

The Brief

February 2023

You are magic. You change lives...



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Patient First - the lowdown

SPOTLIGHT ON: **Meds advice** Page 20

New ED patient admin system Page 9

Your University Hospitals Dorset

An update from chief executive, Siobhan Harrington



Thank you #TeamUHD for all that you continue to do through a time of great disruption. Through January we saw over 35,000 outpatients, and more than 7,400 virtually, carried out 1,650 theatre cases, assisted with the births of more than 320 babies, attended to around 11,000 people in our emergency departments, and started 181 new patients on their radiotherapy journey, alongside caring for 1,000 patients in our hospital beds.

The end of one year and the start of the next is often a time of reflection. This last year has been another experience of living and working through a pandemic, and as we've experienced for a long time now, the NHS is rarely out of the headlines. It's important to remember however, that behind the headlines about industrial action, full hospitals, busy emergency departments and lengthy waiting lists, there is an army of the most dedicated staff that anyone could imagine, doing their utmost for our patients. That is the NHS.



▲ Colleagues working together on ward B3 at Poole

Never has this ethos been better demonstrated than during the recent industrial action by our local ambulance service and the RCN, and indeed the planning for the next strike dates on 6 and 7 February. Our core value of teamwork shone through in every aspect of the planning and on the strike days themselves. Thank you to all of you who helped keep patients safe and may have moved to help colleagues on the days affected, while respecting

everyone's individual choice of where they needed to be on those days. We held a special Ask Me last week to hear of peoples experiences and to learn about what went well and what we can improve on. This is not something we have dealt with before and we will continue to make improvements to how we maintain patient safety and staff morale at this time.

Going out to speak to our colleagues on the picket line, and being in our hospitals speaking to those working differently, really reminded me just how emotional this is for all of us. I sincerely hope a resolution can be reached as soon as possible.

A really important way we do learn is to look back before we look ahead. In the past few months we've have worked with partners across the system on escalating our levels of pressure and sharing risk. We have been in business continuity for over a month and escalated to 'critical incident' on four occasions. Additional capacity has been available in beds outside the hospital and we have worked together on the discharge pathways for all our patients.

We have reduced planned elective activity in order to manage emergency demand.

This is unavoidable but has sadly had an impact on a number of our elective patients, including cancer and cardiology patients. This is not a measure any of us take lightly, and the patients' care will be prioritised as a matter of urgency.

Stepping back from the pressure and seeing where we were at the beginning of April and where we are now, people are waiting less time and less people are waiting - we are having an impact and moving in the right direction.

There is a real focus on our elective improvement programme to support recovery and I am really looking forward to the opening of our new theatres at Poole. These real, tangible improvements are a source of hope for all of us. Just last week our board of directors ratified the plans to move into the new clinical buildings earlier than planned - behind that headline lies the fact that patients get better, more appropriate care even sooner, and the working environment for staff will be better, and that is something for us to look forward to.

With patients at the very heart of all we do, we've also been laying the groundworks for our Patient First initiative, a process of continuous improvement



▶ Our maternity team visit the new BEACH building

that focuses on giving frontline staff the time and freedom to identify opportunities for positive, sustainable change and the skills to make it happen. It is a way of bringing us all together following the merger and the pandemic, and it will be something we will all work together on - find out more on page 8.

Looking ahead, we will of course continue to plan for any further industrial action and will continue to work with our partners on the many issues that impact flow through our hospitals. We have a new patient administration and management system coming to our emergency department teams at the end of March which will help streamline care - see more on page 9. We also look forward to welcoming Lesley Watts, the national director for discharge for NHS England, to our hospitals. This is a real opportunity to share what we do and learn about what works well from other trusts.

Closer to home, we have appointed a new chief medical officer and look forward to bringing you more details about them as soon as possible. My personal thanks go to our deputy chief medical officer, Dr Ruth Williamson, who has been in this role in an interim capacity since

Dr Alyson O'Donnell stepped down. Your knowledge and wisdom have been a real support to UHD.

Later this month our national Staff Survey results will be released and I was really encouraged to see more of team UHD responding than in previous years. Your voices are so powerful so please continue to use them. I absolutely want this to be a listening organisation as well as one that addresses your concerns. We fed back on some of your recent comments in this month's You Said - please see page 4.

Following the CQC inspection of maternity, medical services and surgical services, we are awaiting the final reports. There were a number of areas for improvement and our delivery of those improvements has in some cases been completed and in others is well underway. I can still remember the verbal feedback about the culture of caring which was evident with the inspection teams. We will let you know when the reports are released.

We're also placing significant focus on recruitment and retention and I'd like to personally welcome all of those joining #TeamUHD.

▼ Welcome to our international nurses



Finally, and looking ahead more immediately to this evening, tonight will see the first of three special reports on BBC South Today about the incredible work of our maxillofacial prosthesis team at Poole who painstakingly craft new body features for those who have had to have them removed, either as a result of cancer, or trauma. The results are simply life changing and the programme is a real reminder to us all that we in the NHS do change lives. That should never be taken for granted and is something we should be proud of.

Thanks again for all that you have done through this challenging winter period. It's great to see the progress that is happening in UHD and the brightness returning as we edge into February.

Siobhan

Industrial action update

Next Monday and Tuesday the Royal College of Nursing is taking part in industrial action at UHD. Monday also sees industrial action by our ambulance colleagues from SWAST as well. We are preparing for this now and thanks to all who fed back their experiences of previous industrial action to help with this work.

As last time, we are working closely with the RCN on our derogations where we agree how many staff should be

working in what areas to provide life-preserving care. This may mean that colleagues are asked to work in areas they are not used to working in to help provide the correct cover.

We will be setting up our incident room in Poole Hospital to help manage this industrial action. We are updating the information we have for colleagues on our intranet on derogations, managing periods of industrial action and reporting

industrial action on ESR and Healthroster. There are also details for clinical and non-clinical colleagues interested in volunteering to help support colleagues over this time. This can all be found on the [industrial action page](#).

Other services are also announcing dates for industrial action, including the fire service and teachers. We are also expecting future dates from the RCN and SWAST and will keep you informed through our usual communications channels.

You said...

At the January all staff briefing, you gave your views on what you would like to see at UHD in 2023. Our execs have been working through your feedback...

Listen to staff

- Listening events and being actively heard.
- Leaders on the shop floor.
- Look after staff and they will look after patients.
- Listening to the staff networks and engaging with them.



Siobhan Harrington
Chief executive

▶ Siobhan says:

“I am passionate about us being a real listening organisation, so please rest assured your comments are heard and we are taking action. We have our regular staff briefings which I encourage you to attend, as well as the informal monthly Ask Me sessions which are led by our chief medical office team. These are open to everyone and a great chance to air your views and ask any questions.

“If you’d rather we come to you for a smaller session, just tell us. Our deputy chief nursing officers already do ‘frontline Fridays’ where they go and work on the wards. We don’t want it to be like a royal visit - so tell us what you want from senior leaders.”



Paula Shobbrook
Chief nursing officer

▶ Paula says:

“We know staff who feel valued and heard will produce better patient outcomes - that is at the heart of our Patient First programme and you can read all about this on page 8.

“It’s really encouraging that we have recently been recognised by NHSE as a ‘best practice organisation for staff networks’. Please do support the networks and help them grow.”

Parking/travel between sites

- Parking still a huge challenge at all sites, adds to stress of getting to work.
- Permits should not be sold if there are not enough spaces for everyone.
- Can we sort out a cross site travel plan before 2025, the problems are now.



Richard Renaut
Chief strategy and transformation officer

▶ Richard says:

We appreciate how important it is to get travel right, and the impact it has on you when getting to and from work is challenging. Our car parking team has updated the travel Q&As to reflect your feedback. It includes topics such as alternatives to single-occupancy car travel, charging facilities for electric vehicles, the potential of a bus service linking RBH and Poole and the latest on the contractor compound at RBH designed to reduce the pressure on existing staff car parking. You can read them [here](#).”

Civility

- I would like to see people being respectful of each other. We are one team.
- Bullying is a big issue in UHD.
- Can the process of managing bullying be clearer? I have been advised to contact HR, OH, unions, line manager, director, and Freedom to Speak Up.



Deb Matthews
Director of organisational development

▶ Deb says:

“Our leadership and management workshops focus on being compassionate and how to build psychological safety in teams and

creating an environment where staff feel they can raise concerns and give feedback.

“With bullying, the key is to have a conversation informally as the behaviour arises or soon after. You may like to explore support via your unions, HR, OH or FTSU team to help you do this. If the behaviour persists or if the informal approach is ineffective then it is best to explore other options. In these cases HR will be key but also your union or FTSU if you need support. Our [civility pages](#) of the intranet may help you too.”

Management and leadership

- Supportive management and more sympathy to workload.
- Flexible working and working from home.
- More support for bank staff, never had an appraisal.
- Let staff have leave they want, especially our overseas nurses.
- Touch base with those that aren't based onsite.



Karen Allman
Chief people officer

► Karen says:

“We have developed a quick reference guide for managers so they can see how best to support their staff quickly.

“Many of you are already supported to work flexibly and this includes working from home for those who can. It isn't possible for everyone but there is a process where you can request flexible working - you can find it [here](#) on our intranet.

“Our bank staff are simply vital to the care we give as a trust. Bank staff are reviewed under a separate process to ensure they have an equally supportive review - let us know if you're not receiving this.

“We have to have a system for annual leave booking so it is fair and areas are staffed appropriately - please speak to your managers and make sure you're taking breaks.

“We are spread across more sites than ever but really do make an effort to have regular visits and days working across UHD. If anyone would like us to come, please let us know.”

► Deb says:

“With so much transition over the last two years, many teams have new leaders, or are working with different colleagues or being asked to embrace new processes. We are working with team leaders to develop their skills in creating effective teams with clear shared purposes.

“We also have workshops on giving and receiving feedback, courageous conversations; and coaching conversations and will be designing training for line managers on how to implement basic HR policies, such as grievances, disciplinaries and managing sickness.”

Wellbeing

- Staff are burned out and tired of constant upheaval and low pay.
- Staff are struggling mentally.
- There is far too long a wait for an occupational health appointment.

► Deb says:

“We know it is tough. Our psychological support and counselling service is available for all staff and provides totally confidential psychological assessment and support that can be accessed during working hours. It offers fast access to NICE compliant therapy/support for a range of difficulties including work-related stress, burnout, trauma, anxiety, low mood and poor sleep. It also offers highly specialist counselling for treating burnout and supporting staff to remain in or return to work.

“We know waiting times for OH have been an issue in the past but thanks to investment and changes in working practices, the team has successfully brought down the waiting times and hope to reduce these further. The current waiting time for a management referral appointment is eight working days and for a pre employment appointment three-four working days.”

Catering

- Prices in canteen unreasonable. Are they subsidised? We need more food offers.
- Half price hot drinks every day, not just on certain days.
- Could unsold food from restaurants be made available free to staff who are struggling?



Pete Papworth
Chief finance officer

► Pete says:

“Staff prices remain heavily subsidised, however food cost inflation remains a significant issue (around 25-30%) and has sadly led to an increase in some prices. We are looking into a further subsidised ‘meal of the day’ option and will bring you the details soon.

“We’re also looking at whether we can extend our hot drinks offers. This is a careful balance as this would result in a significant reduction in income which is ultimately used to avoid further savings requirements in front line services.”



Mark Mould
Chief operating officer

► Mark says:

“With unsold food, food safety standards prohibit leftover hot food from being distributed later in the day as it has gone past its ‘safe life’. Fresh produce is kept where safe to do so and is used in meals or is sold at a discounted price the following day. Our long-life food (tins/cans, etc) are proactively managed to avoid any wastage.”

Estates/rest areas

- Areas to rest other than the canteen.
- Fix issues - we’d like a roof which doesn’t leak.
- Spaces to eat are very limited. Quiet spaces during Covid were appreciated.

► Richard says:

“Our improving staff experience group has progressed having more and better staff rest areas as a result of your feedback. This is work in progress so help us identify our next set of improvements. Please share your ideas.

“While significant improvements have been made across all our UHD sites, we know there is a huge estates backlog that has built up over years. However in a year, our estates team responded to 11,703 urgent call outs, and completed 17,619 planned preventative maintenance jobs. To keep on top of the jobs, the Docketline system is essential. It also allows you to keep up to speed with the job you’ve logged.

“With NHS and charity funding, we have been able to improve a number of areas in 2022, including the area outside the Dolphin at Poole, relocating the RBH marquee and buying new furniture, and providing rest areas on each floor at Yeomans House.

“Please do let us know where the staff rest areas are that aren’t so well known, and open up staff rooms to everyone, especially those ‘visiting’ areas, like our housekeepers and AHPs. If your staff room needs some TLC, get in touch with our UHD Charity team.

“Looking ahead, our new buildings will have more staff rooms when they open and there will be an increased size junior doctors mess at RBH.”

Ask me: industrial action special

January’s Ask Me was an industrial action special hosted by acting chief medical officer, Dr Ruth Williamson, chief executive officer Siobhan Harrington, and chief nursing officer Paula Shobbrook. They were joined by other colleagues involved in the industrial action planning and covered a range of issues, listened to feedback,

answered questions and looked ahead to the next nursing strike dates.

These virtual sessions are a great opportunity to ask questions and share any good practice or concerns in a really informal setting. You can view a recording of the session, and catch up on earlier sessions, [here](#).



Crafting the missing piece

Tucked away in a corner of the bustling outpatients department at Poole Hospital you'll find the home of the maxillofacial prosthesis team. At first glance, their workshop is reminiscent of a school science laboratory, complete with Bunsen burners, large metal sinks, test tube holders and even a small oven. Throw in the paints, waxes and fine crafting tools and it starts to feel more like an artist's studio.

Indeed, this is a team for which the worlds of science and art very much come together, and do so in a way that transforms lives. The lives of Susan, Phillip and John, who lost an ear, nose, and eye respectively due to cancer, as well as the lives of the many other patients who have benefited from their skill, their art, over the years. For in this workshop, the team painstakingly craft new body features for those who have had to have them removed, either as a result of cancer, of trauma, or who need the team's support for something that has impacted them since birth.

The results are simply life changing.

The BBC followed maxillofacial prosthetists Heidi and Sian to find out more about what they do, and to meet patients Susan, Phillip and John, and their families. The feature also met the wider team, including maxillofacial surgeon, Mr Ramchandani.

The special series starts tonight (1 February) on BBC South Today.



Patient First - the lowdown



What is it?

Patient First is a process of continuous improvement that focuses on giving frontline staff the time and freedom to identify opportunities for positive, sustainable change and the skills to make it happen.

Why do we need it?

It is a way of bringing us all together following the merger and the pandemic, to truly engage with our hardworking and dedicated teams and focus on the right things for patients. It's a structured model of support that will build upon what works well, refreshing our culture of excellence and further developing 'the way we do things around here'.

How will it affect me?

All of this will require a different way of working to unleash your passion and skills, create a sense of belonging and promote a more inclusive service and workplace so people will want to stay and positively contribute to the success of our trust.

What does it mean for patients?

Patients will experience safer and more caring services resulting in improved outcomes for them and their family.

What work has been done so far?

For the last few months, we have been working together with over 100 clinical and non-clinical staff from across Team UHD to review our current position. These results will be vital as we plan the successful roll out of Patient First at UHD. We have also developed links with other NHS organisations who have benefited from Patient First.

What's happening next?

Our executive team will be undertaking their annual review of our trust's vision and objectives, developing the strategic objectives for the coming year based on the Patient First approach.

How can I get involved?

The strategy development phase will commence in February with a series of workshops involving executives and our senior leaders from the clinical care groups and corporate directorates.

As the roll out gathers pace, more staff will have the chance of being involved - we will be providing regular updates through *The Brief* and via our intranet pages, and line managers will be speaking to teams directly.

In the meantime, we want to have conversations with you! To hear more and share your thoughts, come to one of our informal sessions:

Wednesday 22 February:

10.30-11.30am, online and in Macmillian seminar room, Christchurch

Wednesday 22 February:

12.30-1.30pm, conference room, RBH and Macmillian seminar room, Christchurch

Thursday 23 February:

10.30-11.30am, board room 1 and 2, Poole

Thursday 23 February:

12.30-1.30pm, conference room, RBH and board room 1, Poole

Wednesday 8 March:

8.30-9.30am, seminar rooms 1 and 2, RBH and board room 2, Poole

Wednesday 8 March:

3-4pm, seminar rooms 1 and 2, RBH, board rooms 1 and 2, Poole, Macmillian seminar room, Christchurch

New ED patient admin system to streamline care

A modern new patient administration and management system is coming to our emergency department (ED) teams and other current Symphony users at the end of March.

Agyle is a complete replacement for the Symphony system, and offers considerable improvements which will improve patient safety, flow and experience. It's also more intuitive and user-friendly for staff to use.

Features include:

- a full suite of paper-lite patient management tools, including user-friendly streaming, triage, tasks and alerts
- ambulance handover management, real-time performance indicator reporting, and increased visibility of ED activity and patient acuity
- real-time hospital flow data and support for fully mobile working
- live patient tracking at a glance
- more effective planning and prioritisation of care by clinical teams
- greater visibility of our highest risk clinical areas and sickest patients
- fewer steps and faster processes, freeing up valuable clinician time

All staff who currently use Symphony - including ED staff, CMT and assessment unit staff - will need training before they can use the new system. Look out for news on training resources shortly.

Dr Harry Adlington, clinical director for urgent and emergency care, said: *“Agyle offers us a brilliant opportunity to work more responsively, using faster, better information, and to be more informed about what is happening both to individual patients as well as across our emergency departments and assessment units.”*

“It is a major change, and I would encourage all staff who currently use Symphony to look out for training opportunities and book on to them as soon as you can so we can hit the ground running in late March.”

The same system is already in use at Dorset County Hospital (DCH), where it has provided marked improvements for clinicians, admin teams and patients.

“Agyle speeds things up by bringing information together in one place, so staff in our ED can access and update information immediately,” said Dr Spencer Cheung, consultant in emergency medicine at DCH.

To contact the project team, email project manager Fifi Makhoana-Dendle via refiloe.makhoana-dendle@uhd.nhs.uk or IT implementation nurse specialist Bibiana Anyanwu via bibiana.anyanwu@uhd.nhs.uk



Call 4 Concern at UHD

We have now launched Call 4 Concern at UHD. This is a patient safety initiative, and acts as a safety net for our patients and relatives where they feel their condition, or that of their loved one, is deteriorating and they remain concerned.

We will be asking them to “Call 4 Concern when you are worried that your own condition as an inpatient, or that of your relative/friend admitted to our hospital, is getting worse. Also call if you feel that the health care team needs to provide you with more information or act upon your health concerns”.

Patients or relatives and carers can speak directly to the outreach team, who can prioritise the call and act upon concerns in a timely manner. This complements the other safety initiatives already in place at our hospitals. Calls can be made 24 hours a day, seven days a week.

This approach has been used in several other NHS hospitals across the south, including Southampton. The published evidence is that this safety mechanism is used rarely and appropriately.

At UHD, it has been developed as part of the deteriorating patient quality improvement programme, which acted upon Karen’s powerful story of her son Alex, who died at Royal



Bournemouth Hospital in 2018. While the outcome may not have changed for Alex, if we had looked further into the concerns of his family his last days could have been different.

You can see the patient leaflet [here](#), and more information on our website. You may wish to incorporate this in your practice on wards.

If you have any questions or comments, please contact **Eloise Pope** and **Dan Richter**.

Vital statistics

January '23

- We saw **35,000+** patients in our outpatients department
- ...and an additional **7,463** virtually
- Carried out **over 1,000** day case procedures
- Supported the birth of more than **320** babies
- Attended to around **11,000** patients in our EDs
- Started more than **180** patients on their radiotherapy

Thank you

#TeamUHD

Transformation update

Planned and emergency care: see the benefits sooner

Our board of directors has ratified the proposed 'move in' date to establish the planned and emergency hospitals. This makes the most of the new facilities under construction as they become available - resulting in patient benefits from the planned/emergency split being delivered from spring 2025. You can read again the background to this proposal on page 14 of [December's edition of The Brief](#).

Poole theatres uncovered



The wraps are coming off our new state-of-the-art theatres complex at Poole Hospital.

Much of the equipment is now in place in the four table 'barn' theatre with cleaning and commissioning underway and the link corridor close to completion. The next step is allowing our theatre staff, anaesthetists and surgeons access, and finetuning the scheduling system, all ready for a move in date later in late spring/early summer. More information on the changes [here](#).

Take a theatre tour

Starting later this month we're offering you the chance to visit this exciting new development at Poole. Things to note:

- each session will last one hour
- you will need the consent of your line manager to attend
- some slots will be allocated specifically for key clinical teams to have a bespoke tour for their area

Positive progress on catering

Work is well underway in developing the enhanced catering arrangements at RBH. The atrium café refurbishment is progressing well with plans for a new layout, menu and fast-track lunch 'grab and go' counter when it reopens later this month.



As part of the masterplan for our new services there will be further building work going on in both the Oasis and Shelley restaurants over the next few months.

- **Now:** Building work starts on Central Processing Kitchen (CPK) in the Stour building.
- **February:** Atrium café reopens. Oasis closes for refurbishment ahead of reopening as RBH main staff restaurant.
- **April:** Oasis reopens. Shelley restaurant closes and is converted into temporary patient catering space.

You can find the latest timeline [here](#) and look out for more information on the changes and how they will affect you in the next few weeks. For any questions or comments please contact strategyandtransformation@uhd.nhs.uk.



Just email strategyandtransformation@uhd.nhs.uk by Friday 17 February if you're interested.



#YouMatter

Wellbeing Support for you



Did you know that 16-34 year olds are at a higher risk of feeling lonely compared to other age groups, but less likely to seek advice and support?

Feeling lonely is something that all of us can experience at any point in our lives, which can have negative impacts on our health and wellbeing. Sometimes it's the smallest actions that make the biggest difference to someone. There are simple steps you can take to lift someone out of loneliness this winter:

- giving a friend or family member a call
- inviting someone for a walk
- reaching out to those you haven't heard from for a cuppa
- you might find that reaching out to someone else could help you feel less lonely too

If you're feeling lonely this winter or worried about someone who might be, search 'Every Mind Matters'; for support and advice or go to www.nhs.uk/every-mind-matters/life-challenges/loneliness.

Don't waste your energy

Saving money on energy, particularly in these coldest months of the year, has never been more important. From the energy price guarantee, to the energy support bill scheme, it can be hard to keep up - do you know what's available to you?

Take a look at this [Salary Finance blog](#) to find out more, and discover energy freebies you may have missed. Don't have time to read the whole thing? Watch [this video](#) for a summary.



We are **caring** **one team** **listening to understand** **open and honest** **always improving** **inclusive**

Let's get social

Our social media workshops are the perfect opportunity to level up your social skills. Keep your eyes peeled on the Staff Bulletin for new dates coming soon. In the meantime, here's five quick wins to help give your social media channels a bit of a boost.

1 Work smarter, not harder

Reduce the quantity of your posts and ensure each square on your grid packs a punch by focusing on new quality carousel content instead. All the evidence points to Insta's algorithm-loving carousels, with them out-performing single-image posts on engagement.



2 Mix up your content

Seeing the same type of posts on your daily Facebook scroll can get a little boring, no matter how engaging the subject matter might be. But remember there's a whole stack of different options to present your content. From Facebook Lives to 360-degree photos, mix things up as and when you can.

3 Spread your reach

Hash tagging on Instagram is a no-brainer for your posts. Using trending (popular) hashtags can help your content come up organically in search results, giving you the potential to reach a new audience that wants to engage with your content.

4 Time to Tik Tok?

It might be the newest kid on the social media block, but Tik Tok packs a punch among younger people, with 18-24 year olds dominating 42% of its userbase. As a result, it comes with its own unique atmosphere and is an opportunity to connect with an entirely different audience.

5 Get involved in the conversation

Struggling for something to talk about? Twitter isn't just about pushing your own content, it's also about engaging with others. Whether it's someone that has mentioned you who wants a response, or a relevant organisation that's tweeted something of interest - the nature of Twitter encourages you to ReTweet or reply to the conversation. It's a two-way street, so explore and get social!

Top-performing posts last month

Local MP Tobias Ellwood visited RBH at the start of the year to see first-hand the impact of operational pressures on staff and the challenges UHD, and the wider NHS, is currently facing. He released a video on Twitter following the visit which has been viewed more than **47.6k times**.



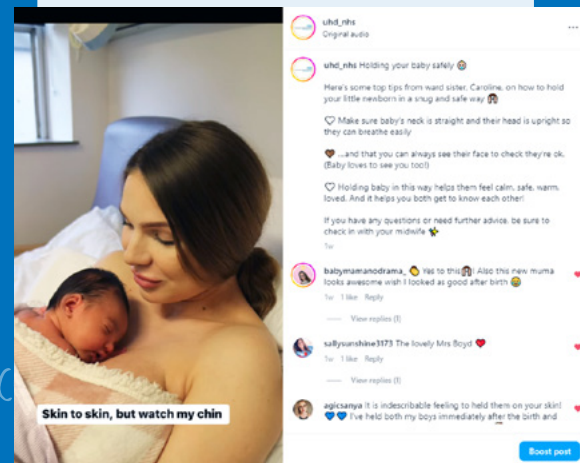
New year, new look!

We're pleased to be able to kick off 2023 with a refresh of our brand identity. The bold new roundel which you'll see as the 'face' of the trust across our social media channels incorporates the colours of our values along with the words 'Team UHD', the recognisable nickname for our workforce.



Maternity matters

A video of ward sister Caroline Boyd providing tips on how to safely hold a baby reached over 4k accounts on Facebook, was seen more than 3k times on Instagram, and was shared by Public Health Dorset, NHS Dorset, and the group 'Bump. Birth and Beyond - Bournemouth'. Thanks to all involved!



Have some good news you would like to share or thinking about joining social media? Email communications@uhd.nhs.uk

Ask me...

Join us at 12.30pm on Thursday 23 February for the February 'Ask Me'. The sessions are hosted by our acting chief medical officer, Dr Ruth Williamson, and deputy chief medical officer, Dr Matt Thomas. It's a great opportunity to ask questions, raise concerns or share your views about all things UHD with leaders from across our trust in a really informal setting. You can join the meeting [here](#) and pop any questions in advance to communications@uhd.nhs.uk.



SCHWARTZ ROUND

Wednesday 1 March
2-3pm

a safe space to share our experiences

lunch available from 1pm

CHRISTCHURCH in the Avon Gym

Dealing with unexpected loss



Open to all UHD staff

For more information about the Schwartz Rounds, please visit the Schwartz Round page on the intranet

Schwartz Round at Christchurch

The next face to face Schwartz Round will take place on Wednesday 1 March at 2pm in the Avon Gym at Christchurch Hospital. The theme is 'Dealing with unexpected loss'. This event is open to all staff and a light lunch will be available from 1pm. No need to book, just turn up.

The Schwartz Round steering group is also hosting a mini round on 7 February for the AMU team at RBH. If you're interested in finding out more about Schwartz Rounds and holding a mini round in your department, please visit the Schwartz Round page of the intranet.

Gym, swim and get active for less

BH Live Active is holding an NHS open evening on Wednesday 1 March at Littledown Centre. Enjoy free access to gym and swim facilities from 5.30-8pm and/or take part in one of their fantastic classes. BH Live Active is kindly offering a no sign up fee and pay nothing until 1 April promotion to all staff signing up to a direct debit membership on the night. That's a saving of £54! Find out more about the open evening and a free day guest pass offer [here](#).

Understanding Health Talk in the community

Brought to you by your Trust Governors

Ask, Share and Do What Matters



Understanding End of Life Care

Dr Amy Pharaoh, Consultant in Palliative Medicine, and the Forest Holme Hospice Team

23 February 2023 2.30pm

St Saviours Church, Colemore Road, Bournemouth BH7 6RZ

Doors open at 1.45pm for refreshments | Bus route X1, X2, 1a, 2
Disabled parking in the church grounds and free parking in the road

To book or for further information please email:
ftmembers@uhd.nhs.uk
or call 0300 019 8723





Ruth's reflections

with Dr Ruth Williamson

Well this week I'm pushing the boundaries of lateness for my blog, but the lovely Jane who edits *The Brief* has been kind enough to give me an extension on the extension.

The last couple of weeks have been tough, with strikes, operational pressures as well as moments of frustration and disappointment when things didn't quite go as planned. Last month I talked about the pressure and 'KFG-ing'.

So this month I'm going to share what I've learned about resilience i.e. the power to 'Keep Flippin' Going when the going gets tough. In my old life back in London I was lucky enough to go on a coaching for resilience course, much of which was spent working on our own resilience. The course was about 10 years ago but I still have a physical reminder of it - my resilience beads.

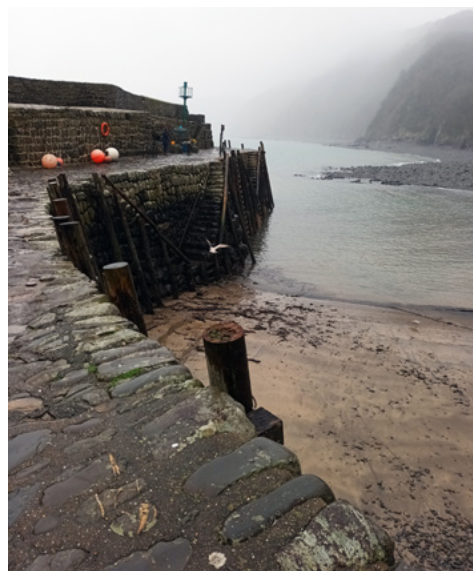
On the course we thought about the things we enjoyed doing and chose a letter to represent each of them. The premise

was that when you were challenged no matter how you felt you should do one or more of these as you would feel better afterwards.



- W:ater** - being in or near it
- J:oy and fun** - having a laugh
- E:xercise**
- L:ove**
- K:indness**
- O:utdoors**

So on Friday I left work and drove to Devon to meet my best friend for a weekend of all of the above.



I also remembered a TED talk on resilience which I listened to at the beginning of the pandemic when we weren't quite sure what was coming but it didn't look good. Lucy Hone is an expert on resilience, her TED talk is [here](#).

Spoiler alert if you are too busy to watch the talk - the three secrets are:

1. They get that 'stuff' happens - she uses a different S word
2. They are selective on their attention and focus on what they can change - she describes this as a vital, learnable skill
3. Finally they ask themselves, 'Is what I'm doing helping or harming me?'

Spending the weekend exploring the waterproof properties (limited) of my outdoor gear with my better equipped best buddy and laughing heartily at the results while huffing up and down the Devon coastal path was just what the doctor ordered.

What would you have on your beads?

Ruth

Network news

What's in a pronoun?



Alice Girling (she/her), our LGBTQ+ network co-lead, tells us more and highlights why it is so important for healthcare providers...

In the same way as calling a person by their chosen name, using someone's correct pronoun is a way to respect them and their individual identity. A common misconception with the use of pronouns is the difference between sex, gender and gender identity.

Sex refers to a person's biological status and is typically assigned at birth based on visible external anatomy. Sex is broadly categorised into 'male', 'female' or 'intersex'.

Gender is a complex social construct that varies according to society and generation. The important distinction is that external genitalia does not equal gender and gender identity. Pronouns are directly linked to gender identity and do not define a person's biological sex, but rather how that individual defines themselves.

The English language doesn't have a simple gender neutral pronoun, and so anyone who does not identify as male or female is limited to collective pronouns such as 'they' and 'them'. This leads us to the question of how we, as healthcare providers, can recognise and support our colleagues' and service users' gender identity and why it is important.

The use of a person's chosen pronoun in a healthcare setting gives them, whether a member of staff or a patient, the signal that it is a safe environment, and that their whole self is being seen. Mispronouncing or refusing to use preferred pronouns can leave the person feeling

misunderstood, invalidated and unaccepted. In turn, this can lead to our service users and colleagues not engaging with us, and not being fully open about their health needs.

So, while a pronoun may seem a superficial and small part of communication, it does in fact run much deeper. Using a person's pronoun is much simpler than you may think. You may notice staff displaying their pronouns on their ID badges or email signatures. Confirming someone's pronouns is as easy as asking their name - you can use the simple phrase 'what are your pronouns?' and then follow this with a conscious effort to use them correctly.

Asking our service users this question at the point of care is a habit we must all adopt in the same way as we have the 'hello my name is' campaign. This simple question has the power to transform a person's experience and create a compassionate, inclusive and visibly aware organisation.

Pronouns:

Male/Masculine:	He, him, his, himself
Female / Feminine:	She, her, hers, herself
Gender Neutral:	They, them, their, theirself, ze, hir, hirs, hirself

If you would like to find out more, read the LGBTQ+ Network's latest edition of [Pride Magazine](#), or check out their [intranet page](#).

We are **caring** **one team** **listening to understand** **open and honest** **always improving** **inclusive**

#PeriodPovertyProject

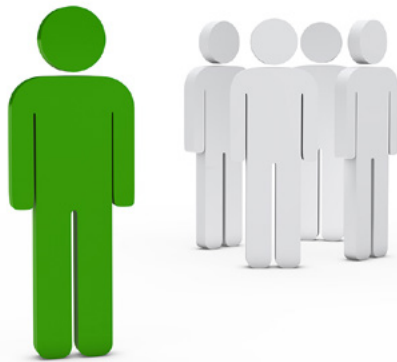
As people who menstruate, what do you think of the current sanitary disposal facilities? Some have reported existing sanitary waste disposal facilities at UHD are inadequate. The Women's Network,

with support from the LGBTQ+ Network, are running an initial audit in all staff facilities to identify which areas need improvement. Please scan the QR code or click [here](#) to give us your feedback.



Supporting you in your personal and leadership development

Alongside our in-house workshops and programmes, there are plenty of other resources available to support you in your personal and leadership development.



Our [Leadership and Management Intranet pages](#) provide guidance and information, including...

- Leading self and teams (for example delegation skills, communication, active listening, assertiveness, and FTSU training)
- South West Leadership Academy Learning Zone (bitesize modules to update your skills and improve your personal effectiveness)
- Coaching
- School for Change Agents (create change within the workplace)
- eLearning for Healthcare (including service improvement, innovation in the workplace, and performance management)

Remember, if you are unsure about what the next step is in your leadership and personal development, our [UHD Manager's PDP Toolkit](#) and our [UHD Values Behaviour Framework Self-Assessment Tool](#) will support you in reflecting on your strengths and areas of future focus.

Email:
organisational.development@uhd.nhs.uk
for further information or support.

**COMING
SOON**

Staff Survey manager's module

We have designed a new manager's module to support you when considering the results of the 2022 NHS National Staff Survey and help you think about driving improvements for your team or department.

The module has two core elements:

1. eLearning

This is made up of four elements - overview of the National Staff Survey, engaging your team, reviewing your results and action planning for improvement. A workbook will be used alongside the eLearning to provide you with further information and guidance, and support you in reflecting on your experiences and planning for the future.

2. Facilitated drop-in session

Following completion of the eLearning, you can attend a drop-in session with an OD colleague so you can ask questions, receive support with your action planning, and speak with fellow managers and team leads.

Both parts of this new manager's module will launch at the beginning of March, following publication of the survey results in February.

Please keep an eye out in the Staff Bulletin and on the intranet for further information. If you would like to register your interest for a drop-in session, please email organisational.development@uhd.nhs.uk.

“An invaluable source of information that supports safer clinical practice...”

Following a recent rebrand, ‘Medicines Information’ is now known as ‘**Medicines Advice Service**’.

The service is run by specialist pharmacists and pharmacy technicians and is open to all UHD healthcare professionals who require advice relating to medicines, whether for specific patients or more general information.

Using their wide range of specialist resources and wealth of personal knowledge, they can offer advice on any aspect of drug therapy. The team will also provide evaluated information to help support evidence-based practice and give practical advice on choice of drug therapy.

Examples of the types of enquiries they receive include:

- drug interactions
- administration - e.g. patients with swallowing difficulties, suitability of medicines for enteral tubes, compatibility of injectable medications
- safety of medications in pregnancy and breastfeeding
- adverse drug reactions and submitting Yellow Card reports to the MHRA
- herbal medicines/complementary therapy
- tablet/capsules identification
- drug stability, e.g. temperature excursions
- drug shortages
- vaccines and travel medicine

- choice of therapy in renal/liver impairment
- paediatric medicines

2022 in review...

- Number of enquiries received: **956**
- Number of Yellow Card reports submitted to MHRA: **6**

What do colleagues think?

“A very helpful service, based on up to date resources, which provides support in a timely manner when information needed about prescribing different drugs. The Medicines Advice Service is an invaluable source of information that supports a safer clinical practice...”

Dr Mihaela Florea,
rheumatology consultant

“I am a frequent user of medicines information! I really cannot practice as a NMP without the help and advice I receive from the fantastic team. You are always polite and always reply within a few days. This was particularly helpful during the early stages of the pandemic when our advice line went crazy with phone calls from very anxious patients...”

Heather Johnson,
clinical inflammatory bowel disease nurse specialist

The service is open

9am-5pm, Mondays to Fridays.

Simply:

email: medicinesadvice@uhd.nhs.uk

call: **ext. 4098**

mail: **Medicines Advice Service,
Pharmacy, RBH, post point C**

social: **follow the team on Twitter
[@UHD_MedsAdvice](https://twitter.com/UHD_MedsAdvice)**

Also check out their [intranet page](#) for links to reputable medicines, related websites and resources - why not add it to your bookmarks?





Let's talk about IT

Wanted! Directorate clinical digital leads...

Are you a senior clinician with an interest in all things digital? Would you like to work with clinical teams and informatics to champion digital opportunities that will make the most difference to patient care, clinical pathways and to clinicians' working lives?

We're looking for experienced clinical leaders from within UHD to work on our new Electronic Patient Record (EPR) plans and associated digital programmes for the next five years. During this time, we expect to replace our existing EPR, and we want to ensure that the next one we buy is shaped by the needs of UHD clinical staff.

You do not need to be an IT expert - being relatively inexperienced in

IT may be an advantage as you can objectively review how the solutions will work for all staff.

Positions are available for the following directorates:

- older people's medicine, neurosciences
- surgery
- trauma and orthopaedics
- head and neck
- private health
- child health
- cancer care
- clinical support
- pathology

You'll be joining your colleagues Carl Heffernan, Tracey Thompson, Sally Osborne and Bibs Aranda who have taken up the post for their directorates.

New EPR - the future is in your hands

We have had fantastic feedback so far on your requirements for our new EPR - please use this opportunity to tell us what features you would like to see.

You can provide your feedback in variety of ways. Email your thoughts to bdd815bd.poole.nhs.uk@emea.teams.ms or complete this [feedback form](#). Alternatively, request a meeting by emailing leeanne.dove@uhd.nhs.uk directly. We look forward to hearing from you.

eForm highlights anaesthetic review

The eForms team has been at it again, creating a new post-operative anaesthetic review form led by Sam Stevenson.

Sam explained: *"This form is a referral form to be used by anaesthetic doctors after an operation. They choose an anaesthetist and consultant on the form who then receives an email letting them know a post-operative anaesthetic form has been submitted and to review this form on ImageNow. They review the submitted form and press a button to send a copy to EPR and the form is complete."*

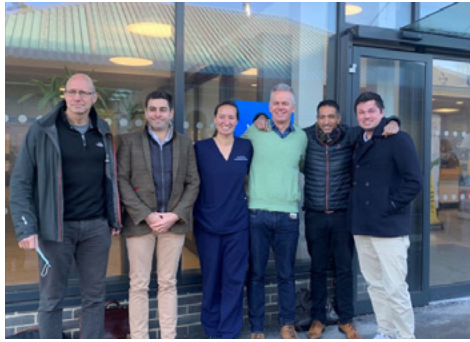
Dr Deepa Kallayiram, consultant anaesthetist, added: *"Brilliant job team! I'm very happy with the forms and look*

forward to this becoming one of the important QI projects very soon."

March for men's health services

Like to walk or race and want to help men's health projects? There's no easier way than signing up to our popular March for Men fundraising event. It's a fun 5 or 10k walk or race for everybody to get involved in and it's back on Saturday 25 March 2023.

We're calling as many people as possible of all ages, abilities and genders to sign up to directly support men's health projects at the Royal Bournemouth, Poole and Christchurch hospitals.



Starting from Bournemouth Pier Approach from 10am, every penny raised from every participant will go far beyond the finish line to supporting men across Dorset.



Consultant urologist surgeon, Kevin Turner with previous patient and charity supporter, Michael Marsh.

February's fundraising spotlights:

New FeNO machine for the thoracic department

Diana Brocklehurst, a patient in the thoracic department, has very kindly donated £4,500 to help fund a new FeNO machine (pictured below). The previous machine had reached the end of its life and Diana's donation will now help many other patients who will need to use this machine in the future.

Diana said: *"It gives me great pleasure to have been able to help the thoracic department continue their great work as I know how much the machine helps with a respiratory diagnosis."*



Durlston ward donations made for Poole patient

Family and friends of a patient who received care from staff on the Durlston Ward at Poole have raised an impressive £1,568 for our charity. In loving memory of Ken and to say thanks to everybody that looked after him, Ken's wife Sandy Hill gathered members of Andrewshayes Holiday Park together to hold a fun-packed night of raffles and tombolas. Thank you.



If you are interested in finding out more about how you can support the charity:

Follow @UHDCharity on  Facebook  Instagram and  Twitter Visit [UHDcharity.org](https://www.UHDcharity.org), or contact the office on 0300 019 4060/8449



Good news feed

Mastering their skills

Consultant radiographers, Sonia Hassan, Kerry-Ann Gordon, and Katharine Chadwick received their masters degree in breast imaging from Kingston University last week. They are a huge asset to Dorset breast screening as well as Team UHD, and provide an invaluable service to the people of Dorset. Huge congrats ladies! Proud of you all.



Meet Mark!

Who you are and your role in #TeamUHD

Mark Taylor, new head of emergency preparedness, resilience, and response.

Where did you work before?

I have come from Dorset County Hospital as head of emergency preparedness and prior to that, Frimley Health NHS Foundation Trust as emergency planning and business continuity manager.

What are your plans for UHD?

I'm looking forward to getting to know the trust and the staff here at UHD. I want to gain an understanding of what the trust has in place for business continuity incidents and work with teams to look for any areas for improvements. I also want to look at what the training needs are for emergency preparedness and how we can deliver this.

How can people reach you?

If anyone has any questions or concerns to raise, please feel free to email me directly at mark.taylor@uhd.nhs.uk I'll be getting out and about around the trust over the coming weeks and look forward to meeting people around the workplace!



Library love

It's all go, go, go at our Poole Hospital library! Walls have been knocked down and paint is going up ready for a fresh new look. Spaces for #TeamUHD to learn and rest is so important, and we can't wait to see it back open and running by the end of March.





REGISTERED NURSE DEGREE APPRENTICESHIP

The NHS in Dorset is offering full time
Registered Nurse Degree Apprenticeships.

Work towards a degree and qualify in adult nursing
or mental health nursing and get paid while you study.



 joinourdorset.nhs.uk/rnda

#Choose **NURSING**

The Brief



Wednesday 1 February - spread the word

Please use this sheet to communicate the key messages from *The Brief*. Return your form to Siobhan Harrington, CEO, or email it to communications@uhd.nhs.uk

Update	Shared?
<p>Industrial action: The RCN has announced further strike dates of 6 and 7 February. SWAST is also taking part in industrial action on 6 February. Further details on page 3.</p> <p>You said: Your comments from the January all staff briefing were invaluable. See what issues you raised, and our exec team's response, on page 4.</p> <p>Agyle replaces Symphony: We have a new patient admin and management system coming to our ED teams at the end of March which will help streamline care. Page 9.</p> <p>Patient First: Patient First is about equipping you to make a positive change. Read the lowdown on page 8 and come along to an informal session this month.</p> <p>Call 4 Concern: Launching today, this patient safety initiative acts as a safety net for our patients and relatives where they feel their condition is a concern. See page 10.</p> <p>Transformation: The earlier move in dates for our new clinical spaces have been approved by the board. You can also book a tour of the Poole theatres. See page 11.</p> <p>Staff Survey support: We have designed a new manager's module to support you when considering the results of the 2022 NHS National Staff Survey. See page 18.</p> <p>Wanted! Clinical digital leads: Are you a senior clinician with an interest in digital? See page 21 for how you could combine both to enhance patient care.</p> <p>Network news: Our networks continue to be very busy and a great source of support. Find out more about the importance of pronouns on page 17.</p> <p>And finally: See <i>The Brief</i> for upcoming events – including our next Schwartz Round, our good news feed, social media spotlight, Green UHD, a Charity round up and more!</p>	

Staff questions or comments (continue overleaf where necessary):

Department:

Signed:

Date: