinical placement directly if you are absent or will be late.
- **Medical certificate:** If absent for three or more consecutive days, a medical certificate may be required.

Clinical hours management

- **Maximum weekly hours:** You can only complete a maximum of 40 hours of clinical practice per week.
- **Breaks:** Your 30-minute meal break is not counted within clinical hours.

Completion and documentation

- **Preceptor signature:** Ensure your preceptor signs your clinical hours record at the end of each shift. Please make sure you provide accurate information on your clinical hours record.

If you are unwell

You must be physically, mentally, and emotionally fit to provide safe care. If you are unwell, please do not attend your clinical placement. Please notify the clinical facility and your kaiako as outlined above. Please follow policy and procedure guidelines as set out by your clinical placement provider regarding requirements for return to practice. You will be advised by your kaiako regarding the process for clinical makeup hours.

Additional Hours

If competence is not achieved within the required hours, additional hours may be added. This is determined by the Head of School on an individual basis.

CLINICAL TEACHING AND LEARNING ROLES AND RESPONSIBILITIES

The School of Nursing | Te Kura Tapuhi uses a Preceptorship Model for clinical teaching and learning during your clinical learning experience.

Preceptor role

Each taura will be assigned a preceptor during their clinical placement. The clinical placement provider will determine preceptor allocation for each shift.

- A nursing preceptor is an experienced nurse who facilitates and guides your learning in the clinical context. They support you to make links between theory and practice and develop skills in clinical reasoning and decision making.
- Preceptors will support you to develop practical skills within your scope, build confidence, and navigate the complexities of care.

- Nursing preceptors provide hands-on instruction, give feedback, model professional behaviour and are involved in your formative and summative feedback.
- Health NZ | Te Whatu Ora Southern provides preceptorship training workshops to support nurses to develop the required skills and knowledge to become competent and confident preceptors.

Kaiako role

Each taura will be assigned a kaiako during their clinical learning experience. The kaiako is assigned by the course coordinator in conjunction with the clinical coordinator. You will be notified via e-mail regarding your kaiako and provided with their contact details.

- The kaiako is a member of the teaching team at the School of Nursing | Te Kura Tapuhi who has the appropriate qualifications and experience to facilitate your learning during your clinical placement
- The kaiako liaises with the preceptor and the clinical provider outlining learning requirements and objectives, answers questions and addresses any concerns.
- The kaiako will meet you as determined by course requirements and will evaluate your progress towards meeting the required learning outcomes and competency standards.
- Kaiako provide constructive feedback on your clinical practice and your portfolio work outlining strengths and areas for further development and improvement.
- They will facilitate formative and summative assessment meetings collaboratively with you and your preceptor.

The roles and responsibilities for taura, the clinical provider, the preceptor and kaiako are further outlined in the Responsibilities for Clinical Experience guide which can be found on your Moodle course page.

COMMUNICATION DURING YOUR CLINICAL PLACEMENT

All course and programme-related information will be sent to your Otago Polytechnic taura email address. It is your responsibility to check this email account daily. Failure to do this may mean missing out on important information.

ASSESSMENT

Each clinical course requires you to demonstrate competence in clinical practice including portfolio evidence and medication safety and management. Your course outline (found on Moodle) will provide you with the specific assessment requirements for each clinical course. Clinical competence assessment is a collaborative process involving you, the preceptor, and your kaiako. The School of Nursing | Te Kura Tapuhi retains ultimate responsibility for overseeing and ensuring the integrity of the assessment process throughout the clinical learning experience.

Formative clinical assessment process

The formative assessment is conducted midway through the clinical learning experience. It offers a chance for you, your kaiako and your nurse preceptor to review your progress and collaboratively develop a learning action plan to guide the remainder of your placement.

Summative clinical assessment process

The summative assessment takes place at the end of the clinical learning experience at the School of Nursing. This assessment involves input from you, your kaiako, and your nurse preceptor. It evaluates your overall performance against the course learning outcomes and provides a comprehensive review of meeting competence standards at the expected level.

Expected competence level

The expected competence levels below provide a benchmark for knowledge, skills, supervision, and self-assessment throughout your programme of study. These levels serve as a guide for both you and your RN preceptor, as well as your clinical kaiako, ensuring clarity and alignment in your developmental journey.

Year one: Semester 1 & 2

Tauira are developing foundational nursing knowledge and skills through exposure and participation. Tauira require direct supervision and continuous supportive prompting from an RN preceptor or kaiako when participating in care. Tauira will require direction to identify their own learning needs.

Year two: Semester 1

Tauira are developing nursing knowledge, skills and critical thinking when interpreting and responding to health consumer needs. Tauira are beginning to integrate knowledge and concepts to inform clinical reasoning. Tauira require close supervision and frequent supportive prompting from RN preceptor when participating in care. Tauira are beginning to identify their own learning needs through discussion with the RN preceptor and kaiako

Year two: Semester two

Tauira are continuing to develop nursing knowledge, skills and critical thinking when interpreting and responding to health consumer needs. Tauira are beginning to analyse knowledge and integrate concepts in practice to inform clinical reasoning from experience. Tauira require close supervision and frequent supportive prompting from RN preceptor when participating in care. Tauira are beginning to identify their own learning needs through discussion with RN preceptor and kaiako.

Year three

Tauira are extending their nursing knowledge, skills, critical thinking, and problem solving when interpreting, responding, and evaluating care in complex care environments. Tauira are beginning to synthesise knowledge and integrate concepts in practice to inform clinical reasoning. Tauira can

transfer knowledge to new situations and require less supervision and infrequent supportive prompting from RN preceptor when participating in care. Taura can identify their own learning needs and accept accountability for their own practice.

Transition

Taura will have the opportunity through an extended clinical placement to integrate and consolidate nursing theory, practice and research. Meeting the competencies for registered nurses (NCNZ, 2016) by the completion of this placement will prepare them for beginning nursing practice. The domains of competence are Domain One: Professional Responsibility, Domain Two: Management of Nursing Care, Domain Three: Interpersonal Relationships, Domain Four: Interprofessional Health Care and Quality Improvement.

Registration requirements

Please refer to NCNZ website [Kua rēhita hei tapuhi | Register as a nurse](#)

Record of concern

When there are concerns that a taura is not meeting the expected competence standards during a clinical learning experience, a 'Record of Concern for Clinical Practice' will be initiated by the kaiako. This process can occur at any stage of the clinical learning experience. This process is designed to support taura to achieve the course learning outcomes and should not be viewed as punitive. It is intended to provide constructive feedback and guidance to help taura succeed. The Record of Concern for Clinical Practice is presented at the Assessment Committee and a record is kept on the taura electronic file as well as any other relevant correspondence or meeting notes. The process is outlined below:

1. The taura will be informed that a Record of Concern is being initiated
2. Taura will be required to attend a meeting with the kaiako and Course Coordinator to discuss the issues and remedial objectives. They are encouraged to bring a support person to this meeting.
3. If the remedial objectives are not met within the time limit to the standard required, then this will result in course failure.

Portfolio resubmissions

Following your final portfolio submission, you are entitled to one resubmission for each of your submissions in your portfolio

Extension requests for portfolio submissions

If you have extenuating circumstances that means you are unable to submit your portfolio work by the due date and time as specified in your course outline, then you can request an extension using the extension request form on your Moodle course page.

ISSUES/CONCERNS DURING YOUR CLINICAL LEARNING

While most clinical learning experiences are positive and supported by dedicated staff, occasional concerns may arise. It is essential to address any issues promptly to ensure a safe and effective learning environment.

What to do if you have a concern:

- **Health consumer safety or clinical practice concerns:** Report immediately to the Clinical Manager or senior RN if you encounter issues related to patient care or safety. Inform your kaiako as well for additional support.
- **Clinical learning concerns:** If your preceptor or learning support is inadequate, first address the issue directly with your preceptor if possible. Then, inform your kaiako to help resolve the problem.
- **Documentation:** Document your concerns with dates, times, witnesses, and resolution attempts. Ensure your documentation is dated and signed. Do not sign any clinical placement provider documents without consulting your kaiako.
- **Support:** Your kaiako is your primary contact for concerns. Additional support is available through Otago Polytechnic Student Success.

Kaiako responsibilities:

- **Health consumer safety or clinical practice concerns:** Address concerns within the clinical area initially. If unresolved or if there's an immediate risk, contact the Course Co-ordinator and Clinical Co-ordinator. Removal from the clinical area may be necessary while the issue is explored.
- **Clinical learning concerns:** Raise concerns with the clinical area for resolution. If unresolved, escalate to the Course Coordinator and Clinical Co-ordinator.

Clinical Co-ordinator responsibilities:

- **Review and action:** Ensure taura concerns are reviewed and actions are completed. This may involve meetings with placement providers or evaluating clinical areas.
- **Logging and tracking:** The Clinical Co-ordinator maintains an electronic record of all concerns for transparency and tracking.

Feedback:

- Please complete course feedback after each clinical block. Your feedback is confidential and helps improve clinical learning experiences. Please see BN Programme Handbook regarding student surveys

HEALTH AND SAFETY DURING YOUR CLINICAL PLACEMENT

At all times, you must remain vigilant about your own safety as well as the safety of health consumers, colleagues, peers, and anyone else you may encounter. At the beginning of each year, you are required to complete the Otago Polytechnic health and wellbeing course on Moodle. In addition, you are also required to complete the driving safety course if you are driving your own vehicle to and from clinical placements.

During any clinical learning experience, there is a potential risk of being involved in an incident that could lead to physical or psychological harm to yourself, a clinical staff member, or a patient/client/resident

What to do if you are involved in an incident:

- **Immediate contact:** First contact is with the preceptor on clinical placement. They will help you report the incident and follow any internal processes (Such as blood and body fluid exposure procedure). Taira also inform their kaiako about the incident.
- **Discuss with clinical placement:** If necessary, the kaiako will discuss the incident with the clinical placement provider, taira and preceptor.
- **Policy and documentation:** The clinical providers policies and procedures will be followed, including completing any necessary documentation such as incident reporting and following the open disclosure policy.
- **Informing the Course Coordinator:** The kaiako will notify the Course Coordinator about the incident. If the incident is of a serious nature the Head of School will also be notified.
- **Complete a Vault Incident Report:** Taira will be supported by the kaiako
-
- to complete a Vault Incident Report. Please also refer to the following policy [Reporting a Hazard or Incident](#).
- **Debriefing:** Taira and the kaiako and/or Course Coordinator will debrief the incident. The RN/EN preceptor may also participate in the debriefing if appropriate.
- **Additional support:** If you require additional support following a clinical incident, please make an appointment with Otago Polytechnic Student Support Services using [the online booking form](#).

For Otago Polytechnic guidelines following a needle stick injury please see Appendix D 'Protocol for blood and body fluid exposure'.

EVALUATION OF CLINICAL COURSE AND PLACEMENT

At the completion of each clinical course, you will be sent an email regarding a feedback survey. Completing this survey provides valuable data to the Course Coordinator and clinical provider and helps support quality improvement processes. You can also provide feedback to your preceptor you will find the preceptor feedback form on your Moodle course page.

UNIFORM

You will be required to wear the Te Kura Tapuhi |School of Nursing uniform while on clinical placement, in the simulation suite and clinical labs. Trousers must be loose fitting. Shoes should be closed toe, of wipeable, non-absorbent material (non-fabric) and kept clean. You are required to have your hair restrained, if it is longer than collar length, no jewellery (stud earrings only), no wristwatches and no visible piercings. Absolutely no gel, acrylics or nail polish is to be worn during placement or while in the simulation and clinical labs. These restrictions are infection prevention requirements.

- **Uniform guide:** For a guide regarding uniform requirements please click on this link [Clinical Experience and Skills Lab: Uniform Requirements](#)
- **Purchasing your uniform:** For information about ordering and purchasing please click on this link [Order your Nursing Uniform](#)

MOBILE PHONES

Your mobile phone should be turned off or set to silent/vibrate mode while in clinical areas. You may use your mobile phones for personal purposes only when outside the clinical areas, such as during meal breaks. The use of mobile phones, cameras, or social media sites in clinical areas is strictly prohibited without prior permission from the Clinical Nurse Manager and Course Coordinator.

DRIVING CARS

You are not permitted to drive Health NZ |Te Whatu Ora or other agency cars, or to drive health consumers in your own or the health consumers car. Exceptions to this may be made in consultation with the Head of Nursing.

SMOKING AND VAPING

Smoking, vaping, and electronic cigarettes are not permitted while you are wearing your Otago Polytechnic nursing uniform as tauira must always portray a professional image.

Otago Polytechnic supports smokers and vapers who wish to stop and suggests the following: Quitline 0800 778 778, a free service which includes after-hours support (there is a nominal fee for nicotine patches if desired). In addition, support is available from Student Health. Please also refer to the [Smokefree/Auahi Kore Policy](#).

NAME BADGES AND IDENTIFICATION

The school supplies you with a name badge at the beginning of your course. This must be worn in all clinical areas; it is a legal requirement that health and disability

consumers know who is providing services to them (Code of Health and Disability Services Consumers' Rights 1996). Replacement badges can be obtained through School of Nursing | Te Kura Tapuhi administration at the learner's cost. Payment is required before a badge will be ordered.

The Otago Polytechnic ID card is obtained through OPSA, based in the Hub, at the beginning of each year. It is the learner's responsibility to obtain this ID on production of evidence of enrolment. This card doubles as your library card, as identification for clinical access, and access to The Hub. Learners can order this card online – please ensure the photo selected if ordering online is suitable for identification purposes, this photo will also be used for your Te Whatu Ora Southern identification card.

Te Whatu Ora ID cards

These photo ID pass cards are distributed in BNY1 and must be kept safe throughout your degree. If these cards are not regularly activated on placement they will expire and must be re-issued through Photo Pass at the hospital. Any access changes e.g. medication rooms/ward access must be authorised by the relevant Te Whatu Ora clinical charge nurse or educator through Photo pass. If you lose your Te Whatu Ora ID card, then this must be reported immediately as this is a considerable safety risk for clinical areas.

SAFE MEDICATION ADMINISTRATION

Prior to attending your clinical learning experience for each clinical course, you will be required to demonstrate you are safe and competent in medication management and calculations by completing the required assessment as outlined in your course outline. Please see Appendix F for drug calculation formula.

During your clinical placements you may administer medications under the direct supervision of a registered nurse. You must follow the Fluid and Medication Preparation and Administration Guide, please see appendix E.

When administering medication you must follow the nine rights of medication administration.

1. Right drug
2. Right person
3. Right dose
4. Right route
5. Right time
6. Right documentation
7. Right action
8. Right form
9. Right response

You are required to be knowledgeable about the correct dosage, actions, and potential side effects of the drugs you are administering. Please refer to the [NZ Formulary](#).

GUIDELINE FOR PRACTICE SKILLS AND KNOWLEDGE DEVELOPMENT

The guideline is an overview of evidence-based skills and knowledge that taura may have the opportunity to be involved in or observe under the supervision of their preceptor. This is not an exhaustive list and is not intended to be used as a checklist. The guide can be used by taura, kaiako and registered nurses in practice who are facilitating taura clinical learning experience.

There are eight fundamental concepts underpinning all practice skills and knowledge. These are: Te Tiriti o Waitangi, Kawa Whakaruruhau, cultural safety, therapeutic communication, caring, professionalism, safety and sustainability.

CLINICAL LEARNING FACILITIES ON CAMPUS

Clinical practice rooms and simulation suite

You will have the opportunity to work in the clinical practice room and simulation suite alongside your peers and kaiako, The clinical practice room and simulation suite are well equipped and are designed to simulate the clinical setting. Therefore, you are required to meet the requirements as expected in any clinical context. You are required to complete the Clinical Practice Rooms Guidelines & Student Agreement form when you commence the programme.

Location/access

Clinical Practice Rooms H202 and H205 are situated on the second floor in H block. These rooms are not open access and are entry only by kaiako swipe card and booking. The rooms are managed by Sharon Buchanan-Letts (Clinical Technician).
Office Location: H211

Booking system

Room bookings and equipment requests for practice are to be emailed to the clinical technician sharon.buchananletts@op.ac.nz

NOTE: Learners must wear uniform for all clinical laboratories and simulation sessions unless otherwise specified

CLINICAL EQUIPMENT

Taura require the following equipment for practice purposes:

- Adult Sphygmomanometer
- Stethoscope
- Neuro Torch

These can be purchased as a pack or individually from our supplier, Pharmaco (NZ) Ltd, from their website. All items come with a lifetime guarantee. Use the discount code supplied on the BN welcome page.

[BN Welcome page](#)

[Equipment detail](#)

[Purchase your equipment here](#)

INDEMNITY INSURANCE

You are strongly advised to take out indemnity insurance. This provides legal protection for you if you are involved in any medical misadventure, legal or disciplinary action. Some clinical areas will not accept learners who do not have this insurance. This means not having indemnity insurance may affect your progress in the course.

The least expensive way to obtain indemnity insurance is to join an appropriate professional body such as the College of Nurses of Aotearoa or the New Zealand Nurses Organisation. This takes time to organise (sometimes several weeks) so ensure you apply prior to your first clinical placement.

PREPARING FOR YOUR PLACEMENT

Prior to commencing your clinical placement, you will be provided with information about your clinical learning experience. You will be expected to attend all tutorials pertaining to your clinical placement. You will also be able to access information on Moodle in the relevant clinical course.

It is also a good idea to make sure you are prepared before attending your clinical placement. Below is a guide to help you prepare.

- Make sure you know where your placement is located.
- Arrange transport and accommodation.
- Find out about parking.
- Pre-read any relevant documentation as per InPlace and/or your Moodle course page.
- You will be guided by your course coordinator regarding your clinical roster, but please make sure you are available for rostered shifts during your placement period.
- Rosters are determined by the clinical placement provider and are non-negotiable except in extenuating circumstances as approved by the course coordinator and clinical placement area.

APPENDIX A: INTERIM CLINICAL STAND DOWN

Serious concern raised

Clinical placement provider or kaiako raises concerns of a serious nature in relation to taura clinical competence, professional behaviour, and/or health consumer/colleague safety.



- **Kaiako** informs the **Course Coordinator** and **Head of School**
- **Taura** is removed from the clinical setting by the delegated authority pending investigation by the School of Nursing.



Process of investigation

1. Meeting with Clinical Nurse Manager/Delegate, preceptor and kaiako/course coordinator to discuss and document details of the concern raised.
2. Kaiako/course coordinator to arrange a meeting with taura and support person to discuss and document the raised concern/s.
3. Notify Head of School.



Outcome

Investigation findings determine interim clinical suspension is no longer required and taura returns to clinical placement or alternative clinical placement

For alternative clinical placement

- If concerns about taura ability to practice safely have been identified but the Head of Nursing has allowed the learner to continue in the program, specific assessment criteria will be applied.
- The placement area and preceptor assigned to the taura will be informed of these concerns and the specific criteria.
- The Head of Nursing, or their delegate, will communicate this information to the placement area and preceptor, and the taura will be notified about what information has been shared.



Outcome

Investigation findings determine the concerns are of such a serious nature that the taura does not return to the clinical area (or an alternative clinical area).

- Taura is advised by Course Coordinator they have failed the course.
- Fail grade presented to assessment committee for ratification.
- The Assessment Committee, along with the Head of School, will review the case and determine the outcome regarding the learner's continuation in the program.
- The taura will be notified of the final decision.

OR

APPENDIX B: HEALTH SCREENING + IMMUNITY REQUIREMENTS

To manage the risk posed by vaccine preventable diseases taura are required to provide proof of vaccination and or serological evidence of immunity as outlined on the table below. Failure to provide this evidence means you will not be able to attend your clinical learning experience which could affect your progress through the programme.

Please follow these steps:

1. **Book your test:** Book your blood tests <https://bookings.sclabs.co.nz/>
2. **Make your payment:** A form will be emailed to you once you have paid

Blood collection fee:

Blood Collection Fee	\$22.00
Measles	\$42.50
Mumps	\$39.50
Rubella	\$34.00
Varicella	\$42.50
Hepatitis B Antibodies and Antigen	\$58.00
Total	\$238.50

3. **Go to the laboratory:** You can take the form to the following APHG laboratory collection centres:

[Otago & Southland](#)
[Canterbury & Timaru](#)
[Nelson & Marlborough & South Canterbury](#)
[Wellington](#)
[Hawkes Bay](#)
[Taranaki](#)
[Hamilton](#)
[Auckland](#)
[Northland](#)

Please note: If you do not live near one of the above areas:

You can complete the blood test at a Laboratory Collection centre in your area. Alternatively, you may choose to have your tests completed during Orientation week when you are in Dunedin.

4. **Immunisation record:** Please phone your doctor's office and ask them to email a copy of your current and childhood immunisation record to you.
5. **Forward to student health:** Forward this to studenthealth@op.ac.nz with the subject line: *Immune Status Nursing 2025*.

(We need this evidence to gain a full picture of your immunity, and it will enable Student Health to provide specific advice if you are not immune to any diseases)

If you are not immune:

1. **You will be contacted:** The nurse at Student Health will contact you
2. **Advice:** You will be provided with advice regarding vaccinations
3. **Payment:** You are required to pay for your own vaccinations

Vaccine preventable disease requirements

Vaccine Preventable disease	Requirements for attending clinical placements	Notes
Covid-19	Required Proof of two vaccinations and one booster.	Government vaccine mandates are no longer required. However, most placement providers require evidence that you are fully vaccinated. As per your Covid-19 Vaccination record. If you have not been vaccinated or have only received partial vaccination a risk management plan will be discussed.
Hepatitis B	Required Hepatitis B immunity or proof of antibody level ≥ 10 IU/L.	Carriers of Hepatitis B must have had a medical review including guidance regarding clinical placement. Advice may be sought from Te Whatu Ora occupational Health. Tauria must advise their programme of their Hep B status.
Varicella (Chicken Pox)	Required Proof of 2 x vaccinations or serology	
Measles	Required Proof of two MMR vaccinations or serology	
Mumps	Required Proof of two MMR vaccinations or serology	
Rubella	Required Proof of two MMR vaccinations or serology	
Pertussis (Whooping Cough)	Recommended Proof of vaccination in the past 10 years. Required When working with infants < 1 yrs old.	Appear as TDap, Adacel or Boostrix on your vaccination record.

Influenza	Recommended In some circumstances evidence of influenza vaccine may be required prior to placement	Taura may be provided with free influenza vaccination through Te Whatu Ora Southern.
Tuberculosis	An assessment will be completed to determine if TB screening is required. This assessment is based on, birthplace, place of residence, work, and travel history. NO pre-placement TB screening is required for those ākonga who were born and resided in: A: Countries with a low incidence of TB. B: Have no history of known contact. C: Have no history of having travelled for more than a short holiday in a high-risk country. D: Have no history of having worked in a high-risk country e.g., on elective, Red Cross mission, locum.	If answered No to section A, or YES to section B, C or D you must have a QuantiFERON Gold TB blood test. If the test is positive for Tuberculosis taura must have a chest X-Ray and a medical review to exclude active TB.

APPENDIX C: PRACTICE SKILLS AND KNOWLEDGE

Tiriti o Waitangi, kawa Whakaruruhau, cultural safety, therapeutic communication, caring, professionalism, safety and sustainability

(Concepts that are fundamental to all practice skills and knowledge)

Concept	Practice skills and knowledge
Professional self-care	<ul style="list-style-type: none"> • Resilience • Emotional regulation • Professional self-care
Legislation and Codes	<ul style="list-style-type: none"> • Application of MH Act: 111, 8b Nurse's role/ second health professional reports • Application of CP(MIP) and IDCCR Act and SA (CAT) Act • Code of Rights • Health information privacy code • End of life decision making, • Advanced care plans • Supported decision making and advanced directives • PPPR Act and EPOA • Shared Goals of Care • Consent
Infection prevention and control	<ul style="list-style-type: none"> • Hand hygiene and glove use • Donning and doffing PPE • Isolation precautions • Managing sharps • Management of the physical environment • Aseptic non touch technique
Professional and ethical practice	<ul style="list-style-type: none"> • Challenging stigma and discrimination <ul style="list-style-type: none"> ○ Importance of language, values and attitudes (tangata whaiora, people with experience of distress) • Professional Self care <ul style="list-style-type: none"> ○ Resilience ○ Emotional regulation ○ Professional boundaries ○ Professional self-care/supervision
Basic life support	<ul style="list-style-type: none"> • Adult, child and infant: <ul style="list-style-type: none"> ○ CPR + AED ○ Foreign body obstruction ○ Anaphylaxis ○ Airway management • Emergency trolley • Channels of communication • Emergency protocols and procedures (Hospital and Community)
Personal cares	<ul style="list-style-type: none"> • Bed bath/shower/bath • Bed making empty & occupied • Oral hygiene • Eye care • Pressure area care • Maintaining skin integrity • Elimination/continence care/catheter cares/stoma care • Assistance with ADLs

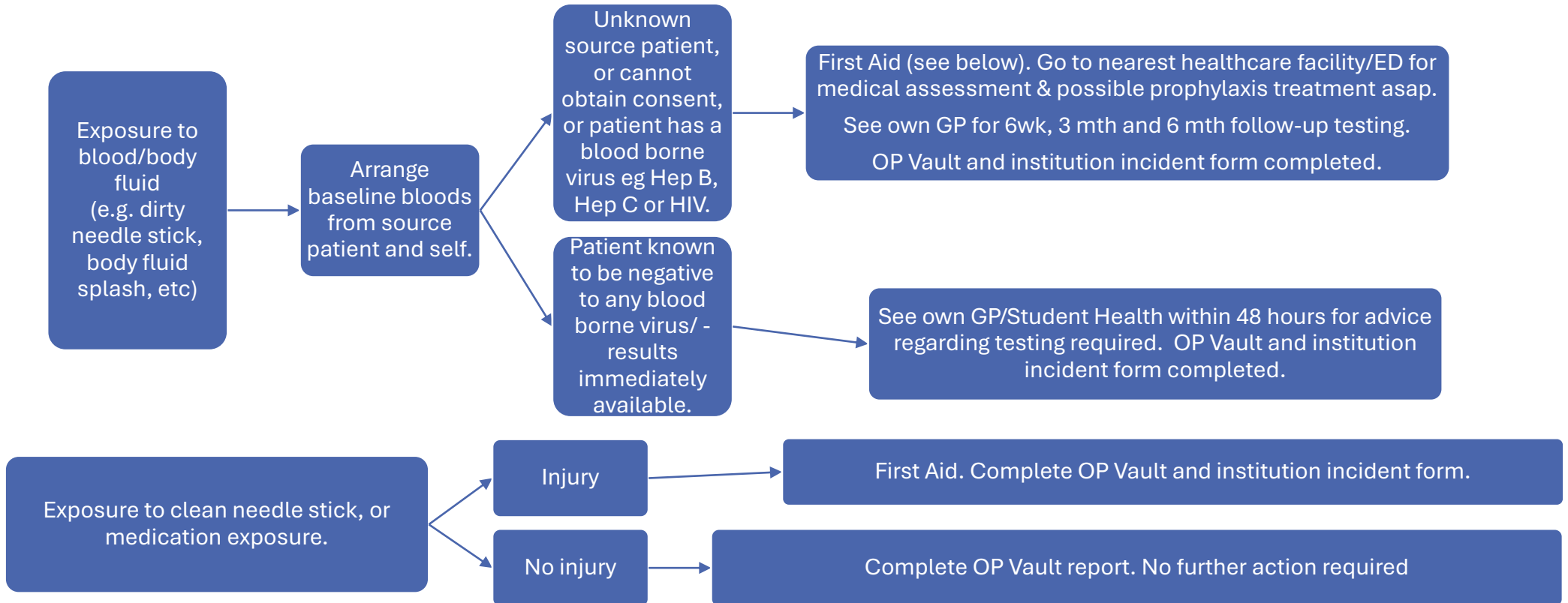
Concept	Practice skills and knowledge
Health consumer assessment	<ul style="list-style-type: none"> • Vital signs <ul style="list-style-type: none"> ○ T, P, BP, R, SAO2 including documentation ○ EWS/PEWS/MEWS ○ Neurological assessment • Recognising the deteriorating patient • Height, weight, waist circumference • Pain assessment • Subjective and objective data collection • Functional assessment • General survey • Health history • Comprehensive mental health assessment • Mental status exam (MSE) • Assessment techniques: inspection, palpation, percussion, auscultation • Head-to-toe/systematic assessment • Delirium assessment (CAM, 4AT) • Cognitive assessment • ECG/Telemetry • InterRAI • Glasgow antipsychotic side-effect scale (GASS) • Well child assessment and child development • Community assessment • Genogram/Ecomap
Risk assessment and management	<ul style="list-style-type: none"> • Risk assessment and safety planning • Suicide prevention • Metabolic monitoring /long term antipsychotic use • Pressure Injury risk assessment, prevention, and management • Falls risk assessment/prevention • Mobility devices: frames/sticks/crutches/wheelchairs • Nutritional assessment and meeting nutritional needs • Hydration assessment (Fluid balance) • Safe handling – LITE /transfers/hoists/devices/health & safety/positioning • DVT prevention – TED stockings
Patient centred care planning	<ul style="list-style-type: none"> • Te Whare Tapa Whā • Te Wheke • Rongoā Māori • Admission and discharge planning • Short- and long-term care plans • Wellness recovery action planning • Co-existing problems - Stepped care approach • Strength based approach to chronic disease management
Psychological and psychosocial interventions	<ul style="list-style-type: none"> • Strength based recovery practice • Trauma informed care • Motivational Interviewing /solution focus approaches/brief intervention/FACT • Working with people who are experiencing psychosis or hearing voices • Working with Māori as tāngata whaiora (application of ToW, Te Ao Māori, Māori models of health) • Application of skills for de-escalation/heightened distress/emotional regulation • Application of strategies for least restrictive practice (reducing seclusion and restraint)/sensory modulation. • Application of positive behaviour support • Disordered eating

Concept	Practice skills and knowledge
Wound management	<ul style="list-style-type: none"> • Wound assessment • Aseptic dressing technique/clean technique • Principles of wound management: types of wounds, types of dressings • Wound drainage • Clips, sutures removal • Negative pressure wound therapy
Medication Administration (Please follow medication and policy guideline regarding scope of practice)	<ul style="list-style-type: none"> • Rights of medication administration • Role and responsibilities of ākonga in medication administration: refer local Te Whatu Ora policy • Routes of administration: oral, sublingual, topical, nebuliser, inhaler, subcutaneous, IM, IV, PR, • Central venous line, PICC (Observation only) • 24 hour clock • Medication charts • Medication calculations – adult and paediatric • IV therapy • Blood products transfusion • PCA pumps • SC pumps
Oxygenation	<ul style="list-style-type: none"> • Wall regulator/cylinder • Nasal prongs/masks/humidification/nasal high-flow systems/Non-invasive ventilation • O2 policy: clinical indicator for O2 therapy • CO2 monitoring • Spirometry/peak flow/inhaler/spacer/nebuliser • Underwater seal drainage
Other Skills	<ul style="list-style-type: none"> • Urinary catheterisation • Nasogastric insertion, removal and care • Blood glucose monitoring • Venipuncture (Observation only) • Throat swabbing including COVID • Urinalysis • Specimen collection
Palliative Care	<ul style="list-style-type: none"> • Te Ara Whakapiri Toolkit • Recognising the dying person • Care of the dying person • Care of the deceased person • Care of the whānau • Primary palliative care • Care of people with life limiting conditions
Substance use and Addictions	<ul style="list-style-type: none"> • Substance use screening • Acute alcohol/ amphetamine type and other drug withdrawal
Documentation/ digital health	<ul style="list-style-type: none"> • Health of the nation outcome scale (HoNOS) • Progress notes - SOAPIE • Documenting in health consumer file • Trend care • Telehealth • Electronic health records

Concept	Practice skills and knowledge
Health education/ promotion/ screening	<ul style="list-style-type: none"> • Cardiovascular risk • Diabetes screening • Health Screening: breast/cervical/testicular/prostate/ bowel cancer • Smoking cessation • Immunisation • Family violence • Sexual violence • Elder abuse • Shaken baby • Safe sleeping • Pregnancy • Mental health screening tools • Well child • Infectious disease • Sleep, nutrition, exercise, mental well being • Medication management • HEaDSSS assessment • Pre and post-natal depression screening
Therapeutic communication	<ul style="list-style-type: none"> • Therapeutic communication (active listening/reflective listening/empathy) • Developing rapport • Compassionate communication, • Hui process • Communication for diversity • Communication with whānau • Health consumer interview
Working with the team	<ul style="list-style-type: none"> • Discharge planning and referrals • Interdisciplinary meetings • Handover - ISBAR • Working with community providers



School of Nursing Protocol for Blood and Body Fluid Exposure



NEVER, EVER RECAP A USED NEEDLE and ensure there is a sharps container to dispose of your dirty needle immediately at point of use.

First Aid: Puncture sites - encourage the wound to bleed, ideally by holding it under a running tap. Wash the wound using plenty of soap and water. Dry the wound and cover with a waterproof plaster or dressing. **Body Fluid exposure** – flush eyes, mouth or nose with water for 15 minutes.

Patients own insulin pens - these devices are designed for patients to self-administer their own medication and are a significant blood/body fluid exposure risk. It is therefore OP School of Nursing recommendation that students should **not** be using these devices to inject patients. Single use insulin syringes and needles, (which are immediately disposed of), should be used if available.

APPENDIX E: FLUID AND MEDICATION PREPARATION ADMINISTRATION

Student Nurse and Competence Assessment Program (CAP) candidates - Fluid and Medication Preparation and Administration Guide. ALL fluids and medications MUST be prepared and administered under the DIRECT SUPERVISION of a Registered Nurse (RN)							
The following routes or procedures are approved for use under the DIRECT SUPERVISION of a Registered Nurse who must be physically present, observing each step of the procedure.	BN Year One	Diploma of Enrolled Nursing	BN Year Two	BN Year Three	CAP Candidates	MNSC Year One Acute Care	MNSC Year Two
Oral, PR, PV, PEG, NGT, buccal / sublingual, topical/transdermal, SC or IM injection, Metered dose inhalers (MDI's), nebulizers, oxygen							
Controlled Drugs by the following routes - oral, IM, SC, PR, PV, PEG, NGT, buccal/SL, topical/transdermal	P	P	P	P	P	P	P
IV or SC fluids (**excluding HIGH RISK medication additives) Note: Premixed fluids already containing Potassium chloride are fine	Preparation						
	Administration	O	O				
Peripheral IV bolus meds (**excludes HIGH RISK Medication additives)	Preparation						
	Administration	O	O				
Flushing peripheral IV cannulae with 0.9% Normal Saline flush	O	O					
Removal of IV / SC cannulae and IV/SC dressing change							
Patient controlled analgesia (PCA)	O	O	O	P	P	O	P
SC syringe driver	O	O				O	
Intravenous syringe driver	O	O	O	O	O	O	O
Immunisation: A standing order or prescription is required for the administration of immunisations (including scheduled), under the DIRECT supervision of an authorised vaccinator. Clients MUST be at least 12 years of age, with parental consent if under 16 years of age. Students / CAP candidates may NOT administer COVID-19 vaccines.	O	O	LP	LP	O	LP	LP
Venepuncture	O	O	LP	LP	LP	O	LP
IV blood or blood component preparation or administration	O	O	P	P	P	P	P





**** HIGH RISK Medication additives** include IV insulin, IV heparin, Potassium Chloride, Controlled drugs, vasoactive drugs, inotropes, TPN, chemotherapy

The following modalities are NOT to be handled by Student Nurses or CAP candidates:
Cytotoxics (by any mode), Epidural administration, Central Venous Access Devices (CVAD), including tunneled / non tunneled catheters, implanted ports, PICC lines or renal dialysis catheters.
Student nurses and CAP candidates are NOT to sign the Controlled Drug Register.
In some clinical areas, certain procedures may be undertaken with the authorisation of a Te Whatu Ora Southern IV Clinical Nurse Specialist (or relevant Manager).

Immunisations and Venepuncture may ONLY be performed after completion of a theoretical / practical course approved by the clinical area.

Peripheral cannulation requires clinical skills assessment, irrespective of prior experience.

Authorised by: Te Pūkenga - Otago Polytechnic (Dr. Karde Hogarth), Te Pūkenga - Southern Institute of Technology (Karyn Madden), Te Whatu Ora Southern Chief Nursing & Midwifery Officer (Jane Wilson), University of Otago (Dr. Virginia Jones). Applies to Aged Residential Care, Community health, Acute Care and Mental Health clinical placements. Version 2: August 2023

KEY:		May perform full procedure under DIRECT SUPERVISION of RN, including signing as second checker (Med chart - document name in comments box)
		Requires completion of a learning package approved by the clinical area
		May have partial involvement under DIRECT SUPERVISION of RN, as a learning opportunity. Students will NOT sign documentation relating to the procedure
		May observe ONLY, as a learning opportunity

APPENDIX F: DRUG CALCULATION FORMULA

To find the number of tablets that need to be given

$$\frac{\text{What I want (prescribed)}}{\text{What I've got (dose available)}} = \text{number of tablets}$$

For liquid medications

$$\frac{\text{What I want (prescribed)}}{\text{What I've got (dose available)}} \times \text{Volume of stock solution} = \text{Volume to administer}$$

Fluid rate formula (mL/hr)

$$\frac{\text{Volume to be infused (mL)}}{\text{Hours to be infused (hours)}} = \text{mL/hr}$$

Fluid rate formula (drops/ min)

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

APPENDIX G: EMERGENCY EVENTS CLINICAL PLACEMENT PROCESS

Standard seven: Emergency events

This standard will be initiated by the Nursing Council during an emergency of national significance, for example, a natural disaster or a pandemic. The standard allows nursing ākonga/students to contribute during such emergencies to support communities, particularly Māori and Pacific peoples, who are at substantial risk due to existing social and health inequities.

In the event of a state of an enduring emergency, where the Nursing Council accredited schedule of clinical learning have been significantly disrupted by restrictions imposed by the emergency, employed (paid) clinical learning experiences may be undertaken related to the event and a reduction in clinical hours may be considered. All other standards must continue to be met.

This standard may be initiated when an emergency, such as pandemic restrictions, has prevented an ākonga/student from completing the required clinical placement hours.

Te Kauniheara Tapuhi o Aotearoa | Nursing Council of New Zealand
Nursing Education Programme Standards (2024), p. 17.

Safety and clinical placements

- Otago Polytechnic School of Nursing acknowledges that clinical placements during emergency settings are optional and cannot be mandated. Taira have a right to decline a placement without penalty as per standard 7.1 p.17 (Nursing Education Programme Standards, 2024).
- Otago Polytechnic School of Nursing will collaborate with clinical providers and taira to conduct risk assessments and will establish and agree on a process for managing situations where taira may become unwell.

Clinical placement plans

- The Head of Nursing in consultation with clinical providers will develop a paid or alternative clinical employment clinical placement plan. This plan will address any disruptions to placements and align with the graduate profile, learning outcomes, and Nursing Council competencies. The plan will be submitted to Nursing Council for approval.

Paid clinical learning limits

- The maximum number of clinical learning hours that can be awarded while a taira is in paid employment is **200 hours overall**.

Clinical learning hours adjustments

- In an emergency/pandemic situation at the discretion of the Head of Nursing 150 clinical hours can be substituted by simulation hours if the learning is acceptable and the taira achieves competencies for safe practice as a registered nurse.