

Urgent Care

Minor Injury & Minor Illness Course

The Oxfordshire Community Urgent Care Service Training Programme would be suitable for those nurses working in schools, prisons, and general practice, and for those who work in minor injury units and walk in centres. One of the main aims of the course is to provide the practitioner with the skills to assess patients within their clinical area. The course would also meet the needs of staff requiring a basic knowledge framework and practical assessment skills prior to undertaking an autonomous practitioner's course. Topics covered will include mechanism of injury, assessment and management of minor injuries and common minor illnesses. Conditions included in the course are -

- respiratory, cardiac and abdominal assessment and management of common conditions
- common ENT and ophthalmic presentations
- childhood illness, emergency delivery
- assessment of the acute psychiatric presentation
- management of upper and lower limb injuries
- acute wound management (including burns)
- head injuries



(Please see attached provisional programme for further details)

**17th April, 24th April, 1st May, 8th May, 15th May,
22nd May & 5th June 2009**

09:00 – 17:00

**Littlemore Health Centre, Sandford Road, Littlemore,
Oxford, OX4 4XN**

Please note tea & coffee will be available, however lunch **IS NOT** provided.

For non PCT employees there will be a charge of £600.00 for this 7 day course

To book a place please complete and return the attached form....

Oxfordshire PCT Learning & Development Team BOOKING FORM	Oxfordshire  Primary Care Trust
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TRAINING DETAILS (Please use block capitals)

Training Title:	Training Date(s):
Time:	Venue:
Surname:	Forename(s)
Assignment No: (Number on the top left hand side of your pay slip)	
Workplace Address:	
Occupation:	
Band:	
Tel:	*Email:
Address for Correspondence if different from above:	
Disability Discrimination Act 1995 – If you have any special needs which require to be taken into consideration please state below:	
To ensure your personal safety it is important that you advise us of any medical history, injury or disability which may affect your participation in this training:	
Medical details:	
If medical details are recorded above please attach a Doctors' or Occupational Health Certificate stating your fitness to undertake training.	

This section should be completed and signed by the applicant. Incomplete forms will be returned.

Manager's Name: (please print)	
Designation:	Tel. No
I confirm that I have discussed attending this training with my manager who authorises my attendance and that all the information I have provided is correct to the best of my knowledge and belief.	
Signed Date:	
Please return to: Learning & Development Team, Jubilee House, 5510 John Smith Drive Oxford Business Park South, Cowley, Oxford OX4 2LH Email: kaye.hewer@oxfordshirepct.nhs.uk Tel: 01865 336815 / Fax: 01865 336822	

***A confirmation letter will be sent to you via e-mail where this information has been provided.**