

## **Locum CHN Work with NHC:**

### ***Brief Overview of Important Information***

**July 2015**

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#### **CONTENTS:**

|  |         |
|--|---------|
| 1. Your Curriculum Vitae                                   | 3       |
| 2. Your Contact Details                                    | 3       |
| 3. Contacting NHC  | 3       |
| 4. Nurses Board of South Australia registration            | 3       |
| 5. National Police Certificate                             | 3       |
| 6. The Anangu Pitjantjatjara Yankunytjatjara Lands         | 3       |
| 7. Information about NHC                                   | 4       |
| 8. Communicare – PIMS training                             | 5       |
| 9. Remote Area Nursing (RAN) in general                    | 5 - 6   |
| 10. NHC Code of Conduct                                    | 6       |
| 11. NHC immunisation requirements                          | 7       |
| 12. Contract and NHC Pharmacy Guide                        | 7       |
| 13. Payroll Employment Starter Pack                        | 8       |
| 14. Travel arrangements                                    | 8       |
| 15. Changes To Travel Arrangements                         | 9       |
| 16. Telephones, faxes, internet & telephone accounts       | 9       |
| 17. Internet & NHC Intranet access – passwords             | 9       |
| 18. Appropriate dress code                                 | 10      |
| 19. Accommodation  | 10 - 11 |
| 20. Food, groceries, shopping                              | 11      |
| 21. Out of work hours / leisure                            | 11      |
| 22. Motor vehicle safety                                   | 11 - 12 |
| 23. NHC staff safety policies and guidelines               | 12 - 13 |
| 24. Working with AHW's and the AHM's                       | 14 - 15 |
| 25. Locum – CHN salaries January 2008                      | 16      |
| 26. Check list for working with NHC                        | 17      |
| 27. Map of the APY Lands                                   | 18      |
| 28. Appendix – NHC Clinic Locum CHN orientation check list |         |
| 29. On-Call Guidelines                                     |         |

### **1. YOUR CURRICULUM VITAE:**

Nganampa Health Council (NHC) needs to know about your clinical qualifications, experience and about your ability to cope with this remote indigenous environment. A concise but comprehensive CV will help us determine your ability to work in certain communities and areas.

### **2. YOUR CONTACT DETAILS:**

If you are interested in locum work with NHC, please ensure that we have your current telephone – landline and mobile and email address.

### **3. CONTACTING NHC REGARDING WORK:**

For all questions related to Locum CHN work with NHC please contact:

Vivien Hammond

Clinical Services Manager

NHC – Umuwa Office

**Email:** [vivien.hammond@palya.org.au](mailto:vivien.hammond@palya.org.au)

**Phone:** 08 8954 9044 – APY Lands

**Mobile:** 0400 099657 –no mobile service on the APY Lands

**Efax:** 0881256741

### **4. Nursing & Midwifery Board of Australia (NMBA - AHPRA):**

You must be registered with the Nurses & Midwifery Board of Australia to work in any NHC clinics. To apply for registration access the NMBA – AHPRA website:

**Telephone:** 1300 419 495 within Australia  
+61 3 8708 9001 outside Australia

**Opening Hours:** Monday to Friday 09:00am – 05:00pm (local time).

**Website:** <http://www.nursingmidwiferyboard.gov.au/>

### **5. National Police Clearance (NPC):**

All NHC staff must have a current National Police check (NPC) prior to commencement of work. If you have a current NPC, **please fax a notarised copy of your NPC to the NHC - CSM on 0881256741.**

If you do not have a current NPC you are able to apply for the police clearance on line -

<https://www.nationalcrimecheck.com.au/>

Please email / forward the police clearance when it comes through to you.

### **6. ANANGU PITJANTJATJARA YANKUNYTJATJARA LANDS:**

The APY Lands is located in the far northwestern region of South Australia. It covers approximately 103,000 sq. kms and has a population of approximately 3,500 Anangu people. The land is freehold land controlled by the Anangu people.

All visitors to the APY Lands require a permit to travel and work on the Lands. NHC applies for and maintains records of all staff requiring permits. The permits are renewed annually or revoked at the completion of your contract. Visitors must apply for a permit through APY Lands Council.

Alcohol is banned. NHC employees bringing alcohol or other illegal substances on to the Lands face instant dismissal and removal from the APY Lands.

## 7. INFORMATION ABOUT NHC work:

Information about Nganampa Health Council can be found online via the NHC website at: [www.nganampahealth.com.au](http://www.nganampahealth.com.au) please feel free to phone Vivien Hammond to discuss the work and clinical expectations.

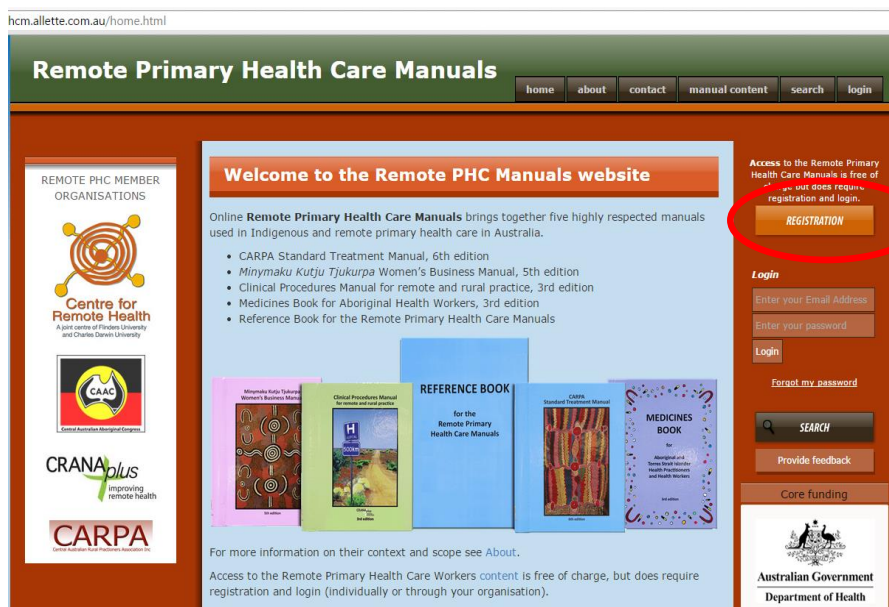
The Standard Treatment Manuals for all NHC Clinics is the *Central Australian Rural Practitioners Association (CARPA) manual* and the *Minymaku Kutju Tjukurpa – Women's Business Manual*. The *Clinical Procedures Manual for remote and rural practice* produced by CRANA is the reference used for clinical procedures outside of CARPA. These publications are available through CRANA Plus – <http://shop.crana.org.au/1-products-publications.html>

**Nganampa Health Council (NHC) uses the CARPA and the Women's Business Manual (WBM). Deviations from these protocols require consultation with NHC Medical Officers.**

Prior to working in NHC clinics you should be familiar with the CARPA and WBM and should have registered for on-line access to these manuals.

### To Register:

Click on the link below or copy and paste the link into your browser  
<https://rphcm.allette.com.au/home.html>



- Make a note of your user name and password

**At your Communicare training the trainer will:**

- Log staff onto the RPHCN website when first enrolled onto communicate
- Teach you to log onto the manual every morning from the icon on the thinpoint panel and leave the browser open
- Encourage staff secondly to look for links at the top of communicate clinical items and get to CARPA pages as required

NHC has a number of clinical documents that will assist with your orientation– General Clinical, Women's Health, Communicare, Chronic Disease Manual and a Child Health. With your first contract you will receive via email a copy of the Communicare manual. These and other documents are available via the NHC intranet – accessible when you are working with NHC

Computer skills are important. It will help if you are confident using computers and can type. Patient records are accessed and entered electronically.

All vehicles used by clinic staff are 4WD and manual transmission cars. **You must have a manual license and be a confident driver** to handle the dirt roads on the APY Lands.

**8. COMMUNICARE (PIMS) TRAINING:**

All new CHN's receive a brief 2 hour introduction to the computerised Patient Information Management System used by all NHC Clinics. This system is called Communicare.

The training is usually arranged for the afternoon that you arrive at/ fly in to Alice Springs. Your first contract will start on the date you arrive in Alice Springs. You will be paid for 3 hours to cover the training and motel to office travel time. This needs to be put on your timesheet.

The training will be conducted at the NHC office at 3 Wilkinson Street (unless otherwise arranged). You should catch a taxi to the office from the airport if time is limited or your motel and for the return trip. Please keep the receipts for reimbursement, copy and fax them to Yvonne at NHC Accounts.

**9. REMOTE AREA NURSING (RAN) IN GENERAL:**

We are happy to talk about useful resources and courses that may help to prepare you for Remote Area Nursing (RAN) work.

NHC facilitates certain courses as part of the Clinical Education plan for permanent and locum nurses who regularly work with NHC these courses include:

- ACEN courses – ITLS, TNCC, ENPC, CATNII
  - Pharmacotherapeutics short course - CRH
1. Accredited course for vaccine providers: From January 2014 all Vaccine Providers working in South Australian are required to complete an on-line course managed by SAICU before they are able to immunise patients. To access the SA online short immunisation course go to:  
<http://www.sahealth.sa.gov.au/wps/wcm/connect/public+content/sa+health+internet/clinical+resources/professional+development/immunisation+provider+training> The course now costs \$198.00 - forward the receipt to Vivien Hammond for reimbursement please.
  2. Remote Area Health Corps (RAHC) have a free elearning suit of relevant remote area learning modules which provide a general basis for some aspects of nursing in remote areas  
<http://www.rahc.com.au/elearning>
  3. The NGPN - Nurses in General Practice Network -run various short courses for remote area nurses. You can contact them at PO Box 1195, Unit 3, 8 Gregory Tce, Alice Springs, NT 0871 Ph: 08 8950 4800 Fax: 08 8952 3536 Email: [cadphc@cadphc.org.au](mailto:cadphc@cadphc.org.au)
  4. The Centre for Remote Health - Cnr Simpson & Skinner Streets, PO Box 4066 Alice Springs NT 0871, Ph 08 8951 4700 Fax: 08 8951 4777 Email: [crh@flinders.edu.au](mailto:crh@flinders.edu.au) Website: <http://crh.flinders.edu.au> They run longer certificate, diploma, masters courses for remote nurses. They also do short course modules that can be credited towards certificates etc.
    - a. NHC runs the Pharmacotherapeutics course for all permanent CHN's employed by the organisation annually

Obviously knowing CARPA and the "Women's Business Manual" inside out and back to front will help you a lot. There is a reference manual containing the literature supporting the protocols and procedures in CARPA. To access the manuals go to <http://www.remotephcmmanuals.com.au/html/home>

CRANA *Plus* produces an extremely useful reference called *Clinical Procedures Manual for remote and rural practice*. This contains information and instructions related to most procedures you are likely to be confronted with in an emergencies or unusual circumstances. You can obtain copies through CRANA or NHC.

- CRANA *Plus* is a good organisation to belong to - they advertise remote related events/ courses and provide services for remote nurses.
- They also run a number of useful courses <https://crana.org.au/education/eremote/>

ACEN courses – ITLS, TNCC, ENPC, CATN-II – details can be found on the website

<http://www.acen.com.au/courses/> NHC runs these courses for nurses in their Clinical Education Program or you can enrol independently in any of the courses run throughout Australia.

### **10. NHC CODE OF CONDUCT:**

The reputation of Nganampa Health Council and the quality of the services it provides are significantly influenced by the professional attitude and behaviour of staff. This Code of Conduct outlines the standards and behaviour which Nganampa Health Council requires as a condition of employment.

- Staff are expected to perform their duties to the best of their ability as described in their job descriptions and contracts of employment. Work Wiya Pay Wiya.
- Staff are obliged to follow and support the policies and procedures of the Health Council as set out in the Nganampa Health Council Policy Manual.
- Staff are expected to be responsible and accountable in the use of finances, equipment, facilities, vehicles and purchase order books.
- Staff are expected to treat members of the Health Committee, clients and other staff with fairness, courtesy, consideration and respect.
- Staff are expected to behave in a way which contributes to a safe and supportive work environment free from discrimination or harassment. All staff have a right to be treated fairly and with respect by their colleagues.
- Staff are required to report any serious offences that they have been charged or convicted of in line with the relevant policy.
- Staff should use language that will not offend other staff, clients or visitors.
- Staff should be scrupulous in their use of confidential information to ensure that privacy of individuals is maintained.
- Staff are required to seek the approval of the Director, Medical Director or Health Services Manager as appropriate before commenting to the media on any aspect of the Health Council's present or past activities.
- Staff are expected to take reasonable care to protect their own health and safety and the health and safety of others.
- Staff are expected to dress appropriately and responsibly with particular concern for their safety.

## **11. NHC immunisation requirements**

Before you are able to commence work with NHC you are required to complete the NHC Immunisation Record form and provide the relevant evidence of immunity or vaccination. What follows provides information and outlines the rationale for these requirements:

- The purpose of the NHC immunisation requirements is to ensure that staff have commenced or attained appropriate coverage against vaccine preventable infections prior to commencing work
- NHC immunisation requirements are documented on the form “NHC Immunisation record” and the associated Instruction form
- You are responsible for all costs associated with attaining compliance with these requirements
- Compliance with these requirements is essential prior to commencing employment with NHC and may mean that you need vaccination and/or serological testing immediately
- NHC strongly recommends that you be immunised against Hepatitis A. If you do not satisfy the hepatitis A recommendations you should, depending on your circumstances, and **prior** to commencing work with NHC:
  - Commence or complete a course of hepatitis A immunisations
- If you do not satisfy the hepatitis B recommendations you must, depending on your circumstances, and **prior** to commencing work with NHC:
  - Commence a course of hepatitis B immunisations, or
  - Continue a course of hepatitis B immunisations or undertake hepatitis B boosting to demonstrate immunity, or
  - Provide evidence that you are a “non-responder” to hepatitis B vaccine (as defined in *National Health and Medical Research Council Australian Immunisation Handbook (current edition)*)
  - If you have undertaken one of these actions, and you have completed all of the other vaccine requirements, you will be allowed to commence work but will be classified as “unprotected” against hepatitis B in the interim
- Employees who are classified as “non-responders” to hepatitis B vaccine will be given appropriate information about managing their risk of infection, the consequences of infection and optimum management in the event of an exposure
- You are expected to have achieved compliance with the hepatitis B immunisation policy by the 6 month probationary review of your employment or locum employment with NHC
- Failure to attain compliance with the policy by the time of the 6 month probationary review may result in termination of your employment
- Please forward the completed NHC immunisation form to the Clinical Services Manager as soon as possible. Your form will be assessed for compliance with the policy. **Do not send forms which are obviously incomplete**
- A copy of your immunisation form will be retained in your personnel file. The original form will be returned to you and should be used to record your employment related immunisations. It is your responsibility to ensure that your personnel record is updated if required
- Your immunisation record will be made available to an NHC medical officer in the event that you are involved in a biohazard incident (either as the donor or recipient) and where immediate medical management is advisable. You are required to follow the NHC protocol(s) related to a biohazard incident

## **12. CONTRACT & NHC PHARMACY FORMS**

You will receive a contract by email that has your name and the agreed dates of your locum contract. Please read the contract carefully. If you are happy with the contract, initial and date each page and then sign the last page and return the COMPLETE document. A copy of the contract will go to Payroll office. You will also receive NHC Pharmacy S4 & S8. Please read the information and complete them as directed. Email / Fax the completed forms to:

Vivien Hammond – Clinical Services Manager

NHC – Umuwa Office / **Fax: 0881256741 or email [vivien.hammond@palya.org.au](mailto:vivien.hammond@palya.org.au)**



### **13. PAYROLL OFFICE STARTER PACK**

You will also receive by email an NHC Employment starter pack. Please complete and return the completed documents to NHC as specified below:

- 1. Tax File Number Declaration Form (TFNDF) – this must be an original form and cannot be faxed or emailed.** NHC will post a form to you or you could pick one up from the Post office, complete the form and **POST it back to the NHC Pay office – PO Box 2232 Alice Springs NT 0871**
- 2. Personnel Record** – complete and return by email or fax to Vivien Hammond
- 3. Superannuation Forms** – if you have an existing fund complete the Choice of Superannuation form or if you prefer to use the fund NHC uses complete the details on the HESTA Form:
  - a. Hesta Superannuation Forms** – return by email or fax to Vivien Hammond
- 4. Choice of Superannuation Forms** – complete and return by email or fax to Vivien Hammond
- 5. Bank Account Form** – complete and return by email or fax to Vivien Hammond

**Post** the TFNDF to **NHC, Payroll Office, PO Box 2232, Alice Springs, NT 0871**

**Email or Fax** all pages of 2 – 5 to the **NHC CSM on Email: [vivien.hammond@palya.org.au](mailto:vivien.hammond@palya.org.au) or Fax No. 0881256741**

**Phone** – any pay related enquiries please speak to the Payroll Officer – 08 8950 6828

### **15. TRAVEL ARRANGEMENTS:**

NHC will organise and pay for travel and accommodation expenses related to your locum destination. This usually involves flying to Alice Springs from the capital city closest to your residence. An ETicket in your name will be forwarded to you by email. **It is important that the name on your ETicket is the same as the name on your photo ID.** A summary of arrangements made for accommodation in Alice Springs and transport to the APY Lands and your clinic, will be emailed to you.

It is important that you read these documents carefully so that you know where you need to go and what you need to do in order to reach your destination on time. Please check that the dates and times are correct on all documents emailed to you.

Please use the airport shuttle bus for your transport when moving between the Alice Springs airport and your motel unless asked to go directly to the NHC office by Taxi. Keep the receipt for reimbursement.

When travelling to Clinics via the mail plane, please book a **Taxi – 131008** to pick you up outside your accommodation at 0600hrs on the day of the flight out to the APY Lands. The Taxi service in Alice Springs is not always reliable. The fare is approximately \$45.00. Please keep your receipt and claim reimbursement when you reach your destination.

The mail plane flight will be in a small aircraft and depending on your destination can take between 2 – 5 hours. **Please note that these planes cannot fit the very large suitcases in the luggage hold.** Use medium sized bags and /or cases. There is a **10kg luggage weight limit** and limited "carry on" luggage permitted. If your luggage exceeds 10 kgs there is a risk that it will not get on the mail plane.

If your locum placement is at Iwantja (Indulkana) you will travel from Alice Springs to the Indulkana bus stop via the Greyhound bus. You will receive an ETicket that will need to be printed and presented to the bus driver. Please read the information on the Eticket and ensure that you are at the bus stop at least 30 minutes prior to the departure time.

If you prefer to drive in your own car to the APY Lands you need to be aware that the roads are very rough, in some places 4WD's are recommended and that only diesel and OPAL fuel is available on the Lands. See the notes on Motor Vehicle safety. Petrol cars are likely to be a target for petrol sniffers.

For those nurses using private transport to travel to the community NHC will reimburse the equivalent of return air travel – both the Qantas flights and the mail plane and 2 night's accommodation @ \$110.00 per night OR will reimburse on the basis of fuel receipts submitted and 2 night's accommodation.



### **15. CHANGES TO TRAVEL ARRANGEMENTS:**

**Please do not make any alterations or cancellations** to travel arrangements without contacting the person who has made your original bookings. This will ensure NHC does not incur any unnecessary costs, that you get to and from your destinations smoothly and that people are able to contact you with last minute changes or in an emergency.

Usually the person to contact is the Clinical Services Manager who can be contacted at the Umuwa office by phone on 08 8954 9044 or Fax 0881256741 or email [vivien.hammond@palya.org.au](mailto:vivien.hammond@palya.org.au)

### **16. TELEPHONES, FAXES, INTERNET & TELEPHONE ACCOUNTS**

Mobile phones do not work on the APY Lands. There is no Telstra mobile service. The only exception to this is Pukatja community and you need a "Next G" phone. All clinics and NHC residences have telephones and internet access via wireless modem. The clinics have faxes and ADSL with a redundant satellite Internet connection.

While you are working on the APY Lands, you will be staying at one of the permanent nurses' homes or NHC visitors' houses. You will use your home phone for work purposes when you are on call.

#### **The current telephone billing process is:**

- NHC pays for all business calls.
- You only pay for your personal calls.
- Our payroll office will send you a copy of the telephone account for this period
- This amount will be deducted from your final pay.

### **17. INTERNET & NHC INTRANET ACCESS – PASSWORDS**

You are able to use the clinic computers to access your personal emails outside of clinic hours. There have been some problems with "hotmail" email addresses. There are no problems with "Gmail" email addresses.

All wireless internet services in the clinics and in the houses are password protected. You will need to talk to the permanent nurse at your clinic to get the wireless information for your accommodation. Wireless access within the clinics will need to be approved and organised through the IT consultant – Phil Craig.

You will need a password to access the NHC intranet site ([intra.palya.org.au](http://intra.palya.org.au)). The NHC Intranet contains all policies, procedures, forms and relevant clinical references. You should spend time exploring the intranet when you have time at the clinic.

When you have your password you will be able to download clinical and administrative forms, access clinical reference material and other NHC information. The intranet contains some information which is confidential in nature and which Nganampa Health Council retains intellectual property rights in. As a result we are strict on the need for all staff to have their own password to access the intranet site and that password remains confidential.

On the day that you arrive at the Clinic you should contact Phil Craig 8121 1555 / 0418 821 924 He will ask you to provide a password, will then establish an intranet account, an email address and will advise you of the log on details.

Please do not share passwords with other staff members. All authorised NHC staff have their own passwords. If you believe other staff members know your log on details, please contact Phil so your password can be changed.

Unauthorised and inappropriate access to the internet in the clinics should be reported to David Busuttil - the Health Services Manager immediately. Breaches of security will be dealt with according to NHC policies and procedures. These policies are accessible through the intranet.

### **18. APPROPRIATE DRESS CODE:**

**Uniforms are NOT required. Appropriate casual, clean and safe clothing should be worn at work. Shoes MUST meet WHS standards.**

When working with people who have different cultural beliefs it is important to show respect for that person's culture and to adapt your behaviour so as not to offend. You should observe an appropriate dress code at all times.

Appropriate dress for a remote Aboriginal community is different to appropriate dress elsewhere in rural or urban Australia.

Below are some examples of suitable dress. By following these guidelines your experience should be more enjoyable and a better cultural exchange can occur.

- **Bottoms** – Jeans, knee length loose fitting skirts or loose fitting  $\frac{3}{4}$  length trousers.
- **Tops** - Loose fitting shirts with long or short sleeves. Should not be low cut or see through.

If you are lucky enough to be on the APY Lands when the water holes are full, shorts and T-shirts are best worn instead of bathers for swimming.

Tight fitting jeans/trousers, short skirts and shorts above the knee are not appropriate dress.

### **Wear sensible, comfortable and safe clothing:**

Footwear – while working it important that you wear comfortable shoes or sandals that cover most of your feet and that protect your feet.

Jewellery – neck chains and large "loop" earrings are not advisable while working.

You may choose to bring other clothes for wear in Alice Springs or Yulara Resort.

### **19. ACCOMMODATION**

Nganampa Health Council provides accommodation for its employees. This accommodation may vary between communities, but the houses are furnished with basic essentials that include cookware, crockery, bedding/linen, cleaning equipment and cutlery.

Because many of the houses are homes to permanent staff an amount of personal equipment is amassed over a period of time. This equipment includes television, radio, video recorder/players and artifacts, none of which are Nganampa Health's property. However, relieving staff are usually welcome to use some of these items providing they are treated with respect. Please be aware that you are often living in someone else's home and that either they will return when you leave or other staff will come to live there.

Accommodation should be left clean and tidy both for the relieving personnel and the returning permanent staff members.

As a minimum, on departure, you should: -

- Vacuum/Sweep and mop all floors
- Wash and put away the dishes
- Clean oven and refrigerator
- Strip bed and wash all linen. Either remake bed or place fresh linen on top.
- Clean Bathroom and Toilet
- Remove your rubbish from house and surrounds.
- Water plants (if required)
- Do not bring patients into the house – under any circumstances
- Do not rearrange the furniture
- Do not smoke in the house
- Replace any items that you use
- Please ensure that the house is fully secured at all times

**Animals** should not be allowed or kept inside unless permission to do this has been given by the permanent nurse who occupies the house you are staying in. Please remember animals can damage property and leave unpleasant odours and hair. If you bring pets with you please ensure that the house is thoroughly cleaned and sprayed with insect surface spray before you leave. You are **not required** to look after any staff animals. The owners are responsible for making appropriate arrangements for the animals care while they are on leave

Many of the animals in the community may be malnourished or unwell. **PLEASE DO NOT feed community animals or encourage them around staff houses or the clinic.** This creates on-going and often unpleasant problems for staff returning from leave.

## **20. FOOD, GROCERIES, SHOPPING**

All communities where clinics are located have a general shop. These shops have a reasonable range of food and general supplies. It is easy to buy all that you need for basic, simple living from these shops. The community shops are more expensive and have less choice than the supermarkets in major cities.

You may choose to organise a bush order from one of the supermarkets in Adelaide. You will need to complete an online order and organise delivery of the order to Toll Express, 6 Johansson Rd, WINGFIELD SA 5095 by 11.00am on a Tuesday.

Your Bush Order must be clearly labelled with your name & Clinic e.g. Locum CHN Mary Bloggs, Blogg Clinic. The order must be packed appropriately for transport under the correct temperatures by the supermarket.

If the order is likely to arrive before you do you should contact the clinic nurses and let them know that there will be an order arriving for you. The nurses will need to pick up your order and transport it back to your accommodation

## **21. OUT OF WORK HOURS / LEISURE**

All of the communities are very remote. You will be at least 450 - 500kms from the nearest regional town – Alice Springs or Coober Pedy. Unless you have your own vehicle travel between communities and into town is difficult and expensive to travel in and out of the Lands.

You need to think about how you will occupy yourself when you are not working. Most houses have TV but the reception can be limited to 2 local stations. The communities are small between 200 & 550 people. There is not a lot to do within the community.

## **22. MOTOR VEHICLE SAFETY**

All vehicles driven by clinic staff are manual transmission – 4WD Toyota's.

**You must have a current manual transmission driver's license** and be comfortable driving on rough, unsealed roads.

### **Some important safety considerations for bush travelling:**

- Check that both fuel tanks are full
- Check that the windscreen wiper water bottle is full
- Check that you have 2 spare tyres
- Check that the two spare tyres have air in them
- Check that a jack handle and wheel brace are in the vehicle before a trip.
- Ensure spare tyre(s) is tied down securely
- Find out EXACTLY what road to use and STICK TO IT!
- Think about taking a shovel
- Think about the need to take the clinic satellite phone
- Always carry drinking water for you & your passengers when travelling
- Make sure you connect the jacks lifting mechanism squarely on the flat part of the axle.
- Advise the clinic/office staff when you are leaving, what road you will travel on and what your destination is.
- Call those same staff when you arrive at the destination to say all is well.
- Keep your body clear of the vehicle when changing a tyre.

- Change a tyre when the vehicle is on flat ground.
- If you are unable to fix the vehicle – **STAY WITH THE VEHICLE DO NOT START WALKING**. If you have informed people where you are going, on what road you will travel and you ETA someone will be able to locate you.

Each clinic should have a separate list for emergency/ clinical retrievals – these lists are additional to any other equipment necessary for YOUR survival.

### **23. NHC STAFF SAFETY POLICIES AND GUIDELINES:**

Nganampa Health Council has written policies and guidelines about staff safety. These can be accessed on the NHC intranet site when you are working in the clinics. In addition to the detailed guidelines below please also see the Nganampa Health Council Non-Clinical Policy Manual for the policy titled "Occupational Health Welfare and Safety" (also available from the Intranet site).

Please also refer to Clause 8.2 of the Nganampa Health Council Community Health Nursing Staff, Australian Nursing Federation Workplace Agreement 2007 and to the Nganampa Health Council Employee Code of Conduct.

### **Some universal & local considerations and precautions**

- Personal safety is each person's right and responsibility
- The employer has a duty of care to make your workplace as safe as is practicable
- Nganampa Health Council affirms that the personal safety of the staff is it's first responsibility in any work situations
- Absolute personal safety can never be guaranteed

You should be MORE, not less, vigilant about your safety in this environment. **This environment differs because of a number of factors including:**

- Remoteness
- You do not know people well
- You may be misunderstanding or misreading the cultural context
- Police presence is transient and call response times can be lengthy
- You cannot depend on an immediate response to calls for assistance

### **REMEMBER:**

- ❖ Individuals are usually more vulnerable when working or acting alone
- ❖ It is important to think of the possible implications / consequences of being alone with a person of the opposite sex
- ❖ Do not give a lift to or walk alone with a person of the opposite sex that you did not know well or trust. You would not do it in an urban environment ... why would you do that here?
- ❖ Your actions will always impact on your work colleagues

### **VIGILANT PERSONAL APPROACH SAFETY AT WORK AND HOME:**

- If you would not do it in an urban environment – DO NOT DO IT HERE!
- Get to know your local community
- Find out where helpful and responsible members of the community live
- Do not make assumptions about people – ask your colleagues advice and always think carefully before acting
- Ask for the phone numbers of people you might call on for support or advice – work colleagues, police, the MSO or other responsible people in the community.
- Observe an appropriate dress code at all times. See orientation documents.
- Avoid walking alone at any time
- Do not offer lifts to people that you do not know
- Respect cross cultural differences:
  - Never interfere or become involved in family or community fighting
  - It has nothing to do with you
  - Walk away
  - You will be called for medical assistance when the time is right
- Never interfere in the disciplining of children

- Always seek out the appropriate family caregivers in any matters to do with children
- People under the influence of alcohol, petrol and other drugs can behave unpredictably and sometimes aggressively:
  - Always adopt a non-confrontational approach
- Avoid getting involved in conversations with substance affected people when out in the community

### **SAFETY AT YOUR HOME:**

- Your home is your personal space and an area of security for you
- Keep your security cage doors locked at all times – keep your keys on your person
- Identify visitors and callers and their purpose before opening your door
- Do not respond to a beeping car horn. Always require individuals to present at your door
- It is absolutely inappropriate to entertain community people of the opposite sex at your home
- Your **home is not a “safe house”** for community members seeking refuge from domestic violence. Seek advice from experienced colleagues in such situations. Refer the caller to the police.
- Your **home is not a “Clinic”**
  - Do not see patients inside your house or in your security cage. This gives people the wrong impression, develops unsafe expectations and is clinically inappropriate in most situations.
  - Dispensing simple analgesia and doing simple dressings is occasionally unavoidable. Each clinic should have an on-call box containing very basic supplies to cover most minor presentations. Do not store ANY other medication in your house – this makes you and your house vulnerable!
  - Ensure that the condom dispensers at the clinic and in your community are regularly re-stocked. Do not dispense condoms from your home.
  - Check with experienced staff about particular individuals to be cautious about. Try to have an agreed team approach and a “Management Plan” documented both in the client record and in communicate for these individuals.

### **SAFETY IN THE CLINIC:**

- **Know the layout of the clinic:**
  - Identify the exits
  - Identify the “safe room” in your clinic – discuss the purpose of this room with more experienced colleagues
- **Difficult or agitated patients:**
  - Seek advice about patient management from more experienced colleagues – observe their approach
  - Where possible, seek help from a Health Worker of the same sex or a patient in the clinic
  - Never leave the clinic when a colleague is treating a patient with known aggressive or unpredictable behaviour
  - It is often wise to treat known aggressive, difficult or substance-affected patients as soon as they arrive in the clinic and try to get them out of the clinic quickly. People will understand if you do this. Explain why you have allowed the person to “jump the queue”.
- **Secure the clinic when you leave:**
  - The person on call that day is responsible for ensuring that the clinic is locked and secure at the end of the working day.
  - Check that the outside lights are on as you leave the clinic at the end of the day
- **Control movement in and out of the clinic – after hours:**
  - Ensure that all doors are closed. Check that the Fire Exit doors are inaccessible from the outside. Check that there is nothing in the locks that will allow the door to be shut but not locked.
  - Ensure that the doors that are not Fire Exits are deadlocked.
  - Limit the number of people in the clinic when you are working on your own.
  - Escort patients and relatives out of the clinic and ensure that the door is locked when everyone leaves.
- **On-call – after hours:**
  - When you are new to a community and on-call, try to work with a health worker or ensure that you feel comfortable with the patient and/or the carers
  - Do not go to the clinic on your own if you do not feel comfortable with the patient or the carer. Call a colleague or ask the patient to find a trusted (preferably the same sex as you) family member to come to the clinic with you.
  - Female staff should not see male patients without a female relative present.
  - Male staff should not see female patients without an adult relative present.
  - Be efficient – do what needs to be done, complete documentation and leave the clinic when the patient leaves.
  - Do not do house or camp visits on your own at night.
  - Never visit a camp or house when you suspect alcohol or drugs is present. If a visit is unavoidable, take a trusted community member or request a police presence.

## **24. WORKING WITH ANANGU HEALTH WORKERS & HEALTH MAYATJAS**

### **Role of AHW**

The AHWs are part of the health team working together to deliver primary health care within the community. Their level of numeracy and literacy in English will directly impact on the way they contribute to the team. Some will be more clinical than others who have less numeracy and literacy in English. All will be important in ensuring that the service that is delivered to Anangu is culturally appropriate and sensitive. They will have extensive knowledge of family groups, where they live, who is related to who, who is the appropriate person to talk to about specific problems, who is the appropriate responsible family member to accompany a patient to town for treatment etc. Some will be good teachers and very useful in working with groups on health promotion i.e. school health programs, women's or men's groups while others may be shy and find this difficult. Most of our AHWs are undertaking training in either Certificate 2 or Certificate 3 in Aboriginal Primary Health Care and should not be expected to act independently. A small number of our current AHWs have completed Certificate 2 and a small number have completed Certificate 3. There should always be some degree of supervision depending on their experience. Where AHWs are working in communities without a RN this supervision should be through phone contact and by the RN when they are on site.

### **Role of AHM**

The AHM is the manager of the clinic and acts as a liaison between the community and clinic. They are there to support you in times of trouble and work with staff and community to sort out any issues that arise. Many AHMs spend a lot of time out in the community and at meetings representing Nganampa Health. It is important that you make the Mayatja feel welcome in the clinic and keep them up to date with what is happening. The Mayatja often has a long history with Nganampa Health and has a broad knowledge of health issues generally. They are not clinicians, and though on occasion they may give you a hand with language or a difficult customer this is not part of their role. They are part of the Health Board and as such are part of the decision making arm of Nganampa Health and help set the future goals of the organisation.

### **How to work best with AHWs and AHM**

AHWs and AHMs may not always have fluent spoken English though usually they have a reasonable understanding of English. English is often their 4<sup>th</sup> or 5<sup>th</sup> Language. They are your eyes and ears within the community and it is important that you develop a relationship with them that is built on openness, respect and trust.

People work better when they have a relationship with the RNs. It is important that you value the knowledge and skills in language and culture that they have as these are just as important as clinical skills in enabling you to work effectively within the community. They have detailed knowledge of the community and family groups within the community and how things work culturally. It is essential that you utilise their knowledge so that you work in a culturally safe manner. The key is to **work together** valuing the knowledge and skills that you both bring. While the AHM is often out and about you can always contact them in the community should the need arise so make sure you know where they live.

Anangu Health Workers prefer to work in partnership rather than independently as this offers them some protection from payback and family disputes. There are a group of people who AHWs are unable to see as they have an avoidance relationship with them. There is also about half of the community who may not feel comfortable seeing them as they are not the same skin group. Ideally within the clinic staff there should be AHWs from both skin groups but this does not always happen as obviously people work better with people who are the same skin group. Often you will find that AHWs working in a clinic are the same skin group. If unsure of whether they can see someone always ask.

AHWs are all at different levels of training. At present they are either enrolled in a Cert 2 or 3 in Aboriginal Primary Health Care and as such are trainees. A few of our current AHWs have completed either Certificate 2 or Certificate 3. At both Cert 2 & 3 levels AHWs will still require supervision though people undertaking Cert 3 usually have better English language skills and numeracy skills and can do more without direct supervision but will still need support and assistance. It is not until Cert 4 level that AHWs should be acting without any supervision. Medicines should always be administered under supervision and only those

enrolled in Cert 3 and who have completed a medication module should be dispensing medication or filling dosettes.

All clinics should have lists up somewhere in the clinic which list clinical skills, community skills and Admin skills with AHWs names on it with ticks against what they can do. If you are working with an AHW and you have seen them do something well please tick it off the list so the list remains current. Male AHWs mainly work with men and while they may see the odd child they are not always comfortable with doing this. They will usually not see women. Female AHWs will mainly see women and children though they often see older men and occasionally a younger bloke when it is not culturally inappropriate. It is not however appropriate for them to take blood from men.



**25. LOCUM – CHN SALARIES 2014 - 2016**

The NHC CHN Award and the current 2014 Work Place Agreement (a 3 year Agreement covering the period 2014 – 2017) provide comprehensive information about wages and conditions and both are available on request.

Please note that the Additional Work Allowance covers all overtime worked by CHN's.

| <b>First Year Locum Nurse</b>  | <b><u>2015</u></b> | <b><u>2016</u></b> |
|--------------------------------|--------------------|--------------------|
| Salary                         | 90,900             | 94,536             |
| District Allowance             | 6,000              | 6,000              |
| Work Allowance                 | 35,796             | 37,228             |
| 20% Locum Loading*             | <u>18,180</u>      | <u>18,907</u>      |
| <b>Total</b>                   | <b>150,876</b>     | <b>156,671</b>     |
| <b>Hrly Rate - approx</b>      | <b>\$ 76.35</b>    | <b>\$ 79.28</b>    |
|                                |                    |                    |
| <b>Second Year Locum Nurse</b> | <b><u>2015</u></b> | <b><u>2016</u></b> |
| Salary                         | 97,984             | 101,903            |
| District Allowance             | 6,000              | 6,000              |
| Work Allowance                 | 38,586             | 40,129             |
| 20% Locum Loading*             | <u>19,597</u>      | <u>20,381</u>      |
| <b>Total</b>                   | <b>162,167</b>     | <b>168,413</b>     |
| <b>Hrly Rate - approx</b>      | <b>\$ 82.06</b>    | <b>\$ 85.22</b>    |
|                                |                    |                    |
| <b>Third Year Locum Nurse</b>  | <b><u>2015</u></b> | <b><u>2016</u></b> |
| Salary                         | 101,408            | 105,464            |
| District Allowance             | 6,000              | 6,000              |
| Work Allowance                 | 39,934             | 41,532             |
| 20% Locum Loading*             | <u>20,282</u>      | <u>21,093</u>      |
| <b>Total</b>                   | <b>167,623</b>     | <b>174,088</b>     |
| <b>Hrly Rate - approx</b>      | <b>\$ 84.82</b>    | <b>\$ 88.10</b>    |
|                                |                    |                    |
| * On base rate                 |                    |                    |

Net pay calculations vary on an individual basis. They are dependent on tax thresholds, tax rates that change from time to time and HECS payments

Please speak to the NHC Payroll Office – 08 8950 6828 if you need this information.

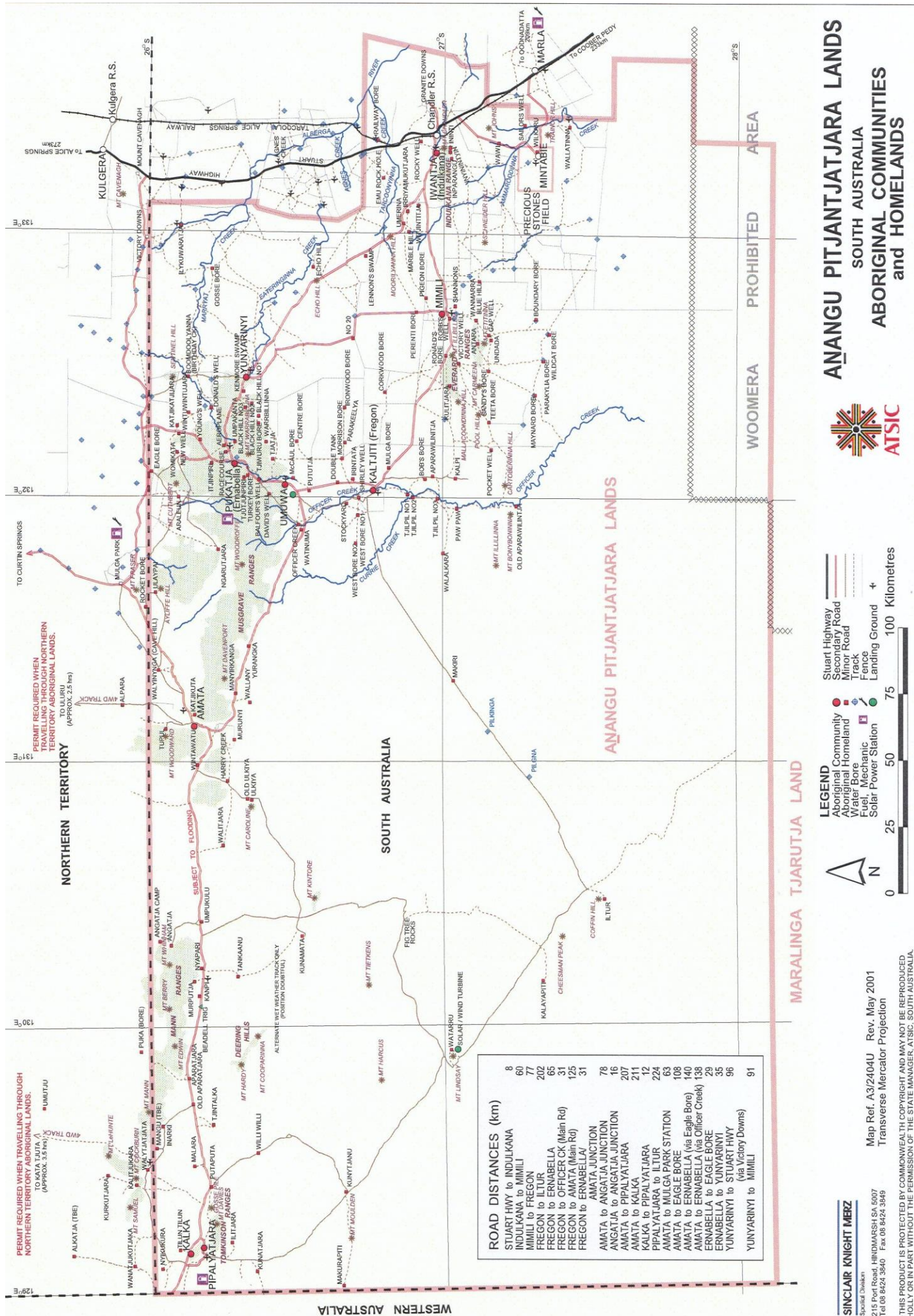
**Your contract & travel days** – Travel days are always included in your contract. Generally your contract starts on the day that you leave Alice Springs to travel to the Lands and ends on the day that you return to Alice Springs from the Lands. NHC covers all travel and accommodation costs and does not pay wages for travel between your home and Alice Springs.

## 26. CHECK LIST – WORKING WITH NHC:

|    | Have you?  | Yes | No |
|----|--|-----|----|
| 1  | Supplied NHC with: <ul style="list-style-type: none"> <li>• an up-to-date CV, including referees</li> <li>• clear copy of your driver's license</li> <li>• current National Police Certificate</li> <li>• your immunisation record and supporting documentation</li> </ul>   |     |    |
| 2  | Given NHC your most recent contact details including mobile & email  |     |    |
| 3  | Received confirmation of AHPRA – NMBA registration: <ul style="list-style-type: none"> <li>• AHPRA Identification number</li> <li>• current registration</li> </ul>  |     |    |
| 4  | Returned your NHC Locum Contract & Pharmacy Guidelines: <ul style="list-style-type: none"> <li>- initialled &amp; dated each page – on the contract</li> <li>- signed the last page – on contract &amp; vaccination form</li> <li>- Fax to <b>CSM at 08 81256741</b></li> </ul>  |     |    |
| 5  | Completed your personnel and payroll documents: <ul style="list-style-type: none"> <li>- Tax File Number Declaration form - posted to: <ul style="list-style-type: none"> <li>NHC Payroll Office PO Box 2232 Alice Springs 0871</li> </ul> </li> <li>- Personnel Record – <b>Faxed to CSM - 0881256741</b></li> <li>- HESTA Superannuation Forms – Faxed - 0881256741</li> <li>- Choice of Superannuation Form – Faxed - 0881256741</li> <li>- Bank Account Form – Faxed - 0881256741</li> </ul> |     |    |
| 6  | Received + Checked your travel & accommodation details: <ul style="list-style-type: none"> <li>- ETickets to Alice Springs - check date and depart times</li> <li>- Motel name and address + dates booked</li> <li>- Arrangements for travel to the community: <ul style="list-style-type: none"> <li>Chartair Air – book taxi for early next day</li> <li>Greyhound bus - check location of bus depot</li> </ul> </li> <li>- Check return arrangements are made</li> </ul>                      |     |    |
| 7  | Packed appropriate clothes and gear <ul style="list-style-type: none"> <li>** <b>Luggage limits</b> - Qantas 23kg / <b>Chartair 10kgs</b> &amp; size limit</li> </ul>  |     |    |
| 8  | Read the NHC general information package   |     |    |
| 9  | Got your driver's license - manual   |     |    |
| 10 | Got NHC contact details if there are travel problems on the way <ul style="list-style-type: none"> <li><b>Vivien Hammond - 08 89549044 remote</b></li> <li><b>- 0400099657 (n/a remote)</b></li> <li><b>NHC Personnel - 08 8950 6926</b></li> <li><b>NHC Umuwa - 08 8954 9040</b></li> <li><b>Chartair - 08 8952 6666</b></li> </ul>   |     |    |
| 11 | Got arrangements to go NHC office to: <ul style="list-style-type: none"> <li>- Finalise paper work if not complete</li> <li>- Attend Communicare training in Alice Springs</li> </ul>  |     |    |
| 12 | Planned for grocery shopping in Alice - remember luggage limits  |     |    |

*Got everything? ... Well done!*

*We look forward to working with you and hope that you enjoy your experiences on the APY Lands and with Nganampa Health Council.*





**Please Efax the completed form to Vivien Hammond, NHC Clinical Services Manager – 0881256741**  
**NHC Clinic / Community Orientation – overview**

Every effort will be made to have an experienced CHN precept your first few days in your first Clinic / Community. Your orientation during this first week should cover the items below and on the checklist attached.

**Clinic Business hours:** Monday to Friday - 0900hrs – 1300hrs (lunch) 1400hrs – 1730hrs

**Clinic staff planning meeting & handover:** weekly USUALLY on a Monday morning

**Clinic / Community orientation:**

**Work through:**

NHC Clinic CHN Orientation Check list 2014

ENSURE THAT THE CHN **HAS A COMMUNICARE TOKEN & AN INTRANET PASSWORD & CAN ACCESS CLINIC EMAILS - contact Phil Craig**

Communicare training has been completed with Sally McGrath or Lynne Everett

**Explain, demonstrate / supervise / practice:**

Access to CARPA / WBM / CRANA CPM online

Cross cultural relationships – clinic non-Anangu staff with Anangu

Expectations of nurse during placement

[Equipment – otoscope, Hb machine, BSL, Zoll Defibrillator- see Zoll Defibrillator Routine Check Procedures, 12 lead ECG, Peak flow meters, Suction units – O2 cylinder TwinOvac suction and Laerdal portable suction unit, checking & changing O2 cylinders, Point of Care equipment / competencies to be completed on line](#)

**Collection of pathology / biochemistry**

Preparation / storage / transport of path - see Diagnostic Specimen Transport Packaging Steps & How to do an FBE Slide

Pharmacy/ Drug room – see PHARMACY & COLDCHAIN GUIDELINES

**Evacuations**

Evacuation of acutely ill patient – night and day. Including driving to the airstrip - doing a pre evacuation airstrip check - see

CRANA Clinical Procedures Manual Pages 11-16

[On-call – see ON-CALL CHN GUIDELINE:](#)

It is NHC procedure NOT to put nurses who have not worked with NHC before on-call on the first night that they arrive in the community and NOT to put new nurses on call on their first weekend in the community.

First night on-call – an experienced CHN will back you up – be 2<sup>nd</sup> on-call

First weekend on-call – an experienced CHN will be in the community to assist with questions or problems.

On-call phone is diverted through to nurse on-call – see ON-CALL NURSE TELEPHONE CONTACT POLICY & TELEPHONE DIVERSION ON-CALL NURSE

Handovers to other staff post on-call

**Check list for orientating new CHN's – clinic & community**

These lists are to be used as a guide to the orientation of all new Clinical staff to the community and to the clinic. This should be completed in the first week in the community. The person conducting the orientation and the new Locum CHN should date and initial each item as the orientation is completed.

Name: \_\_\_\_\_ Start Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_ Clinic: \_\_\_\_\_

| Area / Task / Personnel |  | New RN Initial | Instruct. Initial |
|-------------------------|--|----------------|-------------------|
| 1                       | <ul style="list-style-type: none"> <li>Room by room including shipping container &amp; incinerator</li> </ul>  |                |                   |
| 2                       | <p><b><u>Safety</u></b> – review current NHC policies on safety:</p> <ul style="list-style-type: none"> <li>Fire – exits, extinguishers, evacuation plan and evacuation safety point</li> <li>Domestic Violence</li> <li>Community violence / alcohol &amp; substance effected patients</li> <li>Cultural - respectful / professional communication</li> <li>Parking of ambulance after hours</li> <li>Outside clinic lighting</li> </ul>  |                |                   |
| 3                       | <p><b><u>Incinerator / waste disposal:</u></b></p> <ul style="list-style-type: none"> <li>Correct use / procedures</li> <li>Safety when disposing of rubbish / using incinerator</li> <li>Other waste disposal</li> </ul>  |                |                   |
| 4                       | <p><b><u>Drug room: see Drug Storage and Dispensing Policy</u></b></p> <ul style="list-style-type: none"> <li>Must be kept locked at all times</li> <li>Authorised personnel only</li> <li>Brief overview of layout</li> </ul> <p>Vaccine Cold chain familiarisation –vaccine fridge / checking new vaccines from pharmacy/ charting cold chain daily – Vaccine Cold Chain Breach documentation</p> <p>Refrigerated Drugs cold chain - charting</p> <p>S8 cupboard – check S8's with new staff on arrival &amp; weekly</p> <p>S4 Drug safe – use of S4's – Panadeine Forte etc. Check S4 drugs with new staff on arrival &amp; weekly</p> <p>Immunisations – Must have a SA Immunisation course certificate to administer vaccines without supervision</p> <p>Satellite phone – check charge and function weekly</p> <p>Location of emergency phone numbers</p> <p>Airstrip - visit to the strip and lights explanation - all airstrip lights are solar and should come on automatically. The windsock light in some communities DOES need to be turned on manually.</p> |                |                   |
| 5                       | <p><b><u>Resuscitation room:</u></b></p> <p>Emergency trolley – MUST BE LOCKED AT ALL TIMES. checking procedures including drugs &amp; expiry dates</p> <p>Emergency Room Check list for checking stock / IVT expiry dates</p> <p>Retrieval Gear – checking procedure</p> <p>Brief overview of room</p> <p>Demonstrate use and function of any unfamiliar equipment</p> <p>Thorough check of room and equipment by new CHN within first week</p> <p>IV fluid storage – below 25 degrees Centigrade</p>   |                |                   |

| Name: _____ |   | Start Date: ____/____/20____ |                   | Clinic: _____ |  |
|-------------|---|------------------------------|-------------------|---------------|--|
|             | Area / Task / Personnel   | New RN Initial               | Instruct. Initial |               |  |
| 6           | <b>Ambulance:</b><br>Checking before doing trips – spare tyres, jacks – all components, water, oil, diesel<br>Only for clinic business<br>Satellite phone<br>Monthly kilometre/ Odometer checks for NHC / servicing<br>Cleaning   |                              |                   |               |  |
| 7           | <b>Clinical:</b><br><i>CARPA, WBM and CRANA CPM</i> are the Standard Treatment Manuals for all NHC clinics. There should be 3 – 4 in each clinic.<br>Demonstrate on-line access to CARPA, WBM and CRANA-CPM<br>NHC Program Documentation and Manuals – can be accessed on the intranet<br>Clinic/ community specific orientation manual/ documents<br>Discuss safety – both at work, on-call and general inc. dogs.<br>Discuss & reach agreement on divisions of work / responsibilities between nurses   |                              |                   |               |  |
| 8           | <b>On-call:</b> <ul style="list-style-type: none"> <li>On-call roster – discuss how the roster works</li> <li>Discuss expectations. Arrangements for first week – who will “back up”</li> <li>BASIC first aid supplies only kept in nurses on-call box - see list in on-call nurse guidelines</li> <li>Storage of drugs outside of the clinic breaches legislation and NHC Policy</li> </ul> Emergency contacts – clinical / safety - ensure that new staff know who to call and how to contact people in emergency situations  |                              |                   |               |  |
| 9           | <b>Administrative Information:</b> <ul style="list-style-type: none"> <li>Introduction to other staff, overview of roles</li> <li>Medical Officer on-call for area, how &amp; when to contact them               <ul style="list-style-type: none"> <li>* Review emergency Assessment and Phone consultation process - CARPA pp 8 - 17 &amp; CRANA-CPM pp.8 - 10</li> <li>* Discuss non-emergency consultations – make a list, arrange a convenient time                   <ul style="list-style-type: none"> <li>* Try to have a daily regular update / consultation with MO about routine pt care.</li> </ul> </li> </ul> </li> <li>Phone book</li> <li>Familiarised with time sheet folder</li> <li>NHC Policies on the intranet</li> <li>Telephones and policy regarding non-clinic phone calls</li> <li>On-call phone redirection for nurses</li> <li>Computer – individual passwords, use of computers - email, intranet access</li> <li>Recall system - responsibilities</li> <li>Patient Appointments &amp; Travel</li> </ul> |                              |                   |               |  |

Name: \_\_\_\_\_

Start Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

Clinic: \_\_\_\_\_

| Area / Task / Personnel   |   | New RN Initial | Instruct. Initial |
|---|---|----------------|-------------------|
| <ul style="list-style-type: none"> <li>- Organising appointments and travel</li> <li>- Modes of travel – mail plane, bus, ambulance, car</li> <li>- After hrs bus tickets &amp; PATS fuel vouchers</li> </ul> |   |                |                   |
| <b>9</b>  | <ul style="list-style-type: none"> <li>• Order book – for ambulance fuel only</li> <li>• Whiteboards – recall + travel</li> <li>• Office Equipment               <ul style="list-style-type: none"> <li>- Fax machine</li> <li>- Photocopying/ printer demonstrate how to do sticky labels</li> </ul> </li> </ul> |                |                   |

**OHSW**

|           |  |  |  |
|-----------|--|--|--|
| <b>10</b> | OHS&W Policy accessed on intranet<br>Introduction to Work Site Representative<br>Incident and Risk Reporting Procedures Discussed<br>Discussion of OHS&W policies<br>OHS&W Resources on Staff Intranet<br>Location of spills kit<br>4WD Course undertaken<br>Vehicle checklist discussed<br>Vehicle safety summary given<br>Vehicle Servicing schedule and process discussed<br>Demonstration on how to use satellite phones<br>Instructions given in use of incinerator |  |  |
|-----------|--|--|--|

**ON-LINE COURSES COMPLETED (within first week of employment - if no current certificates)**

|                          |  |  |
|--------------------------|--|--|
| Manual handling training |  |  |
| Driver Safety            |  |  |
| Risk Management          |  |  |

**FIRE**

|   |  |  |
|---|--|--|
| Location of Fire Extinguishers/Hoses etc<br>Instruction given on how to use extinguishers<br>Location of Exits<br>Explanation of Fire Evacuation Policy<br>Location of Evacuation Meeting Point<br>Walk-through to Fire Evacuation Meeting Point<br>Fire Extinguisher in Cars |  |  |
|---|--|--|



Name: \_\_\_\_\_

Start Date: \_\_/\_\_/20\_\_

Clinic: \_\_\_\_\_

| Area / Task / Personnel  |  | New RN Initial       | Instruct. Initial |
|--|--|----------------------|-------------------|
| POLICIES - accessed on NHC intranet site   |  |                      |                   |
| Alcohol Petrol Ganja Wiya<br>Blood and Body Substances Spill Management<br>Death in Community Management<br>Incident Reports – Personal Injury or Property<br><b>Infection Control</b> - Policies - Biomedical Waste Disposal, Hand hygiene, Instrument and Equipment Processing, Cleaning<br>Reusable Equipment, Blood and Body Spills, Safe Handling of Pathology, PPE, Safe Mx Sharps Guidelines<br>Material Safety Data Sheets - MSDS<br>Needle Stick Injury or Blood and Body Fluid Exposure<br>Sharps Safe Disposal<br>Smoking Wiya<br>Staff Safety Guidelines<br>Vehicles & Driving<br>Workplace Bullying |  |                      |                   |
| SECURITY   |  |                      |                   |
| Key System<br>Lighting   |  |                      |                   |
| HOUSING  |  |                      |                   |
| Location of fire extinguishers in house<br>House keys and exits<br>First Aid Kit in House<br>Policing in Communities- Phone numbers to call  |  |                      |                   |
| CHN (new/ locum) Signature: _____  |  | CHN Signature: _____ |                   |
| (Orientation participant)  |  | (Instructor)         |                   |
| Completed __/__/20__   |  |                      |                   |
| Comments:  |  |                      |                   |
|  |  |                      |                   |
|  |  |                      |                   |
|  |  |                      |                   |
|  |  |                      |                   |
|  |  |                      |                   |
| NHC CHN Clinic Orientation   |  | Revised 22/07/2015   |                   |