

## CoMET Team Well-being Guideline

This guideline is for use by healthcare staff, at CoMET undertaking critical care retrieval, transport and stabilization of children, and young adults.

CoMET is a Paediatric Critical Care Transport service and is hosted by the University Hospitals of Leicester NHS trust working in partnership with the Nottingham University Hospitals NHS Trust.

The guidance supports decision making by individual healthcare professionals and to make decisions in the best interest of the individual patient.

This guideline represents the view of CoMET, and is produced to be used mainly by healthcare staff working for CoMET, although, professionals, working in similar field will find it useful for easy reference at the bedside.

We are grateful to the many existing paediatric critical care transport services, whose advice and current guidelines have been referred to for preparing this document. Thank You.

<b>Executive Lead/ Medical Director:</b>	Andrew Furlong (LRI, UHL – <a href="mailto:andrew.furlong@uhl-tr.nhs.uk">andrew.furlong@uhl-tr.nhs.uk</a> )
<b>Author:</b>	Vanessa Austin – Nurse, CoMET <a href="mailto:Vanessa.austin@nuh.nhs.uk">Vanessa.austin@nuh.nhs.uk</a> Hazel Perrett – Nurse, CoMET <a href="mailto:Hazel.perrett@uhl-tr.nhs.uk">Hazel.perrett@uhl-tr.nhs.uk</a>
<b>Guideline Lead:</b>	Zoha Mohammad – Consultant, CoMET <a href="mailto:Mohammad.zoha@uhl-tr.nhs.uk">Mohammad.zoha@uhl-tr.nhs.uk</a>
<b>Clinical Lead:-</b>	Georgina Harlow – CoMET Clinical Lead <a href="mailto:Georgina.harlow@nuh.nhs.uk">Georgina.harlow@nuh.nhs.uk</a> <a href="mailto:Georgina.harlow@uhl-tr.nhs.uk">Georgina.harlow@uhl-tr.nhs.uk</a>
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### Education and Training

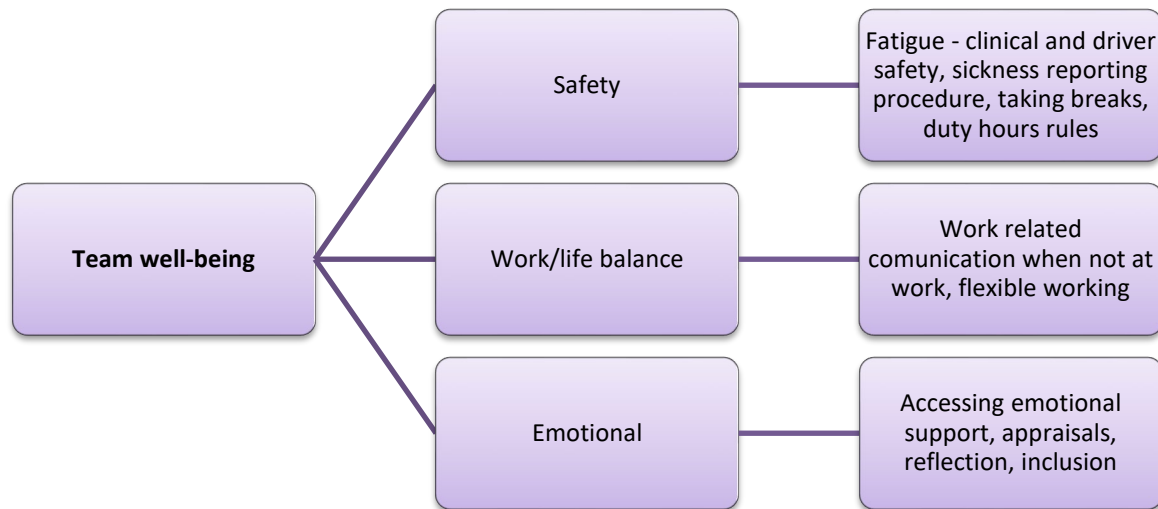
1. Annual Transport team update training days
2. Workshops delivered in Regional Transport Study days/ Outreach

### Monitoring Compliance

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
Incident reporting	Review related Datix	Abi Hill – Lead Transport Nurse <a href="mailto:abi.hill@uhl-tr.nhs.uk">abi.hill@uhl-tr.nhs.uk</a>	Monthly	CoMET Lead Governance Meeting
Documentation Compliance	Documentation Audit	Abi Hill – Lead Transport Nurse <a href="mailto:abi.hill@uhl-tr.nhs.uk">abi.hill@uhl-tr.nhs.uk</a>	3 Monthly	CoMET Lead Governance Meeting

## **CoMET Team Well-being Guideline**

### **1. Executive summary of guideline**



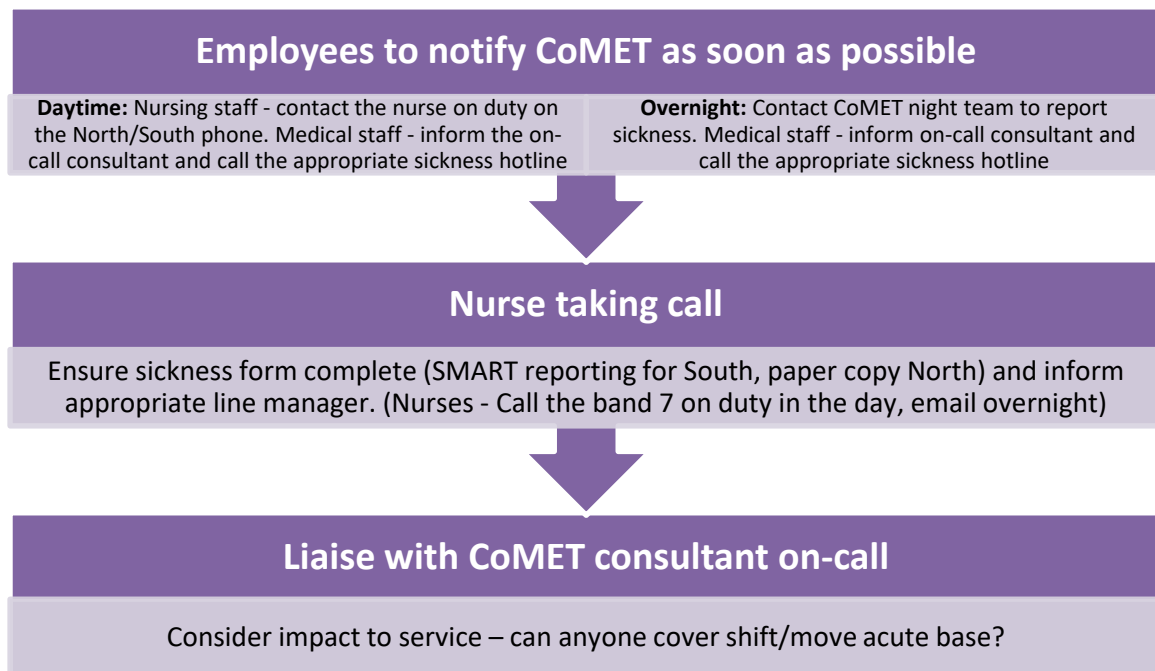
### **2. Introduction**

CoMET recognises that investing in staff health and wellbeing not only provides benefits for the organisation but, also for the patients in our care. Working in Paediatric Intensive Care transport can be challenging, with the risk of fatigue due to overrunning shifts, stress due to working in unfamiliar environments and moral distress.[1] CoMET has written this guideline to minimise these risks where possible, as well as, advise its team members how to manage most well-being issues.

### **3. Sickness/ absence reporting**

Please refer to Well-being and Attendance Management Policy and Procedure (NUH) [2] and UHL Sickness Absence Management Policy [3] for detailed information on how to manage sickness and absence.

### 3.1. CoMET sickness notification procedure



**North 2:** 07950839022, **South 2:** 07950839225

## 4. Work/ life balance

### 4.1 Work Pattern/Leave

Please refer to Work/Life Balance Policy and Procedure (NUH) [4] and Flexible Working Policy and Procedure (UHL) [5] for further guidance on employee leave and request to change working pattern. Managers will evaluate requests for leave fairly and without discrimination using the relevant trust policy and procedure for guidance to achieve a consistent approach.

### 4.2 Communication

CoMET acknowledges the importance of its employees having undisturbed downtime away from work. Although CoMET uses WhatsApp as a means of communication to the whole team, the strict rules below are to be followed:

- Work related phone calls to team members **on days off**, to be kept to a minimum and **avoided where possible**.
- Work related messaging will be kept within office hours (8am – 6pm, Mon-Fri).
- Messaging and calls should **only** be made outside of these hours in extreme circumstances (i.e. no nurse on the next shift)
- **Do not** use the group chat to have long conversations.

## 5. Team safety

## 5.1 Duty hours limitations

All members of the transport team are required to have **11 hours** rest between shifts. [6] The team must therefore start later if they finish the first shift later than planned. For this reason, **teams should be relieved where possible.**

## 5.2 Fatigue

Fatigue causes a reduction in cognitive function and can be a danger to our patients, as well as, ourselves [7]. The following link has some useful information:

[https://pccsociety.uk/wp-content/uploads/2019/10/Fatigue-Sheets\\_PICS.pdf](https://pccsociety.uk/wp-content/uploads/2019/10/Fatigue-Sheets_PICS.pdf)

### 5.2.1 Fatigued Drivers

Driving whilst tired can be extremely dangerous. Sleepiness increases reaction time and reduces vigilance, alertness and concentration. It is thought around 20% of road accidents are related to driver fatigue. [8]

**Ensure the ambulance crew are safe to drive.**

- Encourage the ambulance crew to take breaks whilst the clinical team are in attendance with the patient.
- When deploying the retrieval team, ambulance finish times should be taken into account.
- Crews should relieve each other where possible.
- Crews should only be deployed for **acute** referrals within the last hour of their shift.
- When crews are used within the last hour, this should be to deliver the team. The crew should then be released to finish their shift.

**\*It is the responsibility of the relieving team to ensure the other team are safe to go straight home. Look after each other. \***

**Use the fatigue tool as a guide:**

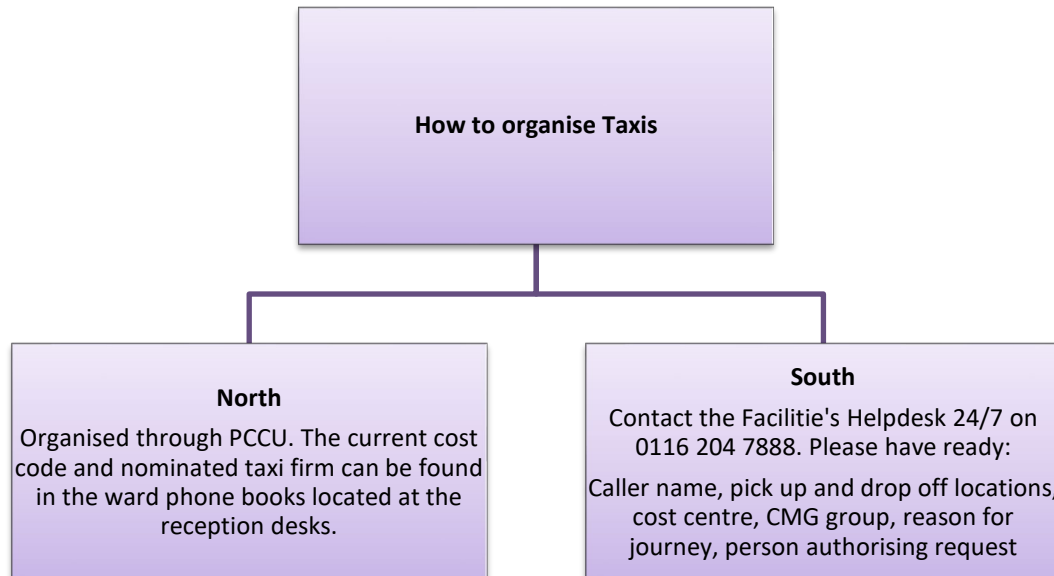
- Do they feel SLEEPY?
- Has it been a LONG shift?
- Are they relying on caffeine or ENERGY drinks to stay awake?
- Do they need a POWER nap? Do they look TIRED?
- Are they finding it hard to concentrate?

**If they answer YES to any of the questions, TAKE ACTION. [7]**

Find them somewhere to take a nap before driving or organise another way of them getting home, such as, via taxi.

### 5.2.2. Organising a RRV/Taxi

If another means of getting home is required for example; due to fatigue, tiredness or late finish, consider the use of the RRV if available. If this is unavailable, a taxi may be authorised. Please see below flowchart for instructions.



### 5.2.3. On call rooms

On call rooms can be requested in the following ways:

**North** - Request the use of the PCCU on call room, using the booking and information diary, which is located at the PCCU reception desk. Medical staff to inform CoMET Consultant who will support with arrangements. If on-call room unavailable, alternative options will be sought.

**South** – Medical staff: contact the duty manager to request a room. Nursing & St John: contact the site matron to request a room - the earlier the better!

### 5.3. Overtime

Individuals are responsible for ensuring they do not work too many extra hours. **Employees are unable to undertake any extra shifts or overtime for 14 days after a period of sickness absence.**

## 6. New starters

There is evidence that new staff members are likely to gain some benefit from being made aware of the realities of the work they are being asked to do and the associated psychological challenges. [9]. CoMET has a detailed induction process for its new team members. They will be given information on the psychological challenges they may face and where to get help.

## 7. Inclusive team

CoMET values the unique contributions that all the team bring to the organisation in terms of background, lived experience, knowledge and skills. New starters will receive Equality, Diversity and Inclusion training on their induction and existing staff will receive regular updates as per each host trusts requirements.

**CoMET promotes inclusion by:**

- Providing regular training sessions for all team members.
- Regular and varied social events to include all team members.
- All team members invited to attend meetings such as M&M, CPM, teaching and monthly team meetings.

## **8. Stress management/ psychological support**

**Please refer to UHL Stress Management Policy [10] for information surrounding the management of stress in the workplace.**

### **8.1. Feedback/appreciation**

Receiving appreciation from others can increase a person's positive feelings and improve their self-esteem as well as helping their physical health and wellness. Appreciation also increases morale and motivation [11]. CoMET recognises the importance of its team members receiving appreciation and positive feedback. All referral centre surveys and family feedback will be emailed to all team members by the assigned feedback nurse.

### **8.2. Appraisals**

CoMET will ensure all employees have at least one opportunity a year to discuss their work, training, job role, objectives etc. with their line manager. This can also be an opportunity for reflection.

### **8.3. Education development meetings**

CoMET will ensure all employees are allocated an educational supervisor, who will organise annual educational development meetings to discuss the previous year's achievements and opportunities for the following year. These will be in line with appraisals and will help create an action plan that can be taken away if necessary.

### **8.4. Reflection**

There is very good evidence that fostering cohesion between staff is associated with good mental Health [9].

- Use the evaluation section on the transport log to aid reflection.
- Attend Morbidity and Mortality meetings.
- Chat to each other or one of the senior team.

## 8.5. UHL Staff Support

There is a range of services available to those employed by UHL providing health and wellbeing advice and support. These may be accessed by staff through INsite by searching “Health and Wellbeing”, or by following the links below:

- [INsite - Health and Wellbeing \(xuhl-tr.nhs.uk\)](https://insite-tr.nhs.uk/)
- [UHL Support Information Booklet DIGITAL 12213584.pdf](#)
- [INsite - Wellbeing at Work \(xuhl-tr.nhs.uk\)](https://insite-tr.nhs.uk/)

## 8.6. Other useful links

The following links can also be used to get emotional support or provide tips on how to help others:

- <https://www.mind.org.uk/news-campaigns/campaigns/blue-light-programme/taking-care-of-you-ed-guide/>
- <https://bluelighttogether.org.uk/>
- <https://www.nhs.uk/mental-health/self-help/tips-and-support/how-to-be-happier/>
- <https://www.nuh.nhs.uk/your-wellbeing>

Helplines:

- Nottingham University Hospitals staff helpline: 0800 783 2808
- Samaritans – call free on 116123 to talk about anything that’s troubling you.

## 9. References

1. Paediatric Critical Care Society. *Wellbeing Group*. Available from: <https://pccsociety.uk/wellbeing-group/> [Accessed: 15<sup>th</sup> March 2022].
2. Stones. P. (2017) *Well-being and Attendance Management Policy*. Nottingham University Hospitals NHS Trust, HR/H&A/002.
3. UHL Sickness Absence Management Policy (2020) UHL. <http://insitetogether.xuhl-tr.nhs.uk/pag/pagdocuments/Sickness%20Absence%20Management%20UHL%20Policy.pdf>
4. Hunt. D. (2021) *Work/Life Balance Policy and Procedure*. Nottingham University Hospitals NHS Trust. HR/WLB/001.
5. Flexible Working Policy and Procedure (2022) UHL. <http://insitetogether.xuhl-tr.nhs.uk/pag/pagdocuments/Flexible%20Working%20Policy.pdf>
6. Crown copyright. *Rest breaks at work*. Available from: <https://www.gov.uk/rest-breaks-work> [Accessed: 7<sup>th</sup> March 2022].
7. Paediatric Critical Care Society. *Fatigue: The Facts*. Available from: [https://pccsociety.uk/wp-content/uploads/2019/10/Fatigue-Sheets\\_PICS.pdf](https://pccsociety.uk/wp-content/uploads/2019/10/Fatigue-Sheets_PICS.pdf) [Accessed: 7<sup>th</sup> March 2022].

8. The Royal Society for the Prevention of Accidents. (2020) *Road Safety Factsheet*. Available from: <https://www.rosopa.com/media/documents/road-safety/driver-fatigue-factsheet.pdf> [Accessed: 29th March 2022].
9. Greenburg. N, Highfield. J, Inwald. D (2021) *PCCS Mental Health Support Best Practice Framework*. Available from: <https://pccsociety.uk/wp-content/uploads/2021/07/Ratified-PCCS-mental-health-support-Final.pdf> [Accessed: 7th March 2022].
10. Stress Management Policy and Procedure (2019) *UHL*. Available from: <http://insitetogether.xuhl-tr.nhs.uk/pag/pagdocuments/Stress%20Management%20UHL%20Policy.pdf>
11. Indeed (2021) *A Guide to Showing Appreciation at Work: Benefits, Examples and Tips*. Available from: <https://www.indeed.com/career-advice/career-development/showing-appreciation-at-work> [Accessed: 7<sup>th</sup> March 2022].