

# Inbound exchange student from Germany

In May, the School welcomed our inbound exchange student, Mr Marcel Wachtel, a third year Bachelor of Arts in Nursing Science student from the Osnabrueck University of Applied Sciences in Germany. Marcel was on a six-week placement in the medical and surgical wards at Caritas Medical Centre. Marcel tells us why he has chosen Hong Kong and what he has learnt from the exchange and clinical placement.

## Q: What are your reasons for choosing Hong Kong exchange?

This is my first time to go on an exchange and a placement out of Europe. In the list of exchange provided by my university, only two places are out of Europe: one is Brazil, the other is Hong Kong. Some of my classmates have chosen Brazil. For me, there are too many Germans in Brazil, therefore, I have chosen Hong Kong. I want to find out what is it like to work under a different medical system.

### **Q: What have you found?**

The first difference is in placement supervision. In Germany, our supervisors are the nursing staff in hospitals. But at Caritas Medical Centre, I am supervised by the academic staff from PolyU. My supervisors are with me and other students all the time during the placement. There is a real connection between theory and practice, as we can apply our learning during placement and discuss with our supervisors during or soon after our practices. The downside of this arrangement is that nursing staff in the hospital treat me only as an assistant, not a member of a nursing team. In Germany, when I was on placement, I felt I was included in a nursing team.

The second difference is in patient contact, in Germany, we have much more contact, such as touching, with our patients. Here, nurses keep some distance away from patients.

Hong Kong nurses can give lots of their work away, such as cleaning to their assistants. In Germany, nurses need to do everything themselves, from cleaning, performing nursing procedures to documentation etc.

### Q: What have you learnt from this exchange experience?

I have learnt how to do good documentation and general assessment. At Caritas Medical Centre, their fall risk assessment questionnaire is short and concise, and it covers all important aspects. In Germany, fall risk assessment will be done 1-2 days after the admission of patients. The assessment questions are relatively longer and less comprehensive.

I have also learnt to test the IV site before an intravenous injection or infusion. German nurses never do that, but I think it is a good practice. The infection control facilities in Hong Kong's hospital catch my eyes, and make me more aware of infection control practices.

### Q: Do you reach your learning objectives for the exchange and placement?

I expected to come here to explore and observe everything. At the workplace, there is a language barrier between me and patients (also too many English abbreviated medical terms!), but my classmates have helped me through.

The exchange has provided me an opportunity to compare Hong Kong and Germany, and has given me a more critical view of the German's nursing situation. I think it is a good learning process.



Mr Keith Fung conducts a respirator fit test for Marcel prior to clinical placement.

Marcel meets with Dr Justina Liu, Exchange Programme Coordinator, and Ms Candy Choi and Ms Jacqueline MC Ho, Clinical Supervisors.





Marcel on placement in the surgical ward 7B at Caritas Medical Centre. Seven other \*PolyU nursing students were assigned to the same ward. Marcel with the ward staff, his supervisor, Ms Candy Choi (next to Marcel, dress in blue) and his groupmates.

