



Grace Hospital  
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[www.gracehospital.ca](http://www.gracehospital.ca)  
[www.wrha.mb.ca](http://www.wrha.mb.ca)  
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GRACE HOSPITAL

## WINNIPEG WEST INTEGRATED HEALTH AND SOCIAL SERVICES

**INCLUDING:** Grace Hospital / ACCESS Winnipeg West - Community Health and Social Services St. James  
- Assiniboia and Assiniboine South

### DESCRIPTION OF PATIENT CARE UNITS – CLINICAL PLACEMENTS

Grace Hospital is a 248-bed acute care hospital located within the St. James area of Winnipeg with clinical programs in Critical Care, Emergency, Medicine, Mental Health, and Surgery. The hospital strives to create an environment where people want to work and provide such benefits as massage therapy provided by massage therapy students, access to a day care, and a gym. Listed below are descriptions of the various units which could provide the perfect clinical education opportunity. An outline of the classroom orientation to be received prior to beginning preceptorship experience is also provided.

SURGERY PROGRAM		
<b>Operating Room (elective surgical slates plus emergencies)</b>	<b>SDC (Surgical Day Care Unit)</b>	<b>2South - Acute Orthopedic Unit (35 beds)</b>
<p><i>Clinical Manager: Gail Bembenek (Email: <a href="mailto:gbembenek@ggh.mb.ca">gbembenek@ggh.mb.ca</a>)</i></p> <ul style="list-style-type: none"> <li>• Surgical specialties: General Surgery, Urology, Gynecology, Orthopedics (joint replacement, small joint, arthroscopy, and trauma).</li> <li>• Supports 24-hour emergent surgical care for the regional Acute Cute Surgical Service (ACSS), Orthopedic Trauma, and Gastroenterology (GI) Bleed Service.</li> <li>• 8-hour shifts days and evenings with over-night on-call (Monday – Sunday) and weekend evening on-call.</li> </ul>	<p><i>Clinical Manager: Greg Duncan (Email: <a href="mailto:gduncan@ggh.mb.ca">gduncan@ggh.mb.ca</a>)</i></p> <ul style="list-style-type: none"> <li>• Patients that may need to stay the night but do not require hospital admission as discharged early in the morning following surgery.</li> <li>• Skill development: pre-op and post-op care for surgical patients, patient and family support through thorough pre- and post-op teaching, facilitating safe discharge to home.</li> <li>• 8-hour shifts.</li> </ul>	<p><i>Clinical Manager: Cecilia Berces (Email: <a href="mailto:cberces2@ggh.mb.ca">cberces2@ggh.mb.ca</a>)</i></p> <ul style="list-style-type: none"> <li>• Interactive unit that admits patients postoperatively following elective total hip and total knee replacement surgery. Other elective surgeries accommodated: gynecology, urology, general surgery.</li> <li>• Collaborative team works closely with patients to optimize care and assist patients to gain functional independence to return home safely in a timely manner.</li> <li>• To enhance learning experience and patient care trajectory, students often spend a day in the OR, PACU SDC, PAC or Orthopedic Clinic.</li> <li>• Telemetry utilized.</li> <li>• 8-hour shifts.</li> </ul>
<b>4North – Orthopedic Trauma (40 beds)</b>	<b>4South – Surgical Unit/Acute Care Surgical Service (ACSS) (36 beds)</b>	
<p><i>Clinical Manager: Janis Fleury (Email: <a href="mailto:jfleury@ggh.mb.ca">jfleury@ggh.mb.ca</a>)</i></p> <ul style="list-style-type: none"> <li>• Fast paced unit providing pre and post-operative care to patients requiring urgent orthopedic surgery.</li> <li>• Patients, families, and staff work together in an interdisciplinary team environment to achieve optimal physical potential.</li> <li>• Interdisciplinary team works with patients/families to determine and achieve a safe discharge plan.</li> <li>• Skill development: pain management, wound care, IV therapy, physiotherapy, patient/family teaching experiences.</li> <li>• Telemetry utilized.</li> <li>• 12-hour shifts.</li> </ul>	<p><i>Clinical Manager: Krista Maxwell (Email: <a href="mailto:kmaxwell@ggh.mb.ca">kmaxwell@ggh.mb.ca</a>)</i></p> <ul style="list-style-type: none"> <li>• Fast-paced unit that uses a multi-disciplinary approach to provide care to emergent general surgery patients under the Acute Care Surgical Service (ACSS) as well as to patients following elective General, Urology and Gynecology surgery.</li> <li>• Focus is to provide minimally-invasive surgery followed by effective pain control. Accomplished by working with the Acute Pain Nurse and Pharmacy in addition to the implementation of modalities such as epidural and patient controlled analgesia.</li> <li>• Accommodate Ward Clerk, HCA, and RN students as well as physician assistant students, 3<sup>rd</sup> year medical students and surgical residents.</li> </ul>	

<b>MEDICINE PROGRAM</b>		
<b>3North - Clinical Teaching Unit (34 beds)</b>	<b>Clinical Assessment Unit (CAU) (10 beds)</b>	<b>3South – Clinical Teaching Environment (35 beds)</b>
<p><i>Clinical Manager: Carolyn Jardine (Email: cjardine@ggh.mb.ca)</i></p> <ul style="list-style-type: none"> <li>• Clinically acute medical patients.</li> <li>• Skill development: telemetry monitoring, IV therapy insertion, IV medication administration, MI and diabetic teaching, complex wound care, planning and organizing skills, disposition planning, elder-friendly care.</li> </ul>	<p><i>Clinical Manager: Malia Cruz (Email: mcruz3@ggh.mb.ca)</i></p> <ul style="list-style-type: none"> <li>• Provide quality care to the adult patient who requires a short stay (12-36 hours) for the purpose of treatment or investigation.</li> </ul>	<p><i>Clinical Manager: Ronnie Mendoza (Email: rmendoza5@ggh.mb.ca)</i></p> <ul style="list-style-type: none"> <li>• Clinically acute medical patients.</li> <li>• Skill development: telemetry monitoring, IV therapy insertion, IV medication administration, MI and diabetic teaching, complex wound care, planning and organizing skills, disposition planning, elder-friendly care.</li> <li>• 12-hour shifts.</li> </ul>
<b>5North - Acute Unit (36 beds)</b>	<b>Hospice (12 beds)</b>	
<p><i>Clinical Manager: Richard Quinit (Email: rquinit@ggh.mb.ca)</i></p> <ul style="list-style-type: none"> <li>• Care for patients with acute medical illnesses.</li> <li>• Skill development: clinical assessments, central lines, IV insertions and medications, chest tubes, tracheostomy care, advanced wound care, elder-friendly care.</li> <li>• 12-hour shifts.</li> </ul>	<p><i>Clinical Manager: Malia Cruz (Email: mcruz3@ggh.mb.ca)</i></p> <ul style="list-style-type: none"> <li>• Specializing in complex symptom management for patients at end-of-life and maintaining a high degree of comfort and quality of life during the palliative process.</li> <li>• 12-hour shifts.</li> </ul>	
<b>EMERGENCY PROGRAM</b>		
<b>Emergency Department (25 treatment spaces: 8 monitored, 3 resuscitation, 6 reassessment, 8 treatment)</b>		
<p><i>Clinical Manager: Tara Brown (Email: tbrown9@ggh.mb.ca)</i></p> <ul style="list-style-type: none"> <li>• Skill development: rapid assessment and intervention, critical thinking, and care planning within a multidisciplinary team.</li> <li>• Combination of 12-hour and 8-hour shifts.</li> </ul>		

<b>SENIOR PRACTICUM ORIENTATION OUTLINE (includes a 3.5 day nursing skills orientation)</b>		
<b>HEALTH TEAM PARTNERSHIPS</b>	<b>CLINICAL PROCESSES</b>	<b>CLINICAL PATIENT CARE SKILLS</b>
<ul style="list-style-type: none"> <li>• Unit nursing.</li> <li>• Roles of allied health disciplines.</li> <li>• Daily action rounds.</li> <li>• Discharge planning.</li> <li>• Alternate levels of care.</li> <li>• Integrated documentation.</li> <li>• Kardex development.</li> <li>• Shift report.</li> <li>• Communication strategies (SBAR).</li> </ul>	<ul style="list-style-type: none"> <li>• Admission, assessment process.</li> <li>• Caremaps (components, standards, variances).</li> <li>• End of Life Care.               <ul style="list-style-type: none"> <li>○ Health Care Directives;</li> <li>○ Advance Care Planning.</li> <li>○ Palliative Care.</li> <li>○ Tissue Donation.</li> <li>○ Ethics Consultations.</li> </ul> </li> <li>• Injury prevention.               <ul style="list-style-type: none"> <li>○ Assessment of patient safety.</li> <li>○ Prevention/management of:                   <ul style="list-style-type: none"> <li>▪ falls</li> <li>▪ aggression/violence</li> <li>▪ wandering</li> </ul> </li> <li>○ Constant care.</li> <li>○ Least restraint policy.</li> <li>○ Codes: yellow, white.</li> <li>○ Lifting, transferring techniques.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Medications.               <ul style="list-style-type: none"> <li>○ Unit dose system.</li> <li>○ Transcribing orders.</li> <li>○ Two-care provider check policy.</li> <li>○ IV Drug Manual.</li> <li>○ Pyxis.</li> <li>○ Documed System.</li> <li>○ Hyperglycemic management – Insulin infusion.</li> <li>○ Heparin protocol.</li> </ul> </li> <li>• Pain management protocol.</li> <li>• IV therapy.               <ul style="list-style-type: none"> <li>○ Venipuncture.</li> <li>○ Medication administration.</li> <li>○ Subcutaneous infusion.</li> <li>○ Fluid balance.</li> <li>○ Blood product administration.</li> </ul> </li> <li>• Central Venous Access Devices.               <ul style="list-style-type: none"> <li>○ Principles; care/maintenance.</li> <li>○ Baxter Colleague Infusion Pump.</li> </ul> </li> <li>• Chest pain protocol.</li> <li>• Code Blue.               <ul style="list-style-type: none"> <li>○ CPR practice, roles, responsibilities in team.</li> </ul> </li> <li>• Respiratory therapies.               <ul style="list-style-type: none"> <li>○ Role of RT.</li> <li>○ O<sub>2</sub> admin, blood gases, Cpap, BiPap, Trachs.</li> </ul> </li> <li>• Infection control.               <ul style="list-style-type: none"> <li>○ MRSA, VRE precautions, isolation technique, handwashing.</li> </ul> </li> </ul>