CREATING SPACE FOR REPAIR AND GROWTH WITH HOSPICE NURSES TO PROMOTE A POSITIVE WORKPLACE CULTURE

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Background Alongside the COVID-19 pandemic, we experienced significant changes in senior nursing leadership. This led nursing staff to feel unsettled, highlighting a lack of training, development and time to reflect. As a result, we saw high levels of sickness and absence, with anxiety and stress a common theme. Healthcare professionals have experienced high levels of burnout since 2020 (Wong, Olusanya, Parulekar, et al. J Intensive Care Soc. 2021; 22(4): 328–334; Jordan, Shannon, Browne, et al. BJPsych Open. 2021; 7(5), e159) which can cause a shift in culture in healthcare settings. The culture of an organisation makes us unique and is the sum of its values, traditions, beliefs, interactions, behaviours, and attitudes (Mannion, Davies. BMJ. 2018; 363, k4907). We recognised the need for a change in our culture.

Aims To deliver a training plan which would consider the needs of nursing staff, their wellbeing and promote them in feeling valued in order to drive a change in workplace culture.

Methods We took nurses away from the ward environment which allowed us to hear their concerns, explore current issues and begin to build trust. Nurses spent time together during reflective sessions, creating wandering maps, Schwartz round, peer feedback sessions and an open forum. Utilising the training needs analysis from the previous year, we constructed a timetable of learning inclusive of members of the multidisciplinary team from across the hospice.

Results Feedback from nursing staff was positive, many expressing that they felt a new hope for the future. 96% of nurses articulated in written feedback that they understood more about the role and vision of the senior management team, and how their own roles were part of this. Nursing staff reported a greater feeling of acceptance within the MDT and were keen to develop themselves personally through link roles and audit.

Conclusions By acknowledging staff wellbeing, feelings and concerns we have been able to take steps to build trust and develop the beginnings of a more positive workplace culture in our hospice.

DEVELOPING AND UNITING THE CLINICAL SPECIALIST TEAM THROUGH VIRTUAL TEACHING AND COMPETENCY ASSESSMENT

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Background With the introduction of a new role of Trainee Clinical Nurse Specialist (TCNS) to one hospice, a programme of education and competencies was required to support the role. This ideally would be integrated into a training programme for existing hospice staff, to create a unified knowledge-base. The teaching needed to be suitable to promote multi-professional education and a community of practice for staff working over several sites.

Aims To ensure that TCNSs received appropriate education to upskill them for their new role. To assess that competency in the role had been achieved. To build a common knowledge base across the entire clinical team.

Methods Competencies were written based on the job description for a CNS, national guidance on competency frameworks (Connolly, Ryan, Charnley. BMJ Support Palliat Care. 2016; 6(2):237–242) and understanding of specialist palliative care (Griffith, 2018, Int J Palliat Nurs. 2018; 24 (8):399–410). An education programme was devised, using constructive alignment to ensure that the relevant knowledge could be gained to achieve competence. Validated virtual technology (Lee, Kyeremateng, Taylor, et al. BMJ Support Palliat Care. 2023;13(2):247–254) was used to reach all senior clinical staff, including virtual CNSs working remotely, and to ensure that a uniform understanding of all areas of competence was achieved.

Results Three-month, monthly teaching sessions were held virtually over two years, covering the essential areas of the competencies. Senior clinicians from the nursing, physiotherapy,