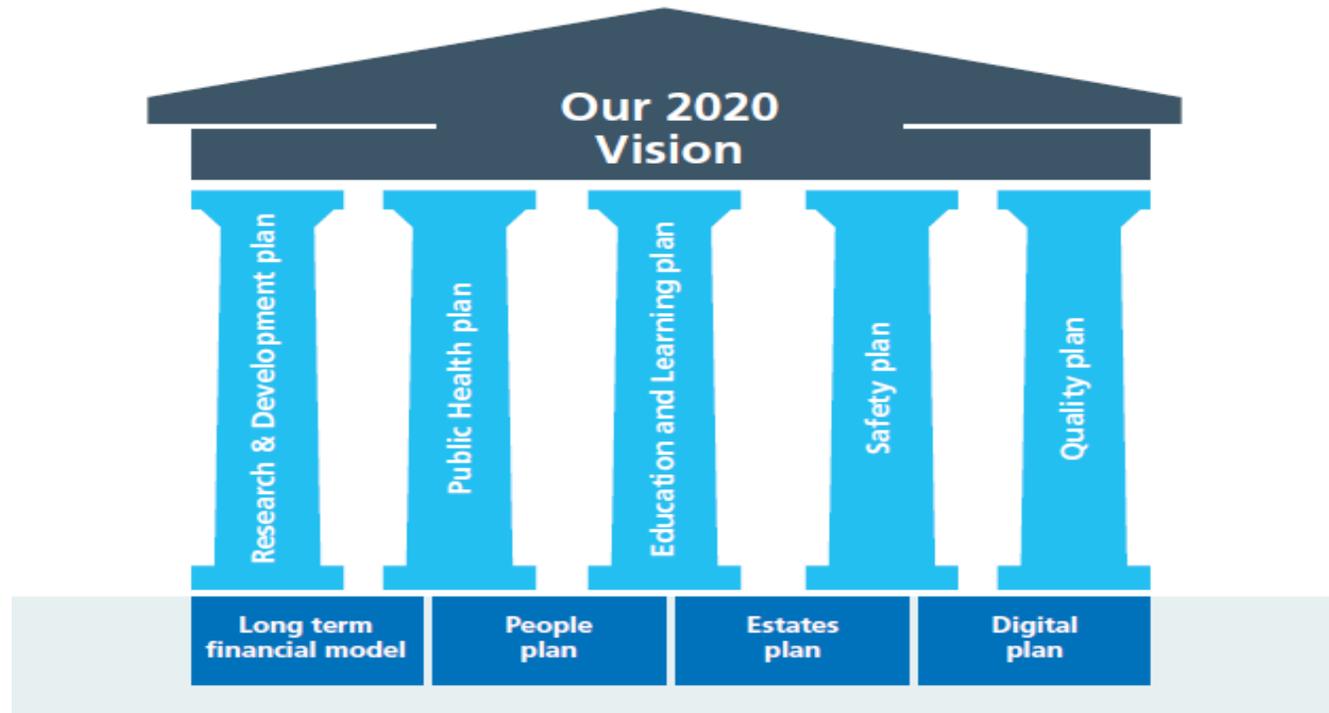


Welcome to SWB TeamTalk

WHILST MANAGING A PANDEMIC, KINDLY

Becoming renowned as the best integrated care system in the NHS...



TeamTalk Agenda

1.00pm: This month's priorities

1.15pm: Learning from Excellence - **Service Improvement – Speech and Language Therapy Service to Mainstream Schools**

1:30pm: Covid-19: Latest update

1:35pm: Your questions answered

Welcome to Richard Beeken

As announced yesterday Richard Beeken, CEO of Walsall Healthcare NHS Trust will join us as interim CEO from Monday 8 February.

This is to cover Toby's absence until he is able to fully resume his duties.

Richard has significant experience as a CEO and as a senior director in Trusts within the region.

He will be leading the Trust through the next stage of the Pandemic and ensure we focus on our priorities of MMUH and integrated care in our two places.



February priorities: Staff survey results – what our colleagues are saying

The national staff survey was distributed to all colleagues in Oct 2020. Our response rate was 38%, compared to 39% the previous year.

Results are very similar to responses in the 2019 survey although the responses to many of the questions score slightly lower in percentage terms to the previous year (between 1% and 4% lower).

Areas where scores have reduced from the previous year include:

- Enthusiastic about your job (-3%)
- Time passes quickly at work (-4%)
- Able to make suggested to improve work of team (-4%)
- Receiving respect from colleagues (-3%)
- Support from immediate manager (-4%)
- Support from manager in a personal crisis (-4%)
- Manager valuing work (-4%)
- Feeling pressure to come into work when unwell (-7%)
- Fairness with regard to career progression (-5%)

February priorities: Staff survey results – what our colleagues are saying

Notable improvements include:

- Adequate materials, supplies and equipment to do my work (+4%)
- Enough staff to allow people to do their job properly (+5%)
- Positive response to unrealistic time pressures (+4%)
- Satisfaction with the quality of care I give to patients / service users (+3%)
- I am able to deliver the care I aspire to (+2%)
- My organisation takes positive action on health and wellbeing (+6%)
- Reporting of bullying harassment (+4%)
- Care of patients is my organisation's top priority (+4%)

We are committed to listening to all colleagues about improving how you feel about your job and this organisation as a place to work. We will develop an improvement plan based on these results and ensure you are able to contribute to those improvements.

The report will be shared with colleagues when it is published next month and we will encourage teams to share the results and generate feedback through team meetings/QIHDs.

Progressing Midland Metropolitan University Hospital

Whilst COVID-19 has brought many industries across the world to a crashing halt, our flagship hospital continues steadily on its journey to completion in 2022, having made significant progress during 2020.

The MMUH programme is continuing to develop and the workstream leads have spent time in December and January developing the key elements that need to be completed over the next year. This includes:

- The acute care model programme documentation that will be completed by April 2021
- The workforce requirements, including understanding what changes need to be implemented to fit with new ways of working in the hospital and surrounding services
- The construction programme itself and the interdependencies around our retained estate, including the logistics required for moving from two sites to one
- The IT infrastructure within the hospital and the new technology we will be using there
- The communications and engagement programme so that all staff, stakeholders and the local population are fully aware of the new hospital and the different pathways that will be put in place
- Regeneration and our ambitions to be #morethanahospital

Despite the pressures of the Pandemic, MMUH remains our number one priority for the next two years so that we are fully prepared to provide services safely in the new environment and make the most of the opportunities it provides.

February priorities: Shaping the future of our estate with Engie

This is what's different and how this change will benefit you...

- **24/7 telephone helpdesk** - Can log calls via the phone any time, as well as using the online portal to add or track jobs - just like the IT portal.
- **Maintenance Standards** - Engie will work to SFG20 standards to maintain our assets which will be in line with nationally recognised methodology.
- **Lifecycle investment plan**- Alongside Engie, we will be developing long term capital investment plans to benefit the Trust and support our strategy going forward.
- **Digital Data** - Engie are developing a common data environment and digital model for the Trust. This means data and plans will be easy to find, update and store.
- **User Group** - Working with Engie, the contract performance team are forming an Engie user group from February to talk through the contract, processes and gain feedback. If you would like to be involved, please email suzanne.gray9@nhs.net.

February priorities: QI Poster competition winners

Our QIHD poster competition awards ceremony was held at the start of the month. Despite the pandemic, it is testament to all colleagues that we received 98 entries this year – our highest number in the three years that we have run this contest.



February priorities: QI Poster competition winners

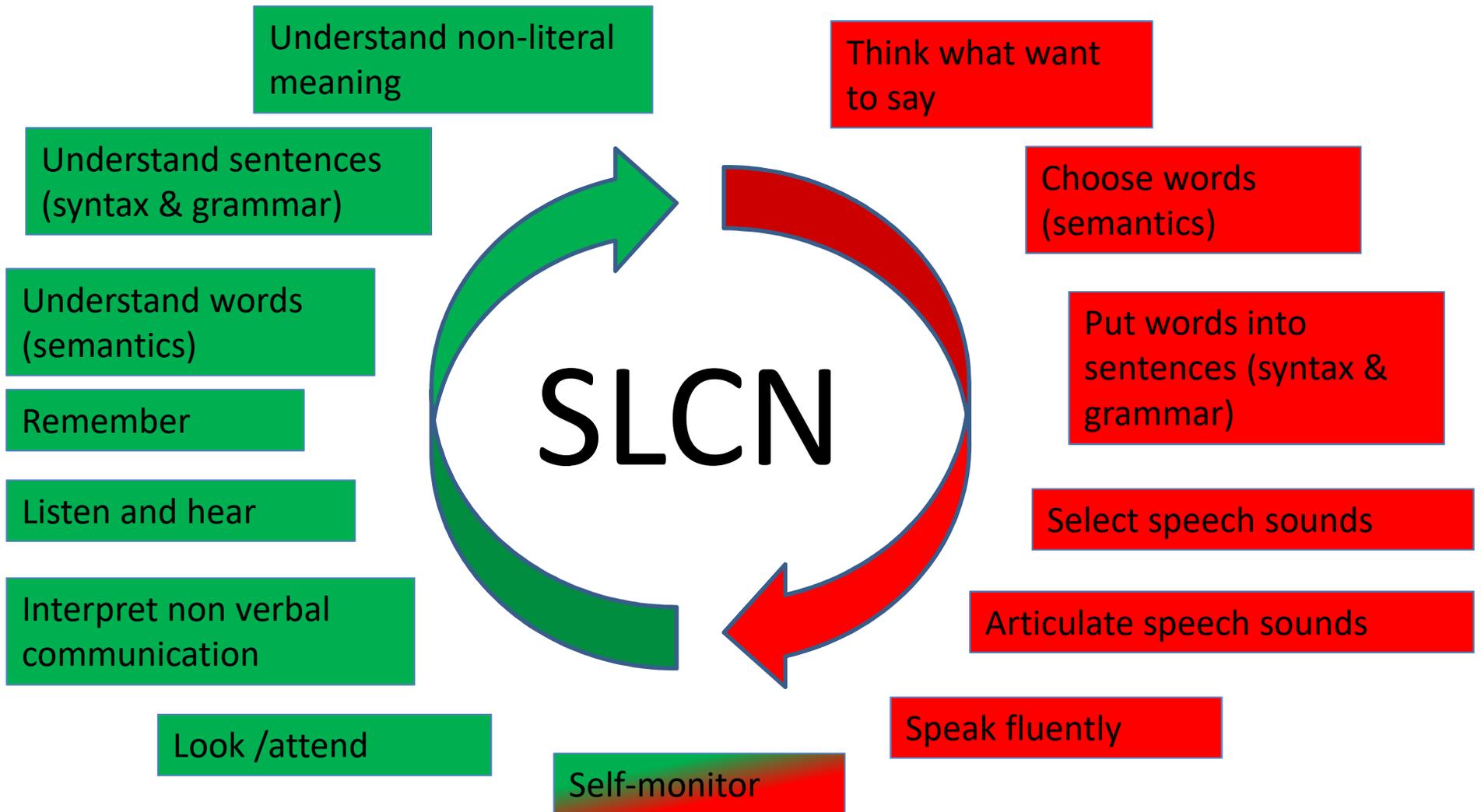
Eleven were shortlisted and there were four chosen winning entries:

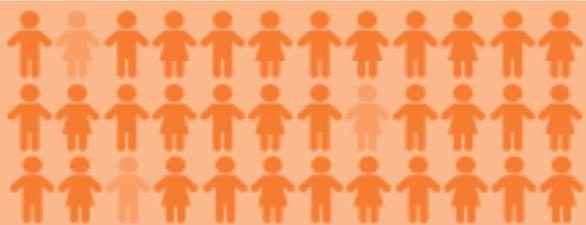
- 1st prize: Service Improvement – Speech and Language Therapy Service to Mainstream Schools, K Dunn, Speech and Language Therapist
- Highly Commended: Quality Improvement Project – Assessing patient perspective of pre-printed consent forms in vitreo-retinal surgery, Ophthalmology
- Highly Commended: An innovative surgery which offers women with cervical cancer the opportunity to preserve fertility, Pan-Bham Gynaecological Cancer Centre
- Popular vote winner with 238 votes received: A well-timed innovation in image-guided pre-operative breast localisation, L Tromans, Breast Imaging.

Congratulations to all of you. The winning entry receives a cheque for £5,000 with the others receiving £500 each. [All of the posters can be seen on Connect.](#)

Service Improvement – Speech and Language Therapy Service to Mainstream Schools

Katy Dunn





1.2 million children



Approximately 10% or 1.2 million children in the UK have long term, persistent SLCN

(based on Law et al, 2000)

50% of children in areas of social disadvantage start school with language delay

More than 60% of young people who are accessing youth justice services present with SLCN

vocabulary at age 5 a strong predictor of the qualifications achieved at school leaving age and beyond

Mainstream Primary Schools

- **Speech difficulties**
- **No functional communication**
- **Language and communication needs**



Service Review 2018

Caseload Audit

63%

Team Survey

5.9/10

3/5

Service Users



Evidence Base

- **Embedded**
- **Tiered Interventions**
- **Prioritisation Tool**



Specialist

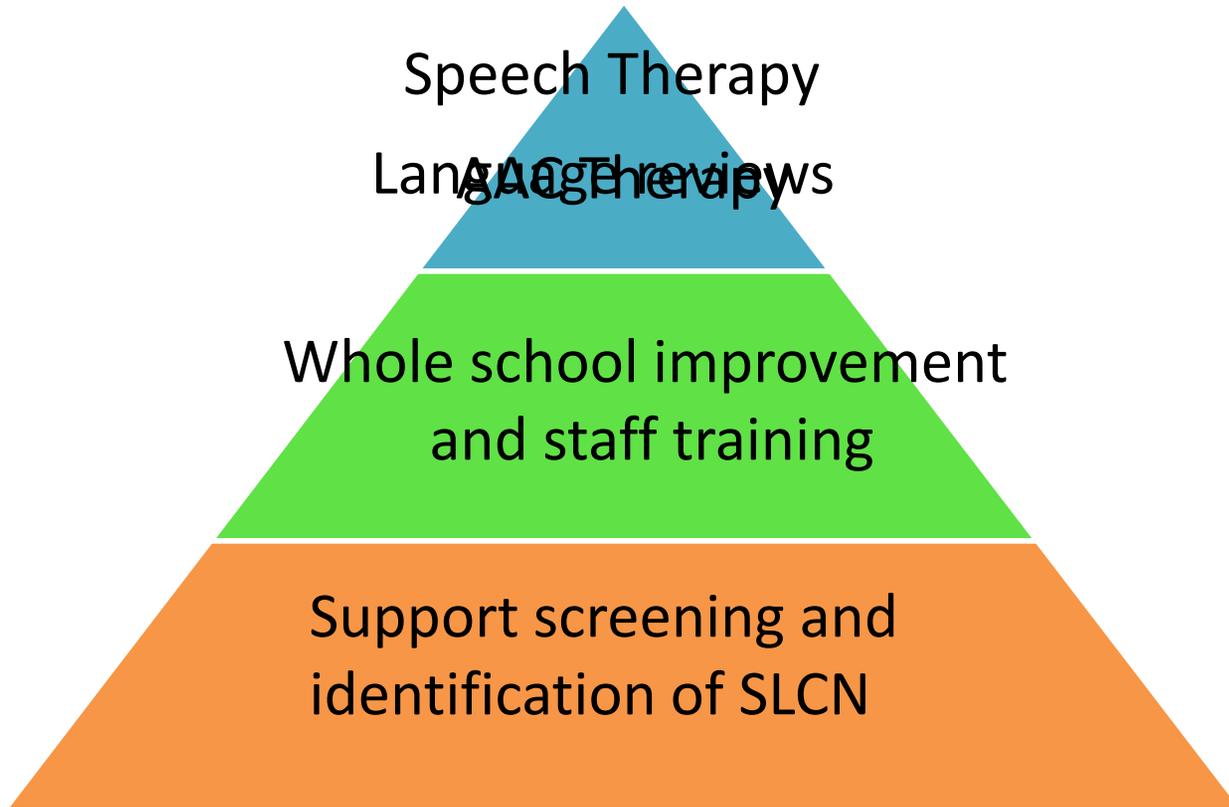
Speech Therapy
Language Therapy

Targeted

Whole school improvement
and staff training

Universal

Support screening and
identification of SLCN



Challenge



**Lots of anxiety
around change**



Successes



Training sessions

73/99

Online resources

Joint working party

“Thank you so much
for these resources.
Excellent!!” SENCo

“lots of practical resources,
strategies and games, definitely
found this worthwhile!” LSP

“an excellent starting
point from which
to develop the
mainstream service
further” SLT

AAC Therapy

- **Augmentative and alternative communication**
- **Our highest priority children**
- **Reviews → intensive therapy**
- **Significant improvement in care**



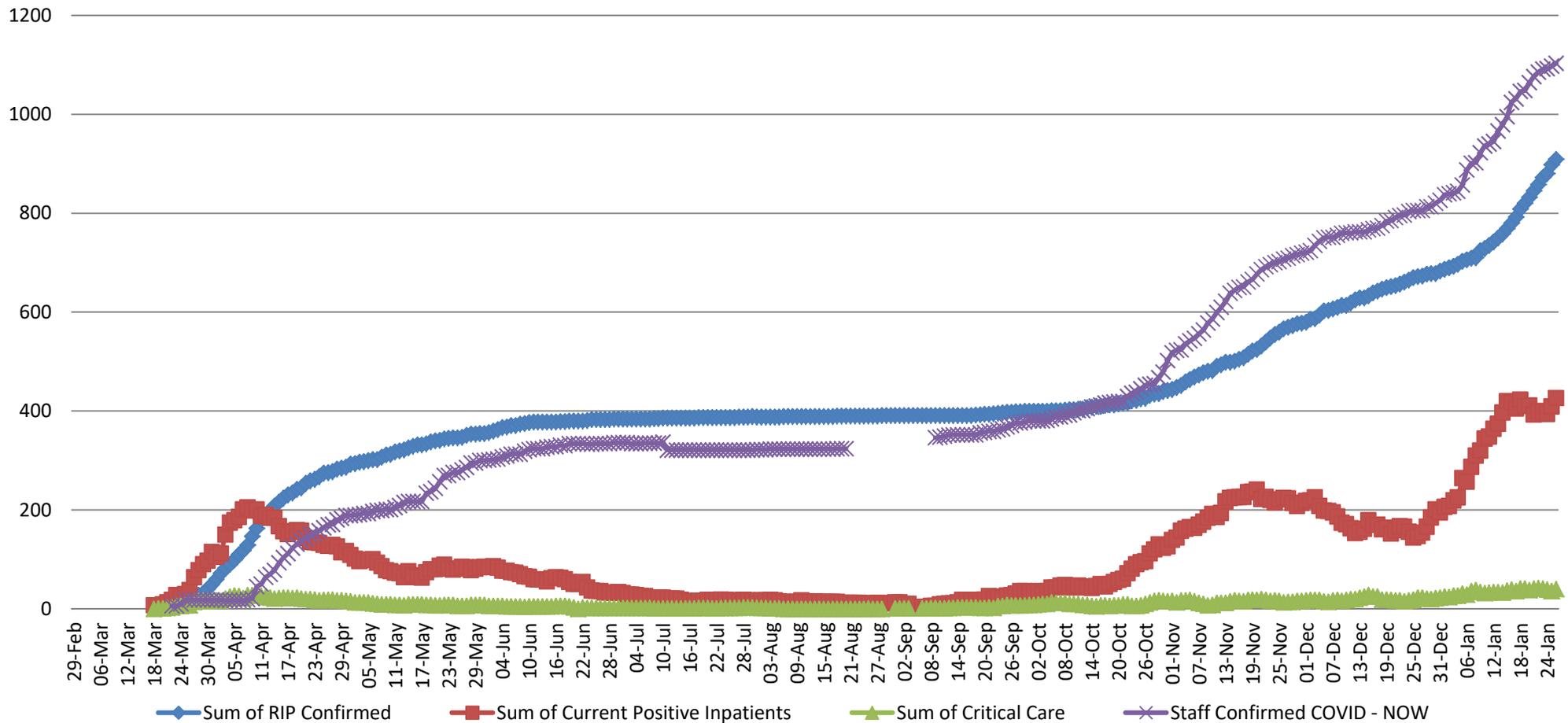
Questions

Thank you for your time!

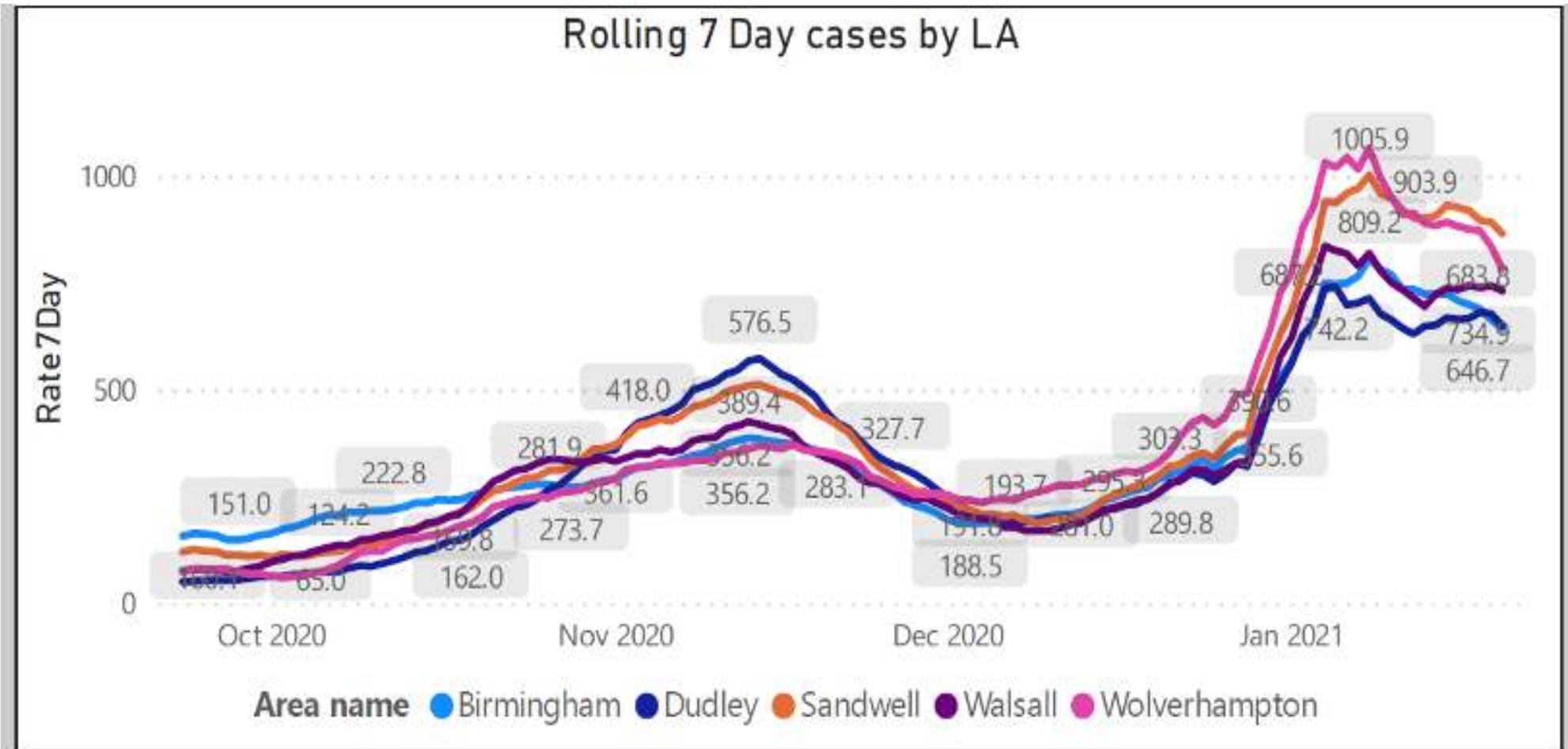
katydunn@nhs.net

COVID-19: Latest updates

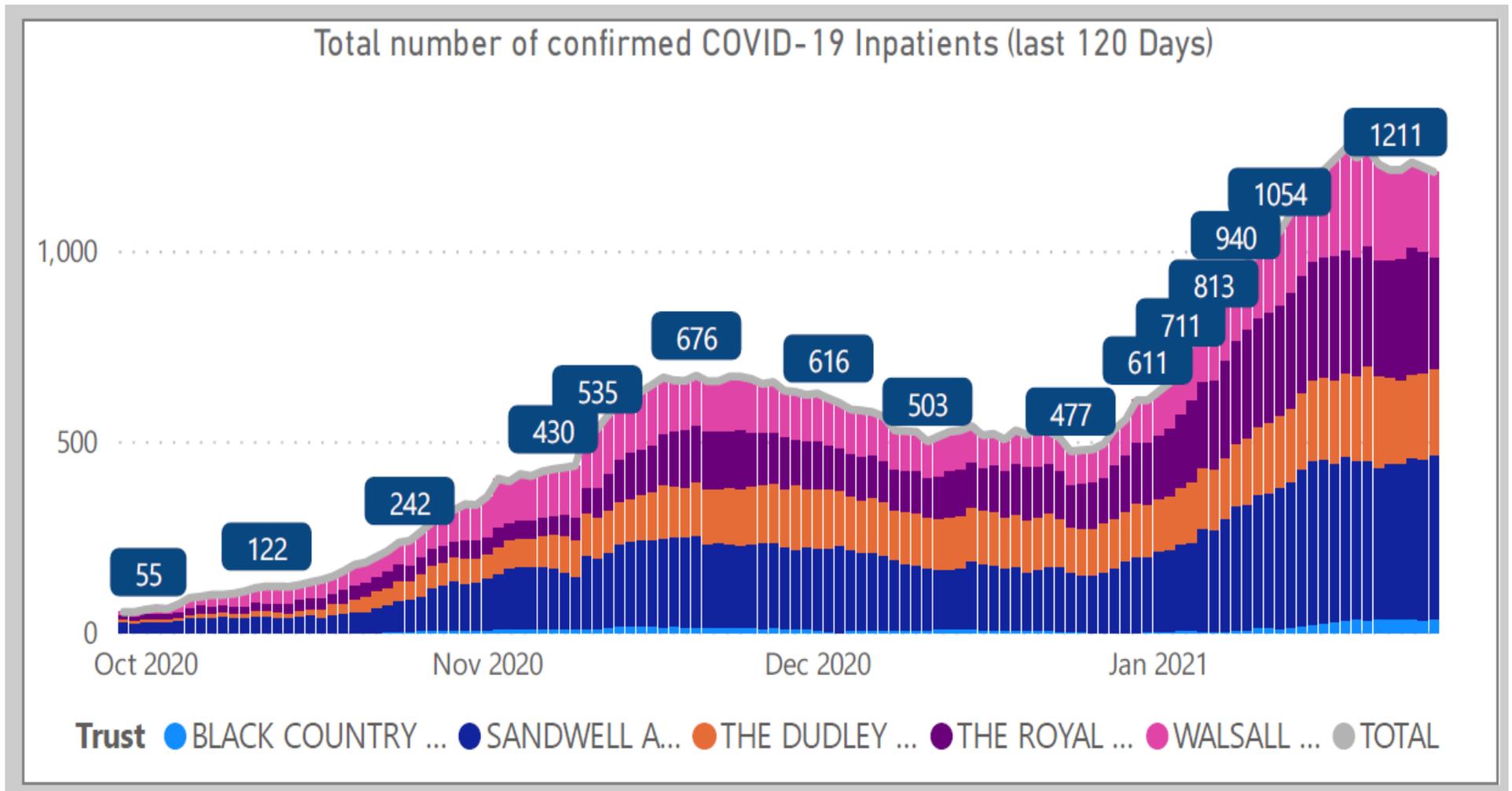
COVID-19: COVID Dashboard



COVID-19: COVID Dashboard



COVID-19: COVID Dashboard



COVID-19: PPE guidance revised

We have carried out a further risk assessment in relation to PPE usage in our clinical areas. This has taken into account the current high volume of infection rates in the community, the corresponding high number of COVID-19 admissions, some cases where patients on amber non-COVID wards have subsequently had a positive Covid PCR swab test after initial negative test, and the ventilation in our ward areas.

The outcome of that risk assessment has led to a decision to increase the required level of PPE in these inpatient environments for some staff. This is above and beyond the current national guidelines. This is under constant review and may well change if the regular review of the risk assessment indicates that the risk is lowered.

For all inpatient areas where there is direct patient contact (in red and amber wards), staff should wear:

- Silicone mask / FFP3 mask, visor, these can be sessional use – single use gloves and aprons. (please ensure you have been fit tested for an FFP3 mask before use)
- You should wear a fluid-resistant surgical face mask if you do not have direct patient contact. Non-direct patient contact includes walking on a ward area, pharmacists, clerical staff, estates and facilities staff.
- Disposable gloves / aprons should be worn for contact with patient / immediate environment. Porters who are transferring patients should wear FFP3 / silicone face mask when transferring patients to red / amber wards.

COVID-19: PPE guidance revised

If you are visiting a ward from another area, a minimum requirement when entering the unit will be to wear a fluid resistant surgical face mask.

Please note: staff must follow their individual risk assessment for PPE, occasionally this will recommend a higher level of protection depending on your individual assessment.

For all Outpatients and Community staff inclusive of Health Visitors/School Nurses/GP practices, for staff visiting care home facilities, patients and families homes, surgical face masks and visors should be worn as a minimum with disposable apron and gloves for direct patient care. Consideration should be given to the clinical intervention which is being undertaken, and a clinical risk assessment should be undertaken in relation to this prior to the contact to establish whether there is a requirement for a higher level of PPE e.g. patient with known respiratory condition who has a persistent cough (not COVID related) then to wear an FFP3 and a visor in the event that the contact is essential and cannot be delayed.

Porters and facilities staff on wards can continue to wear a surgical face mask unless in direct patient contact and they will then need to follow the guidelines for inpatient staff above.

If you have any questions please speak to your line managers or infection control who will advise you.

COVID-19: PPE guidance revised

The high and medium infection risk posters have been revised as below:

NHS
Sandwell and West Birmingham
NHS Trust

HIGH INFECTION RISK AREA

Please ensure you wear the correct PPE in this area. Within red areas, staff will wear different PPE depending on the type of contact they have with patients.

COVID-19 suspected or confirmed or not been screened for symptoms.

If no direct patient contact wear a fluid resistant surgical face mask

- FFP3/silicone mask for direct patient care
- Eye protection
- Disposable gloves
- Disposable gown for direct patient care

For close care of COVID-19 patients where rapid deterioration is likely and for single use AGP wear single use gown with full sleeves. Please remove the gown after the task is completed.

Hand washing

Remember to practice hand hygiene on entry to this area and between seeing patients and conducting tests.

NHS
Sandwell and West Birmingham
NHS Trust

MEDIUM RISK

Please ensure you wear the correct PPE in this area.

Lack of adherence to PPE may lead to high risk of cross transmission.

If no direct patient contact wear a fluid resistant surgical face mask

- FFP3/silicone mask for direct patient care
- Eye protection
- Disposable gloves
- Disposable apron

Hand washing

Remember to practice hand hygiene on entry to this area and between seeing patients and conducting tests.

February priorities: Cleaning for confidence

- Keeping our sites safe and clean for patients is a commitment that we all share. It is something that has never been more important. Evidence shows that a range of actions such as wearing PPE, keeping our distance in and out of work, hand hygiene as well as clean sites will help to significantly reduce the spread of infection.



February priorities: Cleaning for confidence

- We know that if PPE is not being worn correctly, social distancing is not maintained and cleaning best practice is not followed then it can contribute to outbreaks – which means we must go further to address this.
- Coronavirus outbreaks within healthcare settings have been seen across the country – something that anecdotal evidence and academic studies alike suggest are impacting the public's confidence when accessing the medical attention they need.
- A programme of e-learning – [‘Cleaning for Confidence’](#) – has been developed to support staff in ‘scrubbing up’ on their knowledge of good cleaning practice, as well as helping to reinforce other actions that help to stop the spread of infection.
- Colleagues are being asked to take the time to log in to the new training package that's available through [e Learning for Health](#).

COVID-19: COVID vaccine answering your questions

- Whilst 2020 was a year we would all like to forget we managed to start 2021 the right way with the launch of our vaccination hubs at Sandwell and City Hospitals. Each one, working hard to stream as many patients, colleagues and members of the public as possible to ensure we're able to tackle this devastating virus.
- The rollout of the vaccine has been a tremendous effort, from those colleagues in pharmacy who have handled the fragile Pfizer vaccine with the care it deserves, colleagues in the contact centre who have spent endless hours contacting patients and colleagues, to the vaccinators who are entrusted with the final task of dispensing the vaccine.
- Whilst we have done incredibly well to launch our vaccination programme, it's clear that there is a lot of misinformation and misunderstanding surrounding the vaccination. To clear up the confusion, we recently held a staff briefing to answer some of your burning questions around how the vaccine was developed, trialled and delivered. We also discussed how we plan to ensure that every one of our patients and colleagues has the opportunity to be vaccinated.

COVID-19: COVID vaccine answering your questions

Questions raised:

I suffer with allergies, should I have the vaccine?

People with history of a **severe** (anaphylactoid) allergy to **any of the ingredients** within the vaccine should not be vaccinated currently, nor should those with severe allergy to multiple drugs or where there is a history of anaphylaxis where the cause is unknown. If you are unsure of your risk please contact Occupational Health for advice.

Is the vaccine actually safe?

Yes. The MHRA, the official UK regulator authorising licensed use of medicines and vaccines by healthcare professionals, has reviewed these vaccines as safe and highly effective. As with any medicine, vaccines are highly regulated products. There are checks at every stage in the testing, development and manufacturing process, and continued monitoring once it has been authorised and is being used in the wider population.

Now I have had my vaccine do I still need to wear a face covering or surgical mask?

Yes you certainly do! Though you may be protected against the harmful effects of COVID-19 having had your vaccine you could still be a carrier and unknowingly pass it on to patients, a member of your family, one of your friends or even a fellow co-worker, so with this in mind please continue to wear a mask.

COVID-19: COVID vaccine answering your questions

Questions raised:

Now I have had my vaccine do I still need to follow social distancing rules?

Yes you definitely should! Though you may be protected against the harmful effects of COVID-19 having had your vaccine you could still be a carrier and unknowingly pass it on to a member of your family, one of your friends or even a fellow co-worker so with this in mind please continue to wear a mask.

Why the change from a second dose at 3 weeks to 12 weeks?

As you can see from the numbers of patients in hospital we are in a very challenging situation, with more patients than ever before needing hospital care and intensive care. The country needs to get as many people as possibly in the high risk groups vaccinated quickly. There is good protection after the first dose so that is the priority. We appreciate that those of you who have already had the first dose will be disappointed but your appointments will be changed to within 12 weeks. We are aiming for the first four groups in the JCVI priority list to be vaccinated by mid-February. This includes all health and social care staff who have contact with patients.

For those who didn't manage to make the briefing, you can find a [link to it below](#), plus a roundup of the [frequently asked questions and our responses](#).

<https://youtu.be/PmiGqPjsQaE>

COVID-19: Vaccinations now open to all colleagues

A testament to the hard work and determination of our vaccination team, we are now pleased to be able to offer the COVID-19 vaccination to all staff from the Sandwell hospital hub, regardless of role or risk assessed criteria.

Email invitations have now gone out to all remaining colleagues who were yet to receive their **first dose** of the vaccine, but if you haven't spotted the message or you have mislaid it, you can book your vaccination by contacting the booking team on **0121 507 4112** to book into an available slot.



Please remember however that we are currently only offering the first dose of the vaccine. At your first vaccine appointment you will be booked for your second dose 12 weeks after the first dose has been administered, a time interval that there is no flexibility on.

This is following national guidelines and is mirrored in all other Trusts, GPs and vaccination centres. The first dose offers good levels of protection and we can reduce transmission significantly in the community by giving more people the first dose and the second dose after 12 weeks.

COVID-19: Grief is not a taboo subject

Grief is absolutely not a taboo subject in our Trust, we are well aware that colleagues are working in areas where there are incredibly unwell patients who we work hard to stabilise and support, and the grief that colleagues can experience when you lose a patient can be difficult to overcome. However there is help available. Alongside the national resources shared in the COVID bulletin, remember you can always contact occupational health and you can always talk to your manager or colleagues.

Contact Occupational Health on 0121 507 3306

Confidential support by phone

General: 0800 06 96 222 (7am-11pm)

Bereavement: 0300 303 4434 (8am-8pm)

Support by text message

Text 'FRONTLINE' to 85258 – 24 hours a day, seven days a week



Join the Encounters with Grief Grand Round 4 February

The palliative care team are hosting a Grand Round on Thursday 4 February 12.30 – 1.30pm titled Encounters with Grief. Guest speaker bereavement specialist Jane Harris has an international reputation for her expertise. She is also highly interested in wellbeing and the overlap between grief and wellbeing. She will be joined by Sue Edwards, Trust Bereavement Lead and Anna Lock, Palliative Medicine Consultant.

To join the event [follow this link](#) Password GRFEB, Audio conference: +44-20-3478-5289

Access code: 174 011 1115

COVID-19: Keeping well throughout COVID

If you haven't already discovered them, across our Trust we have a number of rest areas that you can use to relax and unwind during your shift.

[This list of rest areas on Connect](#) is not definitive, so please do speak to your line manager if you don't know where your nearest rest area is.



You may also consider taking advantage of our energy pods to help you recharge. We have three state of the art energy pods available in AMU at City, at Sandwell and maternity at City.

The groups are also currently collating ideas regarding what you would like to see to aid your wellbeing. We have already had requests for items such as radios and massagers. If you feel that there is something that could really help the wellbeing of your team then please email swbh.wellbeing@nhs.net and the team will consider your request.

Temporary closure of staff gym facilities

Due to the continued high case rate in the community and the lockdown restrictions we have taken the difficult decision to temporarily close our gym facilities. This is to avoid any potential transmission. The changing rooms and shower areas will remain open. We realise that exercising is vital for our health and wellbeing so would encourage you to access online classes or apps to maintain your health and fitness or if you want to start a fitness programme.

The NHS publishes a list of apps that are useful for health and wellbeing and can be [accessed here](#).

COVID-19: Wellbeing – It's all about you

The organisation offers a range of services to help you manage your wellbeing

- **Stress risk assessments and mental wellbeing assessments** - Completing a simple confidential assessment can provide the opportunity to explore how you feel and how you feel about your working life. Simple to complete and supported by the wellbeing hub to guide you to accessing the wide range of feel good support. Look out for your email invite or complete now through the wellbeing pages on Connect.
- **Our NHS People** – This is a website providing support to NHS colleagues helping them to manage their own health and wellbeing whilst looking after others. The website has a range of useful tips and guidance www.people.nhs.uk
- **REACT** – The REACT process is a simple way that colleagues can look out for one another at work. Across the organisation staff members have had approximately four hours of training in how to have a wellbeing conversation with any colleague who wishes to have one. Although REACT isn't a form of therapy in itself, many people find a REACT conversation very helpful as it allows them to talk out loud about how their mental wellbeing is affecting their life and form a plan to try and improve things.
- **Wellbeing Sanctuary** - The sanctuary gives colleagues a chance to de-stress and relax in a confidential safe place. Bookings are available for a range of therapies including massage and meditation. Call 0121 507 5886.
- **Counselling** - Occupational health are able to arrange counselling . Please call them on extension 3306.

Further information about all these services is available on Connect.

Your questions answered