

Grant Report for the Deteriorating Patient Summit 2nd December 2021  
'Deborah Preston Education and Practice Development Sister'

Following the COVID 19 pandemic, there have been great changes to how we care for our patients within acute hospital settings. One of the most significant changes seen is the number of patients who require Level 2 and 3 care. As an experienced critical care nurse I am acutely aware of the challenges my colleagues are facing, but following a period of redeployment to a new Respiratory Support Unit I learned of the extensive learning curve facing our acute respiratory ward nurses who are now caring for high dependency Level 2 COVID patients. The change in practice from occasional enhanced care to a full unit of non-invasively ventilated patients over only a few weeks highlighted the need for Nurse Educators who are experienced in level 3 care to facilitate and support the development and skill acquisition of these Nursing teams.

In order to facilitate a program of education to upskill these new acute care areas within the trust I needed to broaden my own sphere and adapt my knowledge to the challenges facing these clinical teams. So I applied for a grant from the BACCN for the Deteriorating patient Summit in December 2021.

The summit was both engaging and interesting to watch, held virtually candidates were able to engage with clinical experts from around the country. The theme of the summit Was around sepsis identification and NEWS 2 both areas for discussion when building a HDU education program. However, the first session was the most profound for me, as we were able to hear from a survivor of sepsis. The patient retold her story and shared some of the challenges that she faced during and after acute illness, including some residual deficits that she must manage daily. This was illuminating as it allowed the viewers to gain insight into the realities of life after critical illness. This is something that I will take with me through my teaching in our new education program as these clinical areas are not aware of the challenges that patients in critical care face and the long-term physical and psychological effects experienced.

Other sessions included an interactive set of case studies of deteriorating patients using the NEWS2 and management plans delivered by Sue Crossland. This session revised the history / of NEWS and the need to assess beyond the pathway and look at the overall picture looking / at trends whilst applying clinical acumen. This is one area of practice in which I am very familiar, however, the RSU staff would benefit greatly from this kind of facilitated learning.

The remaining sessions were focused on the research being done across health care, in relation to the deteriorating patients following surgery with aim of reducing post-op complications and ICU admissions. The application of an assessment for paediatric patients and a presentation regarding the use of virtual wards in the community setting again to spot early signs of deteriorating and implement care more promptly to reduce the burden on secondary care services. All these areas however are strongly reliant on the practitioners working with these patients being aware of themselves and working effectively together in a way that supports the wider system. So, it was fitting that the final session of the day was around human factors and the deteriorating patient. Again this is another area of practice and education that I am passionate about and will be incorporating into my future planning for enhanced care and ICU step down areas.

'I would like to thank the BACCN for this opportunity.