

**Lothian & Borders Stroke MCN  
Training & Education Subgroup**

**12<sup>th</sup> February 2015  
minutes**

**Present:**

Caroline Allan	Clinical educator, RIE
Ros Burness	Senior nurse (MoE/Stroke) and Discharge Process (for Grace Hynd)
Gillian Currie	Stroke education facilitator, NHS Lothian & Borders
Ros Fraser	Speech and language therapist, Liberton
Pauline Halliday	Clinical specialist OT, RIE
Dr Simon Hart	Stroke consultant (part meeting)
Gillian McClure	Physiotherapist, SJH
Morag Medwin (minutes)	Stroke MCN co-ordinator
Mark Smith (chair)	Consultant physiotherapist
Debbie Tinson	Clinical psychologist

**In attendance**

Sarah Florida-James	National stroke education facilitator
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**Apologies:**

Elizabeth Eadie	Sonographer, WGH
Sandi Haines	Stroke Nurse – NHS Borders
Vanessa Hamilton	Dietitian, WGH
Dr Marion Murray	Clinical neuropsychologist
Pat Taylor	Charge nurse, WGH
Grace Hynd	CNM, MoE, Stroke & Discharge Teams, RIE
Anne Rowat	Lecturer, Edinburgh Napier University
Gillian Baer	Queen Margaret University
Jackie Sloan	Learning & development advisor, CEC
Lynn Stewart	Acting charge nurse, W 201, RIE

**action**

**1. Welcome & apologies**

Apologies – noted above

Sarah was welcomed and gave a brief introduction to her role. She is in a new post as national stroke education facilitator (funded from the Stroke Improvement Fund), and is working alongside Katrina Brennan to support the boards that don't have a CHSS stroke education facilitator. She will be supporting them with the education pathway and also the SCoT (toolkit), and has joined this meeting as an observer in our established Training & Education meeting. Sarah advised that her role would also co-ordinate the completion of the stroke education templates from each health board as part of the Scottish Stroke Improvement Plan.

**2. Minutes of the meeting of 29th September 2014**

These minutes were approved as correct.

**3. Actions/updates from previous meeting**

Noted in agenda

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[Morag.medwin@nhslothian.scot.nhs.uk](mailto:Morag.medwin@nhslothian.scot.nhs.uk)

Stroke Training Education\_12 Feb 2015 minutes (V1.0).doc

Page 1 of 7

#### 4. CHSS update

##### 4.1 Completed training

###### Hearing Loss (28<sup>th</sup> October) at SJH

Gillian reported that this session, held at St John's Hospital, had provided an excellent and comprehensive overview of hearing loss, and the staff who attended had gained a good insight into the difficulties around it. It is possible that the session may be repeated in Edinburgh as they found it invaluable and it helped promote awareness of hearing loss – an area that has long been overlooked within stroke care.

The attendees were:

- three SLTs, five nursing staff, one rotational physio, one OT and one support worker – St John's Hospital
- one OT – AAH
- one CSW – Edinburgh City Council

Gillian noted that the smaller numbers actually worked out to the group's advantage for the practical aspects and all the speakers were excellent. The audiologist (Rochelle Glen) brought along a (non-stroke) patient who was a lifelong hearing aid user and her insight was excellent. The ENT consultant was supportive and stayed for most of the session.

Based on the success of this session Katharine Jackson (Project Development Officer, Hidden Sensory Loss) and Rochelle have also been asked to speak to the wider Physiotherapy Department at SJH later in 2015.

###### Stroke Awareness (13<sup>th</sup> November)

11 City of Edinburgh Council staff and one from East Lothian Council attended.

###### CCIS 2 (25<sup>th</sup>/26<sup>th</sup> November)

18 staff attended this training session, with a mixture of therapists, nursing staff and social workers from acute, rehab, ECSS and Intermediate Care Services.

##### 4.2 Future training sessions – 2015 programme, strategic approach

The 2015 programme is now published and applications are being requested electronically to a generic email address: [lothianstroketraining@chss.org.uk](mailto:lothianstroketraining@chss.org.uk) Gillian advised that she is receiving lots of bookings via this new booking system. The programme also includes the STAT (stroke and TIA awareness training) training days – see item 5.1.

CCIS 1 – 25<sup>th</sup> & 26<sup>th</sup> February – 19 registered

CCIS 2 – 18<sup>th</sup> & 19<sup>th</sup> March – 11 registered

CCIS 1 – 6<sup>th</sup> & 7<sup>th</sup> May – 20 registered (FULL)

CCIS 2 – 26<sup>th</sup> & 27<sup>th</sup> May – 16 registered

Prior to the meeting Jackie Sloan requested an update on the status of the CCIS 1 and 2 courses and the availability of spaces for council staff. Agreed that the priority continues for the acute stroke unit staff be given the opportunity to register for these courses. Additionally, they need to complete their core competencies with STARs 1 and repeat this every five years. Trained staff also need to measure their practice and this is done by completing the SCoT (stroke competency toolkit) and this is the responsibility of their line management.

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Stroke Training Education\_12 Feb 2015 minutes (V1.0).doc

Page 2 of 7

#### 4.3 RIE stroke unit training programme

Following a meeting at RIE on 7<sup>th</sup> January there has been further discussion around supporting their stroke unit to improve performance in developing a skilled and knowledgeable workforce. Copies of the stroke education template as agreed by NACS (national advisory committee for stroke), with details of essential and desirable training have been made available on a shared drive. Links are also available to the online STARs modules and registration for SCoT. The team was also advised of the link to the Screening for Dysphagia site on the stroke intranet page.

The team has also been reminded of the stroke training fund which is available for anyone working in stroke to access backfill for nurses to attend training and course fees for nurses and therapists. Further discussion on this budget in item 9.2

Gillian advised that she is holding three spaces on each of the 2015 Current Care in Stroke Part 1 courses and three spaces on each of the Current Care in Stroke Part 2 courses for ward 201 nursing staff. She also noted that she has had a discussion with Sheena Borthwick regarding how she could support a Train the Trainers session on swallow screening as suggested at the 7<sup>th</sup> January meeting.

Gillian highlighted that she can spend time with nursing staff at RIE to help support completion of the online SCoT Toolkit and to help signpost staff to the most appropriate stroke training based on their learning needs. This could be done with a small group on a regular basis (monthly or as required), and RIE training lead (still to be confirmed) will liaise with Gillian.

GC

RIE rep

#### 4.4 Single study days

There will be three single study days this year: 15<sup>th</sup> April, 16<sup>th</sup> June and 25<sup>th</sup> November. Gillian advised that the topics for these days are driven by service developments and open for suggestions.

Simon suggested a training session for the stroke unit team at RIE to learn how to use the cardiac monitoring monitors that have been purchased from ward funds for use in 201. Gillian advised that there could be appropriate expertise within CHSS from their new 'Heart-e' training modules, to help facilitate the training. Gill McClure noted that SJH monitors their post-thrombolysis patients in CCU, as they don't have telemetry in the stroke unit, so there wouldn't be interest from SJH stroke nurses to attend.

Details of the company providing the monitors will be requested and their initial training will be taken into consideration for any on-site training developed for a single study day.

Gillian advised that there had also been interest in providing a Train the Trainers session for swallow screening, for staff across the acute sites. This would ideally be a half day session for 10 - 12 nurses from both front door and stroke unit setting to train a cohort of champions. They would then provide expertise and training for nurses within their areas, and promote the use of swallow screening for stroke and other neuro patients.

**[Post-meeting note:** A half-day session has been arranged for 15<sup>th</sup> April]

There was discussion about other potential topics that could be the subject

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of single study days. Gill mentioned hydrotherapy and access to swimming for people with stroke and Mark observed that many stroke patients wish to return to golf. Golf teaching professionals under the PGA could be trained about stroke and rehab professionals taught about golf. This could become a similar initiative to the exercise after stroke pathway work that has been supported by this group.

#### 4.5 Stroke Awareness training

Gillian confirmed that the stroke awareness training sessions have been booked for 2015:

- Tuesday 10th February, WGH – 20 places
- Tuesday 28th April, WGH – 15 places
- Wednesday 26th August, CEC premises – 20 places
- Wednesday 7th October, CEC premises – 15 places

The two sessions at council premises are additional to the normal training programme and will have IT and administrative support from Jackie Sloan's team at the council. They were also run in 2014 and have proved valuable to the health and social care integration agenda.

However, Gillian noted that there will be challenges to provide speakers for these sessions from March 2015. This is due to cuts in funding from both the Change Fund and LRP in council and health budgets.

### 5. Ad hoc courses / initiatives

#### 5.1 Stroke Outreach Nurses / STAT (stroke and TIA awareness training)

The STAT training information and dates for 2015 have been circulated to the acute stroke units and response has been excellent. Twelve places are offered on each of the training days. Dates for 2015: 19<sup>th</sup> January, 6<sup>th</sup> March, 21<sup>st</sup> April, 21<sup>st</sup> August and 15<sup>th</sup> September.

Bookings will be submitted to the [lothianstroketraining@chss.org.uk](mailto:lothianstroketraining@chss.org.uk) email address which Gillian has recently set up, and Morag will hold the registration details so that the trainers (Trish Elder, Nolan Arulraj and Richard O'Brien) can access the information without difficulty. Applications have been received from the acute stroke units, front door teams and Scottish Ambulance Service.

Post-meeting note: as at 18<sup>th</sup> March, all places have been booked.]

No further update on the stroke outreach nurse training. The acute stroke units are currently reviewing the way this service will be offered on their sites.

#### 5.2 Sensory champions

A Sensory Champions Gathering is being held on 5<sup>th</sup> March for all those who have been trained, to feedback on the See Hear Strategy. Katharine Jackson continues to provide mentoring and support.

Katharine is also keen to support further general sensory awareness training within ward settings (in service etc) so that nursing staff can access. So far it has proved difficult for nurses, and none have been able to access this training.

Also it could be helpful to gain some clarity regarding where the Sensory

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[Morag.medwin@nhslothian.scot.nhs.uk](mailto:Morag.medwin@nhslothian.scot.nhs.uk)

Champions training sits within the pathway for vision with stroke services and also what the outcome of the pilot work on hearing screening at ECSS was.

### 5.3 West Lothian Stroke Pathway

Mark noted that their aim is to achieve early supported discharge for patients. He noted that the pathway is evolving and the teams aim to become more closely aligned to allow in-reach by CRABIS into REACT, and by REACT into the stroke unit in St John's Hospital. It was recognised that this work could be supported by strategically targeted training and education.

## 6. NHS Borders – training & funded projects

### 6.1 NHS Borders training

Gillian noted that not many nursing staff from Borders access the CCIS 1 and 2 training sessions, but the therapists are regularly booking onto the sessions.

### 6.2 Emotional distress post-stroke in-service training

An update was received from Joanna Gouick in September 2014 regarding this training development.

The grant funding for the Emotional Distress Training work came to an end in 2013. Ongoing work on this will be provided from within existing resources- drawing from both stroke and neurorehabilitation services.

- **i and ii) revised materials (as at May 2013).** The resource pack for the Distress Management System has been updated. Aphasia friendly materials still to be developed.
- **iii) roll out to wards.** Two training sessions have been offered to the Neurorehabilitation wards (Charles Bell Pavilion) at AAH (Sept 2014) as part of the work towards equity of service provision between Mears and CBP. We are exploring with the CBP MDT how the DMS could be incorporated into their model of care. We plan to revisit training needs and service models with Mears ward colleagues in the near future (once new staff are in place later this year). In terms of acute stroke wards across Lothian – further work needs to be done to establish the needs for and practicalities around delivering training.

Debbie Tinson stated that she will further develop the training materials and is hoping to have them scanned so they are digitally available. Mark suggested that it may be possible to provide funds from the stroke training budget for someone to scan the materials. This will be scoped and an application made.

DT  
MM

### 6.3 Radiology training

Andrew Farrall provided an update that the training module is almost finished. He advised that he would be delivering a lecture on it at the upcoming Edinburgh Stroke Winter School, scheduled for 23<sup>rd</sup> – 25<sup>th</sup> February at Edinburgh University.

## 7. Stroke modules at Napier & QMU

Anne Rowat provided an update prior to the meeting that there were no stroke modules running at present at Napier University, and she will update further at the next meeting.

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[Morag.medwin@nhslothian.scot.nhs.uk](mailto:Morag.medwin@nhslothian.scot.nhs.uk)

## 8. Measuring staff competencies (training template)

The amended Scottish Stroke Improvement Plan and associated Stroke Education Pathway were circulated to the group. Priority 4 of the SSIP outlines the criteria for assessing the level of a skilled and knowledgeable workforce within each health board. Noted that Lothian is currently sitting at 'amber': *the 'stroke unit education template' is accurately completed by the NHS board, however unable to consistently meet the essential training requirements identified.* This was submitted to NACS on 11<sup>th</sup> February.

## 9. Any other business

### 9.1 National stroke training issues

An update on national stroke training issues was circulated to the group for information. There were no further comments.

### 9.2 Stroke training & education budget

This fund is approximately £7,000 for acute services and £5,000 for CHP, and the budgets are held by Pat Wynne (acute) and Sheena Muir (CHP).

However, there are issues with finance department unable to transfer small amounts of backfill funding to individual ward budgets throughout the year. There was agreement that the provision of funding to ward budgets is important and it was suggested that a bulk amount of funding could be transferred to each stroke unit at the beginning of the financial year, and the remainder still available within the funds for invoiced training for nursing and therapists. This proposal will be raised with the budget holders and thereafter with the finance department.

MS  
MM

### 9.3 Availability of speakers

Gillian raised concerns from Sarah Keir (consultant at WGH) over the CCIS training days which are currently held at WGH throughout the year. Sarah has previously co-ordinated the stroke consultants to cover the medical session on the courses. During 2014 stroke registrars at WGH have also delivered several of the CCIS1 courses. However, with recent and upcoming medical shortfalls at WGH it is becoming very difficult for Sarah to cover these sessions. This was raised at SPMT on 10<sup>th</sup> February where Mark Smith agreed to discuss this further at this meeting.

It was suggested that the cohort of medics now at RIE could be approached to deliver the session, but it was agreed this would be inefficient with the travel involved from RIE to WGH for them. This session is held 9.30 - 10.30am on the first day of the CCIS1 programme, and there will be four held this year. Morag noted that she had booked duplicate rooms at RIE for some of the training days, in anticipation for some of the courses to be run there instead of at the WGH. However, the location of the WGH medical education centre (MEC) is preferred as it offers good support from their IT staff, and is close to CHSS Head Office for transporting packs and materials.

Gillian has spoken to her training colleagues from other boards and discovered that they don't all use a medic presenter for the medical sessions. In Fife, the trainer does the medical presentation. Gillian noted that she would be confident to do the CCIS1 medical presentation, but on past experience, the attendees get much more from the interaction and knowledge from a medic. It was suggested that video conference facilities could be used from RIE to the training room at the WGH MEC, or that registrars could be approached to do this – as part of their CPD. Simon Hart

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and Sarah will be contacted for their thoughts on these suggestions, and Gillian will seek advice from staff at the WGH medical education centre for using video conferencing.

**action**  
**MM**  
**GC**

There is also an ongoing problem with Gillian getting experienced therapists and nurses to deliver the presentations for the training days. Noted that a reduction in the number of OTs and physios from community has decreased the pool of experienced therapists. She noted that the dietitians and SLTs have confirmed speakers for the year. Gill McClure will liaise with Jane Shiels, who chairs the physio forum, to confirm physiotherapy speakers for the year. Pauline will liaise with OT colleagues to also confirm speakers for the 2015 programme.

**GMcC**  
**PH**

It has proved almost impossible to get experienced nurses to also deliver the presentations. However, Caroline Allan agreed that she would consider doing the 'skin care' presentation, with her previous experience with tissue viability.

**CA**

#### **9.4 Falls prevention training for therapists**

In her absence, Jackie Sloan requested some assistance regarding a training programme they will run for council staff. They will host a chair-based exercise training programme (Otago), for the development of a "Be Able" / falls prevention service. She requested guidance to advertise to OTs and physiotherapists across Lothian. The group suggested the programme information should be circulated to the Falls Co-ordinators in each CHP.

**MM**

#### **10. Dates of future meetings**

Tuesday 21<sup>st</sup> April, 2015 (2.00 - 4.00pm)  
Boardroom 2, RIE (video-conference available to WGH, SJH)  
(telepresence suites at SJH and WGH booked)

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[Morag.medwin@nhslothian.scot.nhs.uk](mailto:Morag.medwin@nhslothian.scot.nhs.uk)