Welcome to the 2nd edition of the West Yorkshire Critical Care Network newsletter. This newsletter is a celebration of all the exciting work and achievements that have been going on by staff working in critical care services across the region. The aim is to share information about what is happening across critical care units in West Yorkshire and also to provide you with national news about critical care. We are very happy to publish information about best practice or about other interesting things that are happening in your unit, so please get in touch if you have anything you would like us to include in future issues.

Thank you to everyone who completed a Staff Climate and Teamwork Survey in 2018. We had a great response and have now, together with The Improvement Academy shared the results with your team. Congratulations to all units - we have some great teams in the Network. The results are very much owned by the individual units and can be used to drive quality and safety projects within your team. If you haven’t seen your results contact your unit lead nurse. We can repeat the surveys at any time to evaluate a project you have implemented.
Many units are reporting increasing requests to fill gaps in staffing in other areas of their hospital. Whilst it is accepted that such instances are required occasionally due to unforeseen circumstances, there is a concern that critical care staff are frequently moved which can affect the quality and safety of care delivery on critical care, but it also has the potential to affect staff wellbeing and in turn adversely impact upon retention. A Staff Movement Audit was developed to look at staff movement on Critical Care Units.

It is estimated that there are 288 critical care units across England, Wales and Northern Ireland. Data returns were received from a total of 59 units covering 11 ODNs, this equates to a response rate of 20%.

This is the first time data relating to the movement of critical care staff has been collected and despite the low return rate, there are still frequent requests for critical care staff to be moved in order to support staffing in other areas of the hospital.

It is recommended that regular data is collected in order to gain a greater insight into the number and frequency of staff moves and further work may include the effect this has on critical care staff education and training along with the impact on critical care patients, the individual staff member and the wider team.

The audit will therefore be repeated for a 2 week period every 3 months during 2019. Dates are as follows:

- 15th – 28th April 2019 (results awaited)
- 15th – 28th July 2019
- 14th – 27th October 2019
Pets as Therapy

The Critical Care Units at Leeds Teaching Hospitals welcome Maggie and Sarah Anderson from ‘Pets as Therapy’ onto their units each week. We asked Sarah about taking Maggie onto the Critical Care Units in Leeds and working for ‘Pets as Therapy’.

How did you get involved with Pets as Therapy?

I first heard about Pets as Therapy when I was trying to decide what breed of dog to get. I knew I wanted a dog that didn’t shed and I came across a cockapoo who had won PAT dog of the year. So I looked into it and knew instantly that was what I wanted to do. I wanted to make a difference to people’s lives, give them a reason to hope and smile. I had my fingers crossed that my gorgeous little Maggie puppy would be a suitable candidate and took her out and about to socialise her at an early age. Maggie turned out to be very chilled and loved people so she passed her PAT assessment at just 1 year old.

What do you enjoy most about visiting the CCU?

I have a keen interest in medicine, so when Leeds volunteer services said ICU were looking for a PAT dog I couldn’t believe my luck. To me, intensive care is one of the key units of a hospital and I hugely admire all the staff who work there. Maggie loves to meet people and I love the fact that she can bring a smile to people’s faces when they are facing such challenging circumstances.

We visit everyone on the ward – patients, relatives and staff. Maggie brings a bit of normality to the ward for everyone. Some patients are missing their dogs and others just enjoy the calming effect of stroking a dog. Some patients can be quite unengaged with staff and their relatives, but will look directly at Maggie and seem to communicate with her without needing to talk. For long-stay patients I think it gives them something to look forward to, or something non-medical to talk about and remember. For relatives it can give them some nicer memories of a sad time or give them an outlet for their stress or grief.

It’s always special when a patient’s smile for the first time and one of my favourite reactions from a patient was when a lady said “Maggie, you just made life worth living again.”

What about the staff?

Maggie is as much therapy for the staff as she is for the patients. She lifts people’s spirits and everyone likes working on “Maggie day”. I strongly believe a happy nurse or doctor makes a happier patient, so the impact Maggie has on staff morale and wellbeing is just as important to me.

I think the best reaction from a member of staff was when a young nurse said “Maggie you are better than a can of Red bull” as he skipped off down the ward back to work!

We are so privileged to be part of the Leeds Critical Care team, they do a tremendous job, and we hope we can help by making people’s journey through ICU a little bit easier.

For more information:
www.petsastherapy.org
Sarah Anderson - PAT Volunteer Coordinator
seanderson73@hotmail.com
RCN (2018) Working with Dogs in Health Care Settings
www.rcn.org.uk/professional-development/publications/pdf-006909
Afternoon Tea

The Network hosted an **Afternoon Tea** for past patients and their carers of adult critical care units in West Yorkshire at The Learning Studio, Piece Hall, Halifax on Tuesday 25th June 2019.

Many thanks to the patients and their carers who attended and also to Becky Baldaro-Booth, Morag Fallowes, Laura Barker and Catherine Balcombe for your help in facilitating this event.

Despite rainy weather is was a great afternoon with many useful and thought provoking conversations that will help to maintain and improve the quality of our services. Piece Hall provided some yummy refreshments and homemade cake that was enjoyed by all.

Network Forums

**Rehabilitation Forum - Chair Cordy Gaubert, Specialist Physiotherapist, BTHFT**

The Rehabilitation forum has focused on NICE Quality Standard 158 Rehabilitation after critical illness in adults. The all units have undertaken a gap analysis against the standard. This has resulted in further work looking at the requirement for patients at risk of morbidity to have their rehabilitation goals agreed within 4 days of admission to critical care.

The group plans to develop a suite of rehabilitation exercise videos which patients will be able to access via the ODN website. It is also propose that a MDT education information pack regarding all aspects of rehab should be created.

**Outreach Forum - Chair Sarah Blackburn, Critical Care Outreach Lead, HDFT**

To date we have held meetings quarterly across the region with good attendance from Outreach Teams, despite clinical pressures. The Forum has a live work plan to track the progress of work streams that are created and owned by the group and ensure we deliver on our original remit. Examples of items from the work plan include:

- a review of clinical profiles of CCOT’s across the WYCCN
- an audit of the education provided by the CCOT’s in the region, sharing of materials with access opened up to CCOT members across the WYCCN
- a review of the Operational Policies for CCOT’s and any other policies/ guidelines the CCOT’s own or input to
- a review of progress to ensure compliance with Maternal Enhanced and Critical Care (MEaCC) Recommendations for both clinical response and educational strategy

The next big piece of work about to be undertaken by the group is a review of Critical Care Outreach Team data sets across the region to ensure data capture is accurate, timely and most importantly purposeful.
Education Forum - Chair Alison Richmond/Andrea Berry WYCCODN

The Education Forum is made up of the Clinical Educators for each of the Critical Care Units and representation from the Higher Education Institutes who deliver critical care nurse education programmes. The group meet quarterly. Education and training for critical care nursing staff has been a focus for the ODN as many of the critical care units have struggled to get adequate numbers of nurses through post registration critical care courses. As such the ODN has played a pivotal role in facilitating the collaboration between Leeds Teaching Hospitals, Manchester Metropolitan University and the Greater Manchester Critical Care Skills Institute. This has resulted in HEE North providing three years of funding to put an additional 120 adult critical care nurses from across the network through the required course to meet the national standards. The first cohort started in September 2018, with the second cohort having commenced in January 2019. Applications for September 2019 intake are currently being considered by the Critical Care Course Programme Lead, Sophie Beavors. Other initiatives have included:

Each of the educators has been issued with a Samsung Galaxy Tablet to aid bedside teaching and participate in network audits.

Working with the Yorkshire & Humber PICU ODN to deliver a study day for adult critical care nurses on managing paediatric patients

Funding key staff from units to attend train-the-trainer tracheostomy training provided by ALSG, the aim being to the quality of care and improves safety when patients have a tracheostomy in situ.

Plans are taking shape to deliver a network wide senior staff nurse/band 6 study programme to help facilitate completion of Step 4 of the National Competency Framework.

Service Improvement Lead/Benchmarking Forum - Chair Alison Richmond WYCCODN

Each of the critical care services across West Yorkshire has an identified Service Improvement Lead (SIL) who attends the WYCCODN Service Improvement Lead & Benchmarking meeting. The forum meet quarterly to share good practice, audit care bundles, discuss the national critical care agenda and implement service improvement projects based on gaps identified through benchmarking.

The same group of SIL’s also meet three times a year with counterpart colleagues from the North of England ODN and North Yorkshire and Humber ODN to further share areas of good practice and collaborate in service improvement projects.

Since the last newsletter the Service Improvement Lead group have:

- Undertaken benchmarks of 12 practice areas in line with the annual audit program
- Undertaken Bronze and Silver Quality Improvement training with the NHS Improvement Academy
- Assisted with the distribution and completion of the Safety Climate and Teamwork Survey.
- Produced an information leaflet for visitors to critical care to provide information on what to expect
- Developed a library of best practice posters for oral care, bowel care, proning, eye care, pain, sedation and delirium
- Developed a ‘How to Benchmark’ Guide.
Critical Care Transfer Information

The New Intra-Hospital Transfer Form 2018

The new Inter-Hospital Transfer Forms came into use in January 2018 and were issued to all critical care and ED’s. The forms are to be used on ALL Level 2 and Level 3 patients undergoing an Inter-Hospital Transfer (from one hospital to another) into a critical care bed. They replace any previous forms that you may have been using. To view the form please use QR below or go to www.wyccn.org/transfer1.html

If using patient stickers please ensure one is placed on each page of the form, alternatively ensure patient details are written on all pages.

Reminders
- The top 3 pages are carbonated. Please complete ALL sections of this form during the transfer.
- The back page contains a Risk Assessment and a Pre Transfer Checklist that should be completed prior to transfer. This page should be retained by the transferring unit and placed in the patient records.
- Top copy retained by the receiving unit and placed in the patient records
- Middle Pink copy returned to WYCCODN office. Details on back page of newsletter.
- The bottom copy is to be retained by transferring unit and placed in patient records
- Additional Transfer Forms can be obtained by contacting Samantha.rogers3@nhs.net

Critical Care Transfer Training Course

The one day course is aimed at Nurses, Doctors, ACCP and ODP’s involved in transferring patients who are critically ill.

The course includes:
- Pathophysiology of Transfer
- Pre-transfer stabilisation & Packaging
- Monitoring, Equipment & Personnel
- Communication & Human Factors
- Ambulance Orientation

To find out more information about future courses and to register either use the QR code or go to www.wyccn.org
Morag Fallows, Staff Nurse is a palliative care and bereavement champion for General Intensive Care at Leeds General Infirmary. Over the last year she has attended training and worked closely with the palliative care team within the trust to make improvements for patients and relatives. As a result she has implemented the following initiatives and wanted to tell us more about what her work has involved;

- Compiling a quarterly palliative care newsletter and putting together a wall display, in order to share new information, best practice and training dates with colleagues.
- To help staff feel more confident in adequately managing the symptoms experienced by palliative patients, I organised a training session for the McKinley syringe driver pump. In addition to this I researched and promoted the use of the Saf-T intima subcutaneous catheters with the syringe drivers and to administer PRN medication for patient comfort.

### Bereavement Services

#### Bradford Critical Care Unit

The Critical Care Unit aim to ring bereaved next of kin within 6-8 weeks, to find out how they’ve been since losing their loved one, we are purely supportive. For example we may be able to answer questions on what happened, the cares given and why, clarify facts that they may not have understood at the time. We can arrange meetings with medical staff or the parent team to go through what has happened. If we feel family are struggling we may advise them to see a GP, or suggest sources of local support. We have been able to send out literature we feel may be of benefit (in particular where there are children and/or young adults involved). General feedback is very good, the majority of people we call thank us, many are surprised and many express that they are touched that we are still thinking of them.

Recently we have had a couple of young mums pass away on the unit, and this highlighted our need to improve the care and support offered to the children involved. We are looking into how we can move forward with the regular supply and use of memory boxes. This although not set in stone WILL happen, we are determined that we can improve on this.... watch this space for further developments!!

We were recently congratulated by one of the palliative care nurses, who was conducting some personal research into aftercare for bereaved families, and other than the children’s ward, she said we are the only ward in the hospital that offer any aftercare.

#### Calderdale and Huddersfield

We host a celebration service twice a year where bereaved friends and families are invited to attend.

On the day, guests are welcomed by members of staff, are handed an order of service and a packet of tissues. Guests are welcomed with a welcome speech by a member of staff. Throughout the service, a local choral society sings for us (‘bridge over troubled water’ and ‘you raise me up’ are popular) and poems are read out by members of staff.

Half way through the service, guests are invited onto the stage to light a candle in remembrance of their loved one and receive a pebble as a token of remembrance. During this time, a member of staff plays a piece of music on the clarinet. The service resumes with more songs and poems.

After the service guests are invited to join members of staff for tea and cake. Upon leaving, guests are encouraged to write comments in a comments book surrounding their thoughts on the service and how it can be improved.

Examples of feedback given from guests:
- ‘a wonderful experience’
- ‘beautiful singing and excellent refreshments’
The Service Specification for Adult Critical Care DO5 has just been published and can be located at www.england.nhs.uk/commissioning/spec-services/npc-crg/group-d/d05/

National Competency Framework for Registered Nurses working in Adult Critical Care - Specialist Competencies for Burns, Advanced Burns and Neurological Specialist are now available.

Guidelines for the Provision of Intensive Care Services (2nd Edition) have just been launched by the ICS. Find them at http://www.ics.ac.uk/ICS/GuidelinesAndStandards/GPICS_2nd_Edition.aspx


The documents can be downloaded from the Education Forum page on the website www.wyccn.org/education.html

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If you would like to contribute to our next Newsletter please email: Samantha.rogers3@nhs.net