



# Chief Nurse's bulletin

June 2017 – Issue 18

## Useful links

[Nursing and Midwifery Mentorship for Nursing and Midwifery Practice Development Nursing and Midwifery Students](#)  
[Multi-professional documentation](#)  
[Current vacancies](#)

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Contributions to:

**Vanessa Sweeney**  
Assistant chief nurse

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## Contact via twitter:

@vsweeney431

Welcome to my June bulletin. If, like me, you look forward to these lighter days and mostly warm weather, you may favour this time of the year. Regardless of your preference it is always a good time to reflect on the last 12 months. You may be wondering why now? For me there are two reasons, one professional and one personal.

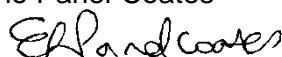
The first was prompted by Ali Finch's update on revalidation, one year on! I also completed my first revalidation submission last year and whilst a little anxious, mostly with the documentation as it was unfamiliar, I really enjoyed the process, especially the structured reflection.

The second was prompted by my attendance at the service we held recently for Aziz. You will no doubt have heard of the tragedy at Grenfell and how that has affected our UCLH family with the loss of one of our staff, an amazing porter Aziz. His service was one the most moving and heartfelt I have attended. I was struck by the personal stories shared and the impact of his loss to so many. I committed to honouring his memory by going the extra mile for those we care about and stooping for a minute to appreciate everything we have.

So thank you for all you do for our patients and each other. You make a difference every day.

Take care

Flo Panel-Coates



We are committed to  
delivering top-quality patient  
care, excellent education  
and world class research

**Safety**  
**Kindness**  
**Teamwork**  
Improving

# News and update



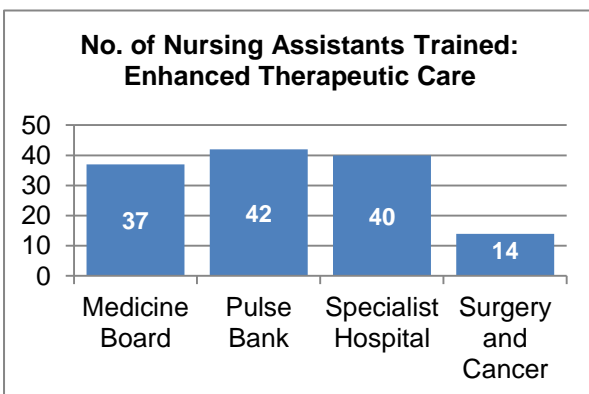
## Exemplar Ward Accreditation

Natasha Philips  
Exemplar Ward Programme Lead



1. NMAHPPs will provide the highest quality care within our resources

### Enhanced Therapeutic Care: A “Special” Story



Good news! We are on track with our aim of training at least 200 Nursing Assistants (NA's) by August 2017. So far, we have trained a total of 133 NA's (includes permanent and bank staff). The special training is an exciting and varied programme. The training not only focuses on improving the knowledge and skills of our workforce but also provides a safe place where NA's can share their stories and experiences. This creates opportunities to learn from each other through meaningful conversations. There is great exuberance, enthusiasm and laughter in the classroom and its great seeing collaborative learning between permanent and

bank staff, fostering a sense of feeling valued and appreciated and truly part of UCLH.

Our certificate presentation is a grand occasion! We've been honoured to have special guests like Charles House Medical Director for Medicine Board, Julie Hogg and Sam Abdul (Deputy Chief Nurses) Natasha Phillips (Exemplar Programme Lead), David Grewcock (Head of Improvement) and many other wonderful senior leaders celebrating nursing assistants on completion of the two day training programme. We have the following upcoming training dates with spaces:

Queen Square  
Queen Square

3<sup>rd</sup> and 4<sup>th</sup> August 2017  
14<sup>th</sup> and 15<sup>th</sup> September 2017



# Patient Experience

Lisa Anderton

Patient Experience Lead



## 2. NMAHPPs will listen and respond to our patients and improve their pathways

### Patient Feedback- How are we doing? May 2017

#### Outpatients

Positive: 93.84%

Negative: 2.18%



Ratings

#### Daycase

Positive: 98.74%

Negative: 0.00%



Ratings

#### Inpatients

Positive: 96.08%

Negative: 0.83%



Ratings

#### ED

Positive: 80.35%

Negative: 13.18%



Ratings

### Envoy Update

The month of May saw some changes happen with the way we collect feedback which included sending SMS/IVM messages to all patients who have used our Emergency departments. We have also started seeing live discharge rates for our ward areas so that users can now see what the response rates are for any ward on a daily, weekly or monthly basis. If you need any help with access this information on the system please contact [Patientexperience@UCLH.nhs.uk](mailto:Patientexperience@UCLH.nhs.uk) and we would be happy to help. Some of the comments we have received so far via SMS from patients are;

As usual a very good service I always feel safe thank you all

Quite long wait for getting tests back / but helpful staff

Excellent hospital the staff are wonderful and very dedicated

### Schwartz Rounds® - Attend a Round to contribute to your Revalidation

All staff are invited to attend monthly Schwartz Rounds. The Rounds provide space and time to talk about the emotional and social issues arising from providing patient care. Attendance at a Round contributes towards Nursing and Midwifery Revalidation – ask for a reflective accounts form on the day.

#### Future Rounds

- Thursday 6th July 2017, \*13:00 - 14:00, Royal National Throat, Nose and Ear Hospital
- Tuesday 5<sup>th</sup> September 2017, \*13:00 – 14:00, Education Centre, 250 Euston Road

\*Lunch is provided between 12:30 – 13:00 (funded by the Trustees!)

For more information email [Schwartz@uclh.nhs.uk](mailto:Schwartz@uclh.nhs.uk) or visit the [Schwartz Insight page](#)



## Education

Lorraine Szeremeta, Deputy Chief Nurse  
Education & Training Lead for Nursing



### 3. NMAHPPs will be valued and developed to their potential

April saw the first cohort of the new Deputy Development Programme which has been developed in consultation with Deputy Sisters / Charge nurses, ward and departmental sisters / charge nurses, matrons and Deputy Chief Nurses from across the trust. The programme aims to provide support and development to our deputy sisters and charge nurses both within their role and to assist with career development.

Seventeen deputies from all across the trust spent 3 ½ days participating in learning around clinical leadership, roster management, recruitment and retention of nursing staff and HR processes, to name just a few of the topics covered.

Participants are provided the opportunity to undertake a 360 appraisal and there is an opportunity for participants to undertake a management level apprenticeship.

Feedback from the first cohort has been very positive and the programme will be running again in July and October.

The October cohort still has places available so if you are interested in attending please contact [anna.bruce@uclh.nhs.uk](mailto:anna.bruce@uclh.nhs.uk)

[http://insight/departments/other/NursingandMidwifery/PracticeDevelopment/Pages/OpenLearningTools\(OLT\).aspx](http://insight/departments/other/NursingandMidwifery/PracticeDevelopment/Pages/OpenLearningTools(OLT).aspx)



## Corporate Nursing Team

Alison Finch  
Revalidation Lead

### Staff experience of revalidation . . . one year on

On the first of April 2016 NMC revalidation went live and now, one year later over 890 nurses and midwives at UCLH have completed a revalidation application; a requirement when renewing their place on the Nursing and Midwifery Council register. This represents around a third of our qualified workforce.

Our focus here at UCLH has always been to support staff to meet the revalidation requirements in a way that feels meaningful to their professional practice; the direct opposite of viewing revalidation as a tick-box exercise. We want to encourage learning from everyday practice and informal continuing professional development (CPD).

Nineteen 'revalidation champions' were recruited from across UCLH to support this philosophy in practice and staff feedback suggests we are meeting this aim; revalidation feels achievable . . . and of value.

Between August and October 2016 Alison Finch carried out an evaluation of the experiences of nurses and midwives who have either completed a revalidation submission or have acted as a reflective discussion partner or confirmer. The evaluation analysed how revalidation has been experienced and how it impacts on individual's sense of professionalism and continuing development.

Revalidation has been experienced as:

- **Achievable:** it values what you do and encourages you to learn from these experiences, rather than expecting you to do more
- **Personalised;** the process allows an individualised approach. Our reflective discussion is a personalised experience
- Being more reflective reminds us **what we do every day is of importance**
- Our **learning is derived** from our experiences
- **Appreciative of our contribution;** builds resilience and pride and protects against burn out
- Enhances a **sense of professionalism;** revalidation opens up dialogue about professional experiences, it supports shared professional identity
- **Helps inform leadership** of individuals in the team; builds aspiration and commitment, supports personalised development plans, and dialogue around what's important to the individual
- **Links the Code** more closely to our practice; with opportunities to strengthen and embed this further.

The evaluation identified that nurses and midwives have been able to appreciate and reconnect with the value of learning from everyday experiences.

*"Revalidation makes you redefine what you do every day and enhances professionalism"* says Jane Kimani, Staff Nurse and focus group participant. The emphasis, according to many individuals is looking deeper at what you do already, rather than being asked to do more.

Many of the staff we spoke with described their 'revalidation journey' as fulfilling in a way that surprised them. *"I have been a registered nurse for many years, and I was surprised how much I learnt during the process of reflection and especially during the reflective discussion"* describes Bridget Clarence Smith, CNS.

One of the unexpected benefits of revalidation is the appreciative nature of the preparation work. Developing a portfolio of evidence and then engaging in reflective discussion feels personalised and appreciative of our contribution to care. Nurses describe using the time to take stock of and to plan their professional development.

Two thirds of UCLH nurses and midwives are still to revalidate, it's important we keep the focus on what's required by the NMC. **Starting early and getting organised is key!** If you have your revalidation date coming up soon and would like to find out more about the how to prepare a short workshop is available to book, 'Revalidation through Reflection' [Learning Portal homepage]. If you are a leader and haven't yet spoken with Alison about the confirmation or reflective discussion partner role, contact via email, [alison.finch@uclh.nhs.uk](mailto:alison.finch@uclh.nhs.uk) ; it's a responsible role and we want to support you to fulfil it well.

**What's next in the world of revalidation at UCLH?** The Revalidation App is in development. This will act as a virtual diary for you to capture practice feedback and reflective insights as you go about your day to day work. If you are interested in being a pilot site please email Alison.

**How prepared are you for your next renewal date?**

<https://www.nmc.org.uk/news/news-and-updates/nmc-cnos-professionalism-guide/>



## Nursing & Midwifery workforce

Julie Hogg, Deputy Chief Nurse  
Workforce Lead and Research Lead for Nursing



### 4. NMAHPPs will practice in ways that manage resources and achieve financial sustainability

We have made significant progress in retaining staff over the last two years reducing cumulative turnover from over 16.5% to 14.1%.

The vacancy rate in April / May remained one in the best in London, but we are conscious that some areas are experiencing higher vacancy rates than we would like - so we are refreshing our recruitment and retention strategy for the coming year.

If you have any innovative ideas around how we can build a positive work environment and reward and recognise hard work and dedication we would like to hear from you – please contact

[Julie.hogg@uclh.nhs.uk](mailto:Julie.hogg@uclh.nhs.uk)



## Midwifery – We're Delivering!

Natilla Henry  
Head of Midwifery

**National Maternity & Neonatal Collaborative:** This is an initiative aimed at reducing avoidable harm in the NHS. One focus for maternity services is to bring about a reduction of stillbirths by at least 20% by 2020. Every maternity unit in the UK are expected to take part and have been asked to indicate their preference to be considered for the 1<sup>st</sup>, 2<sup>nd</sup> or 3<sup>rd</sup> wave of the project. UCLH made a successful bid to be in the first wave of the collaborative and members of the Women's Health Safety Team (Karen Russell, midwife and Seni Subair, Consultant Obstetrician) and Iris Tsikimi, Matron attended a Leadership and Improvement conference in Leeds at the end of last month, where sessions on quality and improvement, cultural studies that explores for example why some women may not engage with maternity care and leadership techniques in achieving a safety culture were discussed. If you are interested in finding out more about this project please contact, [womenshealthsafetyteam@uclh.nhs.uk](mailto:womenshealthsafetyteam@uclh.nhs.uk)

### **Diabetic Screening – new Changes to GCTs and GTTs**

Women are no longer given Lucozade drinks when conducting Glucose Challenge Tests (GCT) and Glucose Tolerance Tests (GTT). This is because the formula has been changed so that it has less sugar and more sweeteners which means that it doesn't give accurate readings. Women now receive Polycal instead. For:

- Glucose Challenge Tests – it is 75mls of Polycal
- Glucose Tolerance Test – it is 113 mls of Polycal

Here is the link to the maternity webpage

<https://www.uclh.nhs.uk/OurServices/ServiceA-Z/WH/MAT2/Pages/Maternity.aspx>



## Research – improving care, doing things differently



### 5. NMAHPPs will inspire, innovate and generate world class research



I am delighted to announce that Dr Rachel Taylor will be taking up the role of CMNR Director in August 2017. Rachel is currently based within the Cancer Clinical Trials Unit at UCLH. Rachel will continue the great work to increase non-medical research at UCLH - I am sure you will join me in wishing Rachel every success her new role.

The following events are open to all nurses, midwives, AHP's and pharmacy:

#### **Why Not Workshop - Publication - Dr Sofia Llahana 7<sup>th</sup> July**

This workshop aims to provide participants with a framework for identifying a writing schedule, strategies for identifying the appropriate journal and how papers are structured. For further details and to register, please visit: <http://cnmr.org.uk/article.php?article=1354>

#### **Why Not Workshop – Statistics - Mr Rob Shortman 8<sup>th</sup> September**

This workshop aims to provide participants with an overview of the key statistical concepts used within clinical research. For further details and to register, please visit: <http://cnmr.org.uk/>

### Research Fellowship Opportunity

Health Education England, working across North Central and East London (NCEL) has commissioned the NIHR CLAHRC North Thames Academy to run a research fellowship scheme for nurses, midwives and allied health professionals, for a fourth cohort.

This exciting scheme provides opportunities for fellows to develop their career as a clinical academic and access support from within the NIHR CLAHRC North Thames to develop an application for external funding to undertake further postgraduate study. **Further details can be found on the [CLAHRC website](#).**

Fellows will be seconded to the CLAHRC, four days a week for one year from December 2017. We are looking to appoint one to two fellows for this fourth cohort. HEE NCEL will contribute to the costs of the secondment, providing 3 days a week salary contribution for the duration of the fellowship, paid to the employing organisation. The applicant's organisation is expected to contribute two days a week salary (40%) to the secondment. This is to cover one day of the fellowship and the one day that the applicant will continue to work in their employing organisation.

Fellows will chose to work on either a) a project of their choosing which relates to one of the five themes, or b) a project linked to an existing CLAHRC project. Please do not hesitate to contact to discuss whether a proposed project would fall under the CLAHRC's research remit.

Throughout the secondment, fellows will receive supervision from a senior academic, with a view to developing an application for external research funding either for doctoral or post-doctoral

studies (for example to the HEE/NIHR Integrated Clinical Academic Programme) by the end of the fellowship.

**The application form and details about the application process can be found on the [CLAHRC website](#). The deadline for applications is 5pm, Thursday 27th July 2017. Applications should be submitted by email to Anna Head ([clahrc.academy@ucl.ac.uk](mailto:clahrc.academy@ucl.ac.uk)).**

## Day in the life.....

### Diana Comerford, Sister in the Ambulatory Care at the Cancer Centre

Diana came to the UK from Canada having qualified as a nurse. After studying science, she decided life in the lab was not for her, “I wanted to work with people so nursing combined both”, she says. Diana worked bank shifts, giving her a flavour of life in the NHS and exposure to different specialties. In 2008, she got a shift on T13N Haematology and was wowed by what she found there, “I just loved it – I’d never met such a fantastic, dynamic team of on the ball nurses. They were incredibly supportive to me as a newcomer. I found haematology as a specialty incredibly interesting, and lucky for me they were interviewing.”

Diana got a job at UCLH some months later and progressed from a band 5 nurse to team leader over six years, then onto oncology ward sister. When the ambulatory care nursing job came up she jumped at the chance. “It was something I always wanted to do”, she says.

Fast forward two years and Diana is combining her job with studying for a master’s degree. Here she talks about the jobs she loves.

“Like all nursing roles, no two days are the same. Day to day it’s a very clinically hands on role. We treat anywhere between 16-25 patients per day. Patients are treated in Ambulatory Care Macmillan Cancer Centre and go home or to a local hotel overnight instead of staying in hospital before coming back the next day. Because of the complex nature of their conditions – haematology cancers or sarcoma – patients are constantly reviewed and monitored.

“The key difference is that we are not with them 24/7. We have to manage their symptoms so they are well enough to go home or to the hotel. The handover at the end of the day is extremely important as staff that are on duty at the tower need to be briefed. Ambulatory care as a concept is relatively new. “Years ago, these patients would have been hospitalised, so this is good progress for healthcare”, adds Diana.

The culture of innovation and development is something she loves at UCLH, “I meet other nurses who don’t have the same educational opportunities as we do here. You’re also supported if you want to try something new”. Diana cites the example of a recent pilot project to reduce the numbers of a specific type of blood test for blood transfusions. “I had support from the clinical lead, a Registrar and the nursing team to trial a project where we perform fewer tests for patients to look at ways of cost cutting. The project saved £815 over two weeks and didn’t compromise patient safety”.

The other key part of Diana’s role is ensuring that nursing staff are trained and supported on the unit- a typical job for a nursing sister. What’s not typical though is that there is no permanent core team of nurses in the unit – the four nurses who staff the unit are on rotation from a pool of 50 nurses from different areas across the Cancer Centre. “Logistically this can be difficult and





stressful for nurses but it's a development opportunity for staff. It's my job to ensure they feel supported to do their jobs, especially at weekends when they are running the unit".

The most rewarding part of the job for Diana is the patient contact. "Some of our patients can be here for a very long time, so we really get to know them. They get to know each other too and quite often, there's a lovely atmosphere in the unit with staff and patients chatting away like a big extended family". The most challenging? "I find it hard to switch off and stop worrying about the patients I've handed over, even though I know they are in safe hands".

Diana was nominated for nurse leader of the year in the recent staff awards. She was thrilled, "Too often, we talk about the stresses in the NHS, but it was so lovely to be recognised".

## Help Needed

**Louisa Wallace, Employee Relations Adviser** is undertaking a project as part of her Masters on succession planning in nursing. Louisa will be really grateful if you could complete the anonymous survey (link below). It only takes a few minutes and will help inform her study. **Thank you**  
[http://kingston.eu.qualtrics.com/jfe/form/SV\\_3lsTnwn2LdkQQkj](http://kingston.eu.qualtrics.com/jfe/form/SV_3lsTnwn2LdkQQkj)

**Vanessa Sweeney, Assistant Chief Nurse** is looking for creative individuals who are interested in IT and social media. She would like to set up a small group to help with the redesign of the Nursing and Midwifery pages on Insight and the development of blog pages. If interested or know social media-savvy, creative nurses who are, please contact [vanessa.sweeney@uclh.nhs.uk](mailto:vanessa.sweeney@uclh.nhs.uk)

## Well Done!

**Madi McMillian!** Madi presented her Quality Improvement Project at the Kings Older Persons Nurse Conference in June as a new Kings graduate fellow. The presentation discussed findings on how improvement in early identification, prevention and treatment of delirium in older people post Hip fracture was greatly improved by older person specialist nurse led rounds, practical bedside nurse education and introduction of a delirium intervention tool.

**Lorraine Szeremeta, Deputy Chief Nurse** and teams for raising over £600 for the Grenfell Fire Appeal, through a cake sale on Wednesday 28 June 2017. Huge support from everyone with baking and contributing cakes and of course, thank you to those who purchased the delectable delights!



**The Nurses Ball** was held on Friday 23 June 2017 at the Landmark hotel. Nurses and staff from across the organisation attended and enjoyed a fabulous evening of dressing up, Prosecco and dancing!

## Previous editions

<http://insight/departments/other/NursingandMidwifery/Chief%20nurse%20newsletter/Forms/AllItems.aspx>