

St Christopher's

Burdett Trust Report 2017



Summary of Programme:

- One week placement at QELCA© Management & Leadership programme for Ward Managers & Deputy Ward Managers
- Combination of facilitated classroom learning and practice experience
- Opportunity to reflect on learning and formulate Action Plan for change on return to practice
- Action Plan implementation to be supported by Action Learning over six months

Perceived Organisational Aims:

- For St Christopher's to continue to be leaders in palliative care
- To develop the Inpatient Unit (IPU) to deliver the values of St Christopher's
- To help managers to lead their teams to deliver high quality end of life care (EOLC)
- To ensure quality and calibre of leaders in EOLC
- To improve leadership throughout IPU
- To plug the gap between the Executive Team vision and ethos and IPU teams
- To be seen outstanding and IPU leaders compliant with current change

Perceived Organisational Aims:

- To empower and enable managers to lead change management
- To retain IPU staff by improving morale
- To promote unity of management team
- For managers to take more responsibility for change management process
- To increase resilience so team can be more effective
- To fulfil CQC requirements for CPD
- To increase knowledge and skills to ensure the delivery of gold standard EOLC

Personal Aims

- To improve my leadership skills to enable me to support my team more effectively through current and future change
- To be seen less negative and reflect on the language I use to put a view across
- Have time and opportunity to explore what I need to maintain and what to change regarding myself
- Gain knowledge and skills in leadership, seeing team members as individuals
- Identify weaknesses and strengths in leading
- Be supportive of colleagues whilst enabling resilience and wellbeing for all

QELCA Leadership: Timetable

Day 1 – 16/01/17	Day 2	Day 3 – 01/02/17	Day 4 – 02/02/17	Day 5 – 03/02/17
<p>Classroom</p> <p>9.30 am <u>Welcome</u>, introductions and outline of programme for the week</p> <p>9.45 <u>My experience</u> of leadership?? - Tutors</p> <p>10.30 <u>Myers Briggs and Leadership</u> – Sally Garbett</p> <p>12.15 <u>Organisational Objectives</u> – Why has our organisation invested in this training? - Personal reflection followed by feedback to group and facilitated discussion - Tutors</p> <p>13.00 Lunch</p> <p>13.45 <u>Personal Objectives</u> – What do I want to get from this week? - Personal reflection followed by feedback to group and discussion about how to meet learning needs - Tutors</p> <p>14.30 <u>National drivers for good end of life care</u>. Introduce current challenges and rationale for improved care for those approaching end of life. – Heather Richardson</p> <p>16.00 Finish</p>	<p>Work Experience</p> <p>17/01/17 Julie O'Neill to HMP Wandsworth (7.50am start)</p> <p>Kim Briggs to Kings College Hospital (KCH) Ward (in uniform - 7.15 start)</p> <p>19/01/17 Joy Barrow-Anderson to HMP Wandsworth (7.50am start)</p> <p>Jo Drayson to KCH (in uniform - 7.15 start)</p> <p>31/01/17 Annette Broughton to HMP Wandsworth (7.50am start)</p> <p>Maggie Hogan to KCH (in uniform - 7.15 start)</p>	<p>Classroom</p> <p>9.30 <u>N.B. Reflection on experience</u></p> <p>10.30 Break</p> <p>10.45 What makes a leader?</p> <p>11.45 The leadership role of the hospice Ward Manager</p> <p>13.30 Lunch</p> <p>14.15 Team and self-care - how to remain caring but resilient</p> <p>16.00 Finish</p>	<p>Work Experience</p> <p>Jo Drayson and Kim Briggs to HMP Wandsworth (7.50am start)</p> <p>Annette Broughton and Julie O'Neill to KCH (in uniform 7.15 start)</p> <p>Joy Barrow-Anderson Croydon University hospital and Maggie Hogan Lewisham Hospital</p>	<p>Classroom</p> <p>9.30 <u>Reflection on experience</u></p> <p>11.00 <u>Nursing Leadership at St Christopher's: What do we need?</u> – Penny Hansford</p> <p>12.30 <u>Reflection on learning ('3 things I have learnt')</u></p> <p>13.15 Lunch</p> <p>14.00 <u>Priorities for change for self, team and organisation</u> Aim: to design an action strategy comprising "SMART" goals - Specific, Measurable, Achievable, Realistic and Timely (Jane Manns and Jan Noble to observe)</p> <p>16.00 Finish</p>

St Christopher's

Action Plan:



What have I learnt?

- Reminded that I do have the energy and the ability to continue to lead the team through changes
- Learnt more about all the different services involved
- Reminded of how strong as a group we are and that we can work together in leading our teams and overall the IPU teams using all our talents
- Myers Briggs working style as helped e.g. “ That it is OK to go away and think before giving an answer”
- That you need to be a good leader to be a good manager
- That I am very inward looking and need to look and engage in the bigger picture
- Styles in leadership and it's influence on the workforce. Recognising how I work
- To have a voice and be heard. Gaps in knowledge of St Christopher's outside the IPU

What have I learnt?

- To use IPOS (International Patient Outcome Score) more effectively to improve care
- I have kept myself/been kept very insular from other areas of the organisation and external organisations
- Realised the struggle and lack of funding external agencies cope with
- I need to be assertive with ward staff and organisation
- Aware of leadership styles and how these are used within different organisations and adapted to fit the situation
- Leadership roles within wards is paramount to drive change and enable/help staff understand and adapt to changes
- How little I know about the organisation. Need to be more active and participate as part of it

Priorities for Change: SELF

- Lead ward team through the changes by enabling them to understand
- Support, so will be able to recognise what it is I am achieving and what I need to do
- Remind myself why I am leading these changes but also look at what I believe needs to change on the ward and come up with ideas
- To develop as a leader and be positive around change and embrace it
- To question not just accept when told/asked to make changes
- To be assertive and flexible on ward and other areas of the organisation
- Just do it, stick to it, be more resilient
- Participate and attend strategic meetings
- To learn more about the organisation as a whole e.g. strategies. To take an interest
- To be able to be assertive
- Give self permission to go meetings e.g. Action learning

Priorities for Change: TEAM

- Ward managers and deputies working closer together. Use weekly meetings to voice concerns, issues and plan what needs doing
- Plan regular 1:1 meetings with staff
- To help improve communication to the staff on our ward about future changes to prepare and lead staff
- Supervision and resilience sessions
- Encourage ward team to attend meetings off the ward and include themselves in organisation discussions
- For team to become aware of what's happening and rationale behind changes
- Agreement in goal setting
- Enable staff to have a voice and take part
- Help staff to feel enabled

Priorities for Change: TEAM (cont'd)

- For IPU management team to have a voice in the organisation
- To lead and support ward team effectively through changes
- Continue to support staff
- Help staff with resilience and well being
- For staff to attend key meetings

Priorities for Change: ORGANISATION

- Provision of space/time to meet with ward team as a whole
- Continue to support Ward managers and deputies in leadership and supervision
- Increase attendance at meetings e.g. Information exchange and identify which others I need to attend
- To be more involved and better informed about the rationale for change and to ask why
- Organisation to be transparent and to include IPU before decisions are made, not done once they have been made
- The daily meetings include all the disciplines to outline daily plans
- To ensure staff are aware of the organisation as a whole. To be proactive in attending (or encouraging team members) briefings and share information gained in a meaningful way
- To be involved in the vision

Priorities for Change: ORGANISATION (con'd)

- Alongside the QELCA leadership and management course senior nurses within the organisation wrote an IPU development plan in alignment with St Christopher's strategic priorities for 2017-2018
- This plan combined with the priorities for change informed the action learning sets

Action Learning set aims

- Monthly Action Learning Sets
- Agreed Action Plan (in principle)
- Commitment from managers to attend
- Commitment of organisation to protect time

Challenges to Achievement of Objectives

During the time of the QELCA© course and Action Learning there was disruption caused by:

- Staff leaving.
- Shortage staff, over the summer which meant some action learning needed to be postponed

October 2017.

The group including the new members of the team, Practice Development Nurse, Matron and Director of Nursing met to assess progress and to reinstate action learning

Outcomes of Action Learning sets

Review summary action plan	Action	Progress
1. Improving access for BME patients	Joy Barrow Anderson:	<ul style="list-style-type: none"> • Joined Activity and reach group • Has made links with churches in locality. • Progress ongoing
2. Standardisation of board rounds	All	<ul style="list-style-type: none"> • PDN requested to support with training. Successfully implemented. Awaiting audit
3. Implementation of verbal nursing handovers and discontinuation of taped handovers	All	<ul style="list-style-type: none"> • Guidance written, support ongoing. Commencement of bedside handovers at lunchtime
4. Implement role of nurse in charge and 101 bleep holder	All	<ul style="list-style-type: none"> • Guidance written
5. Support discharge planning within the IPU	All/Maggie Hogan	<ul style="list-style-type: none"> • Training undertaken with new nurses and MH providing training "on the job" and identifying concerns from ward staff • Development of a discharge leaflet • New colour traffic light system to show progress on discharge board • Involved with discharge template system one • Data collection in progress for audit • Flow chart reviewed for ward staff

Outcomes of Action Learning sets

Review summary action plan	Action	Progress
6. Support "goal setting" on the ward	All	<ul style="list-style-type: none"> Implemented on admission, handover sheets and discussed at board round and MDT Implementation of "How Are you forms"
7. Regular ward meetings and 1:1s with staff	All	<ul style="list-style-type: none"> In progress. Review of content and timings
8. CMC	Ward managers & Deputies	<ul style="list-style-type: none"> Ward managers trained. Deputies still need training. To update when a patient dies on the IPU. Medical team to update records on discharge
9. Evaluate and reflect on managing 2 wards for myself and staff & establish new relationships with MDT	Julie O'Neill	<ul style="list-style-type: none"> Meet with Anne Nash Devise a questionnaire for staff Outcome to work more flexibly
10. Become CVAD lead in IPU	Joy Barrow-Anderson & Barbara O'Neill	<ul style="list-style-type: none"> Attended a day update at RMH Date set to review workbooks and policy Dates to set for training.
11. Become tracheostomy care lead in the IPU	Kim Briggs & Catherine Kreckeler	<ul style="list-style-type: none"> Attended an update and GSTT Teaching on Annual update and teaching Drs Need to review policy and workbooks

Outcomes of action learning sets

Review summary action plan	Action	Progress
12. Implement a sickness board in ward office to ensure correct procedure followed. Visual prompt	All	<ul style="list-style-type: none">• Implemented

IPU Nursing Action Plan Progress

Aspiration/ results	Area for development	Action	Lead change agent	What will the change look like	Time frame	Progress
Full integration of case management and OACC on the inpatient unit, drawing on the skills of the broader multi professional team	To monitor the improved communication & management flows within the inpatient unit ensuring that decisions are not delayed and actions are flowed through in a timely fashion.	<p>To continue to support :</p> <ul style="list-style-type: none"> The use of daily board rounds To use OACC as a central communication tool <ul style="list-style-type: none"> To support IPU patient management Plan a quality audit to reviewing content, timing and attendance. Undertake a survey Monkey to assess staff views on how this form of communication has supported patient case management 	All ward managers and deputies supported by Anne Nash, Jane Manns & Margaret Hogan. This will ensure standardization across wards.	<p>Introduction of the daily MDT board rounds.</p> <p>Using OACC as a key part of presentations at board rounds and MDM's.</p> <p>The audit results will assess communication quality , time management and staff views in practice</p>	<p>Planning of what team wish to audit and measure</p> <p>Away day July 2017</p> <p>August produce audit proposal and survey monkey questions to present to Audit group</p> <p>September 2017 undertake audit</p> <p>October 2017 /Nov2017 Present audit and re action plan</p>	<p>Board rounds successfully implemented</p> <p>Introduction of the "How are you" form. Done a change of POI and weekly to inform weekly MDT meeting</p> <p>Audit still needs to be undertaken</p> <p>Survey monkey undertaken. Results shared with senior nursing team</p>
	MDT's need to become more focussed and effective (part of the case management changes) on use of patient outcome tools and goals of patient	<ul style="list-style-type: none"> Following implementation of new software system Implement patient out outcome tools to be central in presentations. Along with patients profile and patient goals of care. 	Ward managers/ Consultants supported by AN/JM's.	MDT's will be reviewed- to focus on unstable and deteriorating patients and reflection on what went well and what didn't go well.	Fully implemented Jan 2018	<p>MDTs awaiting implementation of new software system due January 2018</p> <p>Ward rounds focussed on unstable, deteriorating patients</p> <p>Goal setting discussed daily at board rounds</p>

Going forward

Area for development	Action	Lead change agent	Time frame
<p>1. Audit board rounds using guidelines as the standard</p> <p>2. Reinstate board round training for new staff</p>	<ul style="list-style-type: none"> • Complete audit proposal form • Undertake the audit • Ward managers to do each others wards • PDN to resume board round training 	<p>Ward managers and deputies</p> <p>Jane Manns</p>	<p>Complete by January 2018</p>
<p>3. Review of MDT process</p>	<ul style="list-style-type: none"> • Await system one implementation. Work with Nigel Dodds to ensure standardised approach to presentation 	<p>Jane Manns & Anne Nash</p>	<p>Complete April 2018</p>
<p>4. Training for upper band 5s including 101 bleep holder responsibilities</p>	<ul style="list-style-type: none"> • Jane to bullet point nurse in charge guidance • Jane & Maggie to organise dates • Ward managers to identify staff for training 	<p>Jane Manns</p>	<p>December 2107</p>
<p>5. Action learning sets for Kim Briggs, Annette Broughton, Julie O'Neil Barbara O'Neill, Jade Branch</p>	<ul style="list-style-type: none"> • Jane to organise dates for Barbara O'Neil and Jade – • Kim , Annette & Julie O'Neil attending the Hospice Leadership programme which includes action learning sets 	<p>Jane Manns</p> <p>Hospice leadership group</p>	<p>April 2017</p>
<p>6. Implement 4-6 weekly team meetings</p>	<ul style="list-style-type: none"> • Ward managers to discuss content (Penny Hansford has offered time to support) 	<p>Ward Managers</p>	<p>December 2017</p>
<p>7. Support implementation of board rounds at lunch time handovers including bedside handovers</p>	<ul style="list-style-type: none"> • Ward managers, deputies and PDN to role model, observe and give feedback • Discuss progress at weekly ward managers meetings 	<p>Ward managers, deputies and PDN</p>	<p>December 2017</p>

Going forward

Area for development	Action	Lead change agent	Time frame
8. Implementation of system One	<ul style="list-style-type: none"> Assist with completion of templates Practice on system prior to implementation Organise staff training 	All	Complete by January 2018
9. Implementation of assessment tools for patients with Dementia	<ul style="list-style-type: none"> PDN to undertake training to Dementia champions Ensure tools available for upload to system one Liaise with Dementia lead nurse at Croydon University Hospital. Use of "Forget me not " magnets for 	Jane Manns	Complete April 2018
10. Review induction documents for standardised approach for induction for all staff	<ul style="list-style-type: none"> Jane to work with IT & HR Upload onto intranet Include fire training 	Jane Manns	December 2017
11. To find out outcomes from exit interviews	<ul style="list-style-type: none"> Managers to contact HR to ask for feedback 	All	December 2017
12. Reinstate drinks trolley in wards in the evening	<ul style="list-style-type: none"> Ward managers to reinstate on the wards. HCAs to lead Contact HOST for ordering of drinks Obtain trolley and glasses 	Ward Managers	December 2017
13. Clinical supervision of staff	<ul style="list-style-type: none"> Await outcome of senior management decision to organise Encourage nurses to use Learning and Development record to record attendance 	Ward managers	Ongoing
14. Support for new staff nurses and mentors	<ul style="list-style-type: none"> Action learning sets for new staff nurses Support for mentors 	All Jane to lead ALS	Ongoing