

## Real-life story - Kevin Boyle

Kevin's third-year placement was in a hospital dedicated solely to cancer treatment. He worked on a small ten-bed gynaecology surgical ward in a team of two qualified nurses, two student nurses and two support workers, and talks here about what's expected in the third year of a nursing degree, compared to at the start of the course.

### Kevin Boyle

#### Third year nursing student

##### Employer or university

University of Manchester

The staff were very approachable, passionate about what they do and happy to share their knowledge.

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**How did you  
prepare for the  
placement?**

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collapse**

Three weeks before the placement started, the hospital practice education facilitator sent me some information about this specialist hospital and the ward I'd be working on.

I also had a trust orientation day and a visit to the ward to meet my mentor. Before I started I was also able to speak to other students who had been on a similar placement, through the university's social support placement group.

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**What support  
did you have?**

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collapse**

I was expected to set my own learning objectives for this third year placement. The ward splits into two bays, each with five patients. I asked to be responsible for one of these bays with minimal supervision. I didn't work all the same shifts as my mentor, so I ensured the rest of the nursing team knew my objectives. If my mentor wasn't there and I needed to ask a question I asked another nurse on the team. However, as a third year student I was also expected to check guidelines and do some research to find answers.

The placement was in a small specialist hospital and the staff were very approachable, passionate about what they do and happy to share their knowledge.

There was far less direct supervision because it was a third year placement. I only asked for help if I was faced with a procedure I had never done before. Also, in my first year I felt it was difficult to say no to anything. By my third year, I had learnt to prioritise and was more confident about delegating tasks to support staff. This wasn't easy at first but crucial for the team to work efficiently. I also had a better idea about what I need to know, rather than feeling I have to take everything on board.

In your first year it can feel like information overload! I now feel like a confident member of the team able to question treatment decisions and suggest alternatives to medical staff.

- **What was the  
best thing?**

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collapse**

The best thing was the enthusiasm and professionalism of the staff. To be honest, I wasn't expecting to enjoy working on a gynaecology ward (although I do want to work in cancer care when I qualify) but it was one of my favourite placements.

As on all hospital wards I was busy, but on a small ward you have a bit more time to spend with each patient. I liked having my own bay of patients; this greater responsibility and input gave me confidence in my abilities.

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**What was the most challenging thing?**

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I spent some days off the ward gaining experience in other areas, including assisting at a post-surgery follow-up clinic. Some patients I had nursed on the ward were given bad news about test results or the progress of their cancer which I found difficult, especially because some patients are the same age or younger than me.

**What are your tips for other students?**

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Get as much information as you can about the ward you are going to be on and try to visit in advance if possible. My first placement on was on an infectious diseases ward and it was a real shock.

Ask lots of questions and carry a notepad so you can scribble things down to follow up later.

Wear comfortable shoes!

Have an open mind – I didn't think I would enjoy my gynaecology placement but now I'm considering a career in this specialist area.

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