Safeguarding alert – SWASFT good practice example

Too often in safeguarding practice we hear about things that may have ‘gone wrong’ so I wanted to share with you a really positive example of good practice by members of our staff. This case below was provided to us as feedback from an acute trust:

‘A baby was brought in by the ambulance crew following a reported ‘apnoea attack’ by the father while he was getting the baby out of their cot. The baby was fine on arrival of the crew but as is best practice they decided to bring him in.

The crew also had a bit of a ‘gut feeling’ as dad had something about how when he picked the child up maybe he had held him a bit too firmly. It was a bit vague but enough to alert them that they were not happy. The crew handed their concerns over to the emergency department (ED) staff and also completed one of your safeguarding referrals.

‘A consultant examined the child who remained well but he noticed a very faint bruise to the jaw line which appeared to be a possible finger-tip bruise. Safeguarding processes were commenced by ED and they admitted the baby to the paediatric ward, handing over their concerns to nursing staff and the registrar. Unfortunately in this case the locum registrar discharged the child without looking at the bruise or considering the safeguarding concerns that had been handed over. (This has since been addressed).

‘However, the child was called back for a child protection (CP) medical because of the ambulance crew’s referral and children’s social care sent the child back to us. By this point another fingertip bruise had appeared on the other side of the jaw. He had a full child protection and computed tomography (CT) and the head showed a traumatic intracranial bleed consistent with being shaken.’

‘If a referral had not been completed, this serious injury to this child would have been missed. Thank you for your continued vigilance to safeguarding our patients’.

New 2017 learning and development pre-course package

The learning and development team would like to thank you all for your continued hard work and engagement with your e-learning, workbook, learning and development review and your development day.

All the Learning and Development team hope that you have found each element beneficial and supportive. As our 2016/2017 development package closes it is time to welcome our 2017/2018 development package for all operational staff with tailored variation for those directorates not working within accident and emergency.

The learning and development team have been working in conjunction with a number of departments, subject specialists and viewing evidence based research in order to construct an informative, fun and beneficial day. The day has been comprehensively constructed tailoring it to your needs. Learning and development officers have all been internally quality assured by subject specialists who have validated the learning objectives in which you will take forward into practice. LINKED are the core modules covered in this year’s development day and we strongly advise you partake in the pre-course learning sent out by ROC ahead of your booked date to ensure you gain the most from the day ensuring your questions are answered. Please see full information here. Contact your local learning and development administrator for any further information.
New operating procedures – C25 and C26

Two new Standard Operating Procedures (SOPs) have been issued today (Wednesday 12 April 2017) C25, Application of Prometheus Traction Splint and C26, Application of T-Pod Pelvic Stabilisation Device. Information will be sent out to Operations Officers on the roll out of the devices, with training being included during this year’s Development Day. Please follow the links above for information.

Dylan’s reunion, Bristol Children’s hospital

A brave toddler who suffered catastrophic brain damage a year ago after choking on a ham sandwich met with the paramedics who helped to save him in an emotional reunion on Channel 5 news last week. Advanced Nurse Practitioner Peter Winterbottom reassured Dylan Wheatley’s mother Ally that she’d done everything she could by giving him CPR during the freak accident before the paramedics arrived on scene.

Local elections - Purdah awareness

This is just a reminder that local elections are being held on Thursday 4 May 2017 and NHS staff should remain party politically impartial at all times. Colleagues should not engage in activities which are likely to call into question the party political impartiality of their organisation (e.g. any MPs joining crews third manning, correspondence with councillors) which could give rise to criticism that public resources are being used for party political purposes.

NIHR Let’s get digital competition, now open

The National Institute for Health Research Faculty (NIHR) digital competition is designed to recognise those people involved in NIHR research to promote research - and at the same time encourage more people to do so.

The competition has five categories:
• video;
• photograph;
• website;
• infographic; and
• online community.

Winning entries will be promoted in various ways across the NIHR’s communication channels.

To be eligible to enter any category of the NIHR Let’s Get Digital competition applicants need to meet one of the following criteria:
• be a member of the NIHR Faculty - this is the collective term for the people we support to lead and deliver health research, and those we train as the next generation of health researchers. For example, this means you could be a senior investigator, investigator, NIHR trainee, clinical research staff member or be based in an NIHR-funded facility. (Including those who work with us on a voluntary basis);
• have recently completed NIHR funded research; and/or
• a patient/member of the public actively involved in NIHR research.

Winning applicants will also be invited to Google’s HQ in London to learn about all things digital.

Datix – medication reporting

In order for the Trust to complete comprehensive and meaningful investigations, I would like to take this opportunity to ask all staff that when submitting Datix incident reports relating to medication please complete all necessary sections within the incident form.

The medical information that needs to be recorded is:
• what form was administered
• the dosage
• the batch numbers
• expiry dates

These are all necessary for action to take place and for us to be able to record occurrences of lost and broken medication.

Any extra information such as the supplier name and the product license number would also be very beneficial.
Physical assault, incident

As a result of a recent assault to crew members attending an incident in Weston Super Mare, the offender has been sentenced to 14 weeks in prison.

This just reinforces the importance of reporting any form of assault or abuse via Datix.

The ‘Stop Abuse – report it’ campaign is to stop violence and aggression against Trust staff.

All too often ambulance crews can become victims of physical and verbal assault while simply doing their job caring for and treating patients.

This campaign is aimed at supporting staff to report incidents of violence and aggression to the police.

For further facts about violence and aggressive incidents to Trust staff please click here.

REAP Level change

Please be aware that the REAP Level has been upgraded to Level 2 (Amber) as of Tuesday 11 April 2017.

Further information on REAP Levels can be found on the Trust intranet here.

Upcoming courses available for SWASFT staff

There are some great continued CPD courses on offer that are advertised on the Learn with SWASFT website at various dates and locations including the following:

- New Alcohol-Related Brain Damage CPD in Roche Monday 8 May 2017
- 2017 UCS Development Days in East and West
- New PROMPT Emergencies Training day Saturday 17 June 2017
- Back by popular demand! Pre-hospital Burns Treatment

- Dates added Open all Hours Macmillan Cancer Care Education day
- ECG Day at UH Bristol Friday 23 June 2017
- Book now SAGE & THYME Foundation Communication Skills
- Award in Education and Training QCF Level 3 in September 2017

For a full list of what's available please view our Clinical or Non-Clinical courses.

Lechlade music festival, Cotswolds

The organisers of Lechlade music festival would like to offer a quantity of complimentary tickets to SWASFT staff in recognition of the fantastic service they provide to their local community.

The three-day award-winning family music festival takes place over the late May bank holiday weekend from 26–28 May 2017.

Tickets are available for camping, weekend or daytimes.

Please contact Jennie Rainsford for further information jennie@lechladefestival.co.uk

Sad news

Former Anesthetist Dr Richard Dunnill (retired) sadly passed away last Wednesday after fighting liver cancer over the past year or two.

Richard was based at the Old Royal Victoria Hospital in Boscombe, Bournemouth and will be well remembered by all those ambulance staff in East Dorset that undertook “extended training” and paramedic training during the 1970s through to the 1990s before his retirement.

Richard embraced new technology including an early dial-up interweb system in the early 80s called “Oracle”, to access medical papers and productions.

He was even known to venture on to Facebook recently. Richard enjoyed sailing and was an active member at the Royal Motor Yacht Club in Poole for many years until he succumbed to his illness.

The funeral is taking place at 1130hrs on Thursday 20 April 2017 at Sopley Church, nr Sopley Mill, BH23 7AU. (Family only afterwards to the Crematorium).

NQP Clinical Validation

It appears that some newly qualified paramedics (NQPs) have already been attempting to seek Clinical Validation for their patients. Please can I remind you that Clinical Validation is not required until the Tuesday 18 April 2017, after the Easter Bank Holiday. Clinical Supervisors can provide advice as they previously have done. However, there is no requirement to contact them for Clinical Validation. If you have any questions please contact the Clinical team on clinicalfeedback@swast.nhs.uk.
Incident Reporting - Datix

The reporting of Incidents helps us to reduce the levels of risk to patients and staff, improve our services, reflect on learning outcomes and analyse trends. It is everyone's responsibility to report all clinical and non-clinical incidents and near misses within 24 hours of the incident occurring. Incidents and near misses can be directly reported onto the Datix Incident reporting system [here](#).

The Datix system not only seeks to learn lessons from incidents and near misses but it provides employees with an opportunity to participate in and influence changes in practice and procedures.

More information about the type of incidents that should be reported can be found [here](#).

Any queries regarding the Datix system, incident reporting and related training enquiries can be emailed at kate.noone@swast.nhs.uk or datix.helpline@swast.nhs.uk where a member of the Incidents team will be pleased to assist.