

Your Guide to **SWeET** **S**trategic **W**orkforce **E**ducation and **T**raining

This edition of the 'Keeping You Informed' bulletin focusses on the work being done to improve public health, particularly in terms of smoking and the role of the clinical educator for risky behaviours.

Non-Executive Director and Chair of People's Committee, Dr Jeremy Wight



I am delighted that this month's bulletin highlights Sally Chadwick's role as CQUIN lead for risky behaviours. The way we live our lives is enormously important in determining our risks of disease, and there is practically no-one whose risk of illness could not be reduced by some change in lifestyle! We also know that it is never too late to make changes that will improve health, so talking to patients about ways in which they can help themselves, and offering support to help them do so, is very valuable. I am also pleased that our smoking policy has been changed to recognise the fact that e-cigarette vaping is hugely less harmful than conventional smoking, and a way in which nicotine addicts can manage their addiction without exposing themselves (and others!) to tobacco smoke. Sally has done a great job.

In my role as chair of the People Committee (one of the Board Assurance Committees), and also drawing on my career experience as a public health doctor, I am also very interested in the health and wellbeing of all our staff. I am therefore particularly pleased in the appointment of a Workforce Wellbeing lead, paid for by Charitable Funds for a year, to focus purely on the health and wellbeing of staff. I hope that we will be able to demonstrate the benefit of having this post, and so make a strong case for continued funding next year!

Clinical Educator for Risky Behaviours, Sally Chadwick

"It's been an interesting new role for me and it's given me the opportunity to look at ways that the Trust can support our patients who may need help to quit smoking or reduce their alcohol intake.

"I'm coming to the end of my secondment but I feel that I've achieved a great deal, including a change in the Trust's on site smoking policy that reflects the growing research that vaping and E-cigarettes can be a useful tool in smoking cessation. It means that, for the first time, we will be allowing patients and visitors to use them away from the main entrance and open windows to recognise the fact that we have inpatients on our wards who are using them as a means to give up smoking. Research from Public Health England has shown that E-cigarettes are 95% safer than their tobacco based equivalent so it's a move in the right direction and we're finding that they can be a useful form of smoking cessation.

Clinical Educator for Risky Behaviours, Sally Chadwick

“But the role isn’t all about smoking, in fact it’s quite wide ranging. I’ve been involved in extracting some of the data from patient’s records relating to questions they’ve been asked about their tobacco and alcohol use to make sure that they’re being given access to help where appropriate. My focus was originally on pre-operative patients, particularly those who are on EMU or CDU because we know they’re likely to be admitted as an inpatient. The turnover on those wards can be quick and it’s easier for me to speak to them at that point before they are admitted to an inpatient ward.

“I’ve then been checking my findings against the CQUINN target with the aim of reducing future admissions and giving patients the opportunity to manage their own conditions. By doing this, and ensuring that the right questions are asked of each patient, we might be able to ensure that some of the lifestyle factors that could be affecting a person’s health are addressed and that help and support is offered where necessary.

“This will also mean that our adult patients will most likely be asked more questions on subjects such as alcohol consumption which has led to conversations about where to find specialist support and even allows us to offer stop smoking medication. It has also encouraged our colleagues to better record this information with patient records audited quarterly to ensure these conversations are taking place.

“This role has acknowledged the principles of the ‘Make Every Contact Count’ philosophy which is an approach to behaviour change that can positively affect risk factors, including tobacco and alcohol use. Much of my work has also been about raising awareness of the importance of asking these questions and documenting the results correctly so that patients are given the right follow up advice so there has been a lot of education, teaching and speaking to colleagues about how they can help their patients make changes to their lifestyle.

“It’s been a difficult and wide reaching role but, coming from a clinical background in EMU, I’m familiar with that particular area where I’ve been doing some of that work. For me it’s been a case of adapting to that shift of working exclusively within a clinical setting to becoming a little more office based but it’s a challenge I’ve risen to and enjoyed making a difference.

“For me it’s about ensuring that colleagues have understood the importance of asking these questions. Coming into contact with patients on such a regular basis represents a real opportunity to make a difference to people’s lives whilst they’re here in terms of changing behaviour and reducing the number of repeat admissions. Any difference we can make with this approach will help to relieve some of the pressure on wards and assist in keeping patients out of hospital for longer.”



For More Information Contact

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