



BACCN Southern Region Newsletter November 2009

Chair's Report

Dear Member

Hello and welcome to the last newsletter of 2009. Welcome also if you are reading this as a non-member. If a non-member have you considered the benefits of joining an organisation such as BACCN? If you want more information just email me at cplowright@aol.com

What an exciting year to date the Southern Region has had. We had a very successful conference in May where we worked very closely with STICUMUP and together we jointly presented the BACCUMUP conference at the Gatwick Hilton. The feedback for the event was excellent.

The National BACCN conference was in Belfast in September and it was good to see many Southern Region members there and presenting. Several people were there as they were awarded study awards from the Region.

Regional Funds: I would like to remind you all that our Regional funds are healthy and we are in a position to offer funding for conference attendance or study tour awards. In recent years BACCN Regional members have attended a range of National and International events across the world and it could be you in 2010. If you would like to be considered for an award please see our Regional pages on the web site at www.baccn.org.uk/regions or contact either myself or the Secretary for further information. Remember it does no harm to ask, and if you do not ask you will not get.

National Board: I have recently joined the National BACCN Board as Professional Advisor, so if there is anything you want taken to BACCN at this level do not hesitate in letting me know. Also have you checked out the latest Standards for Nurse Staffing in Critical Care? This was jointly produced by BACCN, RCN Critical Care forum and the Critical Care Networks Nurse Leads. It is available at www.baccn.org.uk/downloads/BACCNstaffingdocument.pdf and is vital reading for all.

Flu: I urge you all to engage in your local areas flu preparedness plans and to look at the BACCN website for the latest information.
Ask your Senior nurses to tell you about your Trust's plans.



AGM:

This is due to take place in 2010. A number of posts are due for re-election. If you think you would like to get involved why not come along to a committee meetings (see list of dates below) and hear how we organize our events and activities for our members. I would like to thank the Southern Region Committee for all their hard work, enthusiasm and for keeping me "calm" and if any of you would like to get more involved with the work please contact me at cplowright@aol.com

Catherine Plowright (Chair)

Three reports from the BACCN International Conference in Belfast by recipients of study awards.

1. I was fortunate enough to receive a study award and presented a poster on the 'CORTRAK' NG/NJ tube placement system. Several members of staff from our unit, with different levels of critical care experience, also attended the conference. We actively took part in the conference with poster presentations and plenary sessions.

The session by Donna Wilson on 'A two-phase Delphi survey of nursing care of adult hospital patients experiencing acute delirium' was particularly valuable. It was encouraging to see nursing research being used effectively to provide evidence-based guidance on strategies/guidance for future study and patient management.

Professor Hugh McKenna's keynote address highlighted the difficulties faced by practitioners trying to provide evidence-based care. He stressed the importance of undertaking high quality research/audit as a means to enhance practice. As our ICU is currently undertaking some small audit projects and possibly an RCT, this presentation was very relevant to me. Once again the conference provided a platform for people to catch up with old friends, to share ideas and generally realise that the challenges facing critical care are not unique to individual unit's and that by working cohesively, nurses are in a position to really influence the future of critical care. Ian Setchfield.

2. This year's national/international BACCN conference was held in the spacious surroundings of Belfast's Waterfront Hall. Professor Hugh McKenna's excellent opening keynote address argued that profusion of evidence could cause confusion in practice; giving examples from journal publications, he challenged us to view what surrounds us from wider, and different, perspectives - a valuable basis for what was to prove a rewarding conference. The presentations by clinical staff who have led developments or undertaken research "on the shop floor" were immediately useful and illustrated his points in a practical way.

Some recent national initiatives, such as DOH requirements that 50-100% of ICU beds should be in side-rooms, puts further pressure on already limited resources, and so risk compromising patient safety. It was therefore

interesting to hear how Andrea Fazakerley managed to use workload data and the current focus on patient safety to reduce the planned new build of 100% siderooms in her unit to the minimum 50%.

Staffing problems largely underlie development of new roles. Among initiatives presented were Joanna Hunter's HCA development programme and Nicola Whittaker's introduction of assistant practitioner roles. Both generated the almost inevitable controversy about "the new S.E.N."; support workers have long since proved their worth in ICU, but most of us, if we became critically ill, would probably all like to be cared for by a registered, fully-qualified specialist nurse. Pragmatically, this is generally only likely to be achieved if that nurse also cared for one or more other patients. So involvement of support staff in direct patient care is almost inevitable. HCA development is one possibility (Wales has already opted for national registration of HCAs, and the other UK countries are likely to follow within the next few years); assistant practitioners is another.

Organ transplantation has achieved a high profile recently, in the wake of last year's DOH report and subsequent appointment of a Donor Transplant Co-ordinator for each Trust. Organ donation "Tsar" Chris Rudge presented some statistics then he emphasized transplantation's human & emotional importance by showing clips from recipients and people waiting for transplants.

Workshops aimed at staff relatively new to working in critical care provided a useful way to develop skills. Presentations included practice and educational initiatives in intensive and critical care, including Outreach services, paediatrics and neonatology. There were also posters presenting a wide range of initiatives from fundamental aspects such as mouthcare, through technology such as Interventional Lung Assist (iLA) to educational and leadership initiatives in all aspects of critical care. There were also stands for commercial products (beds, invasive and non-invasive ventilators, iLAs, haemofiltration and much more) and support/information groups (including transplantation). Other conference facilities included a wi-fi lounge, and for those suffering information overload, a chill-out zone. Since its beginnings, Intensive Care has had trouble recruiting sufficient nursing staff.

Probably the most useful breakout session, which deserved to be presented to the whole conference, was Kate Bray's presentation of the BACCN position statement *Standards for Staffing in Critical Care*. This seeks to achieve consensus between inevitable tensions of quality care, financial

pressures and limitations, national requirements and developing roles. Recent years have seen pressures for more flexible working, which can be a euphemism for cutting costs, especially the main cost of critical care (nursing staff); in general, this position statement reasserts the need for 1:1 nurse patient ratios for level 3 patients, and identifies that in some instances more than one nurse may be needed per patient. With the current state of the national economy, and in the context of changing roles, this document likely to prove a valuable safeguard for safety and quality. It can be downloaded as a pdf from the BACCN's website.

Hopefully (as in previous years) presentations will be downloaded onto the BACCN website for everyone to access.

Next year's (2010) conference will be in Southport in September, so make a note in your diary. And whether you are new to Critical Care or experienced in the speciality, maybe there is something you could share with others through a poster or presentation. Philip Woodrow.

3. Although I have attended conferences in the past, it is always interesting and challenging to meet people from different critical care units and see different perspectives. As a lecturer I was interested in the use of simulation as a method of learning and was challenged by the way that others were using simulation as a learning and assessment method. Although they were finding that simulation exercises were anxiety-provoking for staff it was still seen as useful as it gave people the opportunity to practice skills in a more realistic way (particularly where the situation was a rare occurrence but vital for safety such as in paediatrics). I was interested in how the organisers of these simulation exercises had overcome the practical difficulties of getting staff off a busy ward to do them.

Infection is high on the ICU agenda and this was reflected in elements of the conference programme. There was a presentation on the use of tea tree oil for prevention of MRSA - although the study was not conclusive it highlighted that further work in this area was needed and we should be thinking about alternative approaches to addressing bacterial resistance.

I attended the clinically based neurological workshop and found it useful to reinforce my knowledge in an area (that within a district general ICU) can become a little rusty!!! Some of the practical issues within ICU were also discussed such as pressure sores, faecal incontinence and staff perceptions about patients who have overdosed; these can seem small areas but are vital for the holistic management of our patients.

The funding also gave me an opportunity to present a paper - again, many things we are trying locally would be of interest nationally and we should be promoting our innovations by submitted abstracts. The conference dinner was a highlight with an Irish dance and disco, a great way to meet new people. A sad farewell was said to John Albarran who has been on the BACCN national committee for a number of years. I certainly hope to attend again and it was a shame that there were not more people from Southern Region there to meet with. Ann Price (Committee member).

Committee Meetings & Event Dates 2010:

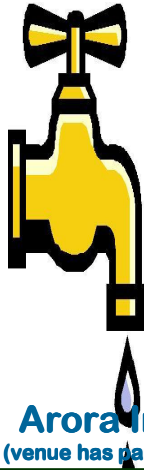
All members are welcome to attend. Just contact one of the Committee for details. Nearly all meetings are held at The Thistle Hotel Buckingham Palace Road, London, but please do check with one of the Committee before attending.

Date	Purpose
January 11 th , April 21 st , June 16 th , July 12, October 4 th	Committee meeting
March 10 th	Link Members' Evening
May 14 th	Study Day & AGM
September	National Conference: Southport
November 17 th	Study Evening

Newsletter editor: Ruth Cork

BACCC Southern Region

What Works With Waterworks Conference Day



Fluids and Renal update In Critical Care

Friday 14th May 2010

09.00 – 17.00h

Arora International Hotel, Crawley, Nr Gatwick airport

(venue has parking, direct access to Crawley rail station with regular trains to London & Brighton)

Provisional Conference Programme:

- AKI – Acute Kidney Injury new definitions 2008
- “Adding Insult to Injury” - NCEPOD report June 2009 (recognition and diagnosis of AKI in ward area)
- Update on current Acute Renal Replacement Therapies & evidence based approaches
- New biomarkers for AKI Urine NGAL (urinary neutrophil gelatinase-associated lipocalin) & IL-18 (Interleukin 18)
- Nutrition in AKI
- Pharmacology of fluid therapy
- 3rd Generation colloids “Balanced Colloids”
- Drugs & AKI (including diuretics role)
- Urine Catheter Care UTI’s, Saving Lives data
- SLED (Sustained Low Efficiency Dialysis) in critically ill patients
- High Volume Haemofiltration
- Citrate anticoagulation

Information & application forms via:

Tim Collins – ✉ tim.collins@nhs.net - Study day co-ordinator Or download application from ‘Southern’ Region
🌐 www.baccn.org.uk/regions

Fees:

BACCN Member £50

Non-Member £70

Regional Link Member £40

All Fees include refreshments, lunch & exhibition

NB. Price freeze since 2008

For further details of this, and future Conference events, please visit ‘Southern’ Region website at www.baccn.org.uk/regions or contact BACCN Southern Regional Link Member / Southern Region Committee Member in your local clinical area