

## PCRS-UK Respiratory Clinical Leadership Programme 10th anniversary

**The PCRS-UK Respiratory Clinical Leadership Programme is celebrating its 10th anniversary. To mark this milestone we are highlighting how some of the programme's alumni are using the skills they have learned to improve patient care.**



*Debbie Roots*, respiratory nurse specialist lead of a hospital based team, says key skills she has learned are how to engage with stakeholders and develop a business case. Debbie has gone on to put forward business cases to develop respiratory teams and services including setting up pulmonary rehabilitation classes.

She has also taken on more challenging leadership roles including promotion to nurse consultant, becoming a member of the London Respiratory Network and co-chair of the London Oxygen Network. 'I wouldn't have had the courage to take on these roles without the support of the Respiratory Clinical Leaders Programme. I am now able to lead confidently and continue to work nationally and locally to develop respiratory services. Being part of the programme has been invaluable in developing both my skills and confidence,' she says.



*Deirdre Siddaway*, respiratory nurse specialist and GP practice respiratory lead, has learned how to influence people, manage conflict and plan a project. These skills, combined with support and advice from workshop leaders, equipped her to make the case for her CCG to commission a six month pilot between primary and secondary care to improve patient care, reduce out-

patient waiting times and prescribing costs. 'I had been trying to engage commissioners for some time to raise the profile of the management of respiratory patients. The workshops helped me to target the right people, find the levers to encourage them to listen and to engage those who were influential,' she says.

*Ruth Thomas*, community respiratory nurse team leader has improved care in her area by putting forward business cases for increasing pulmonary rehabilitation services, improving COPD exacerbation care and

updating COPD and bronchiectasis self-management plans. 'All of this has been made possible by the skills I learned and the support I received from the programme,' she says.

*Carla Astles* began her career as a practice nurse and is now working as a respiratory nurse specialist nurse educator for Southampton's integrated COPD team and as a trainee advanced nurse practitioner in general practice. She is also a Wessex CLAHRC (Collaboration for Leadership in Applied Health Research and Care) nurse



involved in developing a service for improving respiratory care within a primary care setting by undertaking, applying and implementing world-class applied research for patient and population benefit.

Carla says the workshop taught her about the concept of doing 'the work before the work' when developing a project. She had previously adopted the attitude of 'just get on with it and see if it works'. She learned that while this may be appropriate for a smaller scale initiative it makes evaluating a project or a change in practice challenging and could reduce the potential for upscaling or sharing practice. 'Much of the work I have done in the last few years requires forward planning and evaluation which I felt better equipped to manage after attending the workshop. The skills I learned also boosted my confidence as a contributing member of a working group looking at service development,' she says.

A commissioner and respiratory clinical lead for her CCG, GP, *Dr Adedayo Kuku*, joined the programme because she was keen to develop and improve both her professional and leadership skills.

'Each session I have attended has been very inspiring and empowering. The workshops have equipped me with the tools I need to turn most of my great ideas into reality. They improved my project management skills and my professional self confidence. I have learned to be clear about the aims and scope of a new project, how to involve key players and

**Nurses inspired to aim high**



**Melissa Canavan** and her colleague **Sarah Anderson** were inspired to set up a social enterprise in Leeds after attending the Respiratory Clinical Leaders programme.

First they launched the Leeds Respiratory Network in 2013 to

provide educational meetings for local healthcare professionals, followed by their social enterprise in 2015. This year they achieved their aspiration of securing a contract with a collaboration of GP practices for their social enterprise to standardise respiratory care and improve outcomes.

The leadership workshops gave Melissa and Sarah the confidence to pitch for funds and business support from two local community foundations, contract a solicitor

and an accountant and open a bank account. They also learned how to liaise with commissioners and pitch a business case.

From working as a practice nurse Melissa has gone on to work as a hospital respiratory specialist nurse, present at the Primary Care Respiratory Academy and lead sessions at the annual Affiliated Group Leaders meeting. Earlier this year she was invited by NHS England to talk about her social enterprise at the national GP Forward View conference.

'The Respiratory Clinical Leaders Programme has given me new skills such as understanding how to use data, make a case for change, engage stakeholders and why it is important to have a mission and values. The workshops made me realise that there are opportunities out there and that you can influence the system and improve patient care. If it wasn't for PCRS-UK none of this would have happened,' she says.

stakeholders to effect change and how to share my plan with them and communicate more effectively using learned negotiating skills.

'I now feel able to manage difficult situations and people in my role as clinical lead of a new practice. The programme has taught me how to be reflective and how to understand the perspective and interests of others and has given me an insight into my leadership style and how to use it more effectively.'



**Dr Steve Holmes**, GP trainer, clinical commissioner, researcher and practice respiratory lead, who teaches in the workshops says: 'Leadership and communication skills are underrated. The more I understand and practise these skills the better I get. I have been able to improve patient care by learning and listening to others and helping to change systems.'

**Clare Cook**, physiotherapist and co-lead of the programme, says the leadership skills she has learned have helped her too as clinical lead for respiratory services at Bristol Community Health, to develop and expand services at the social enterprise. She says: 'The time spent away at the Respiratory Clinical Leaders meetings has helped me reflect on my goals as a team leader and learn from peers across the country in similar positions. This has boosted my confidence and understanding of the respiratory community and has enabled me to be a more rounded professional and in turn deliver better patient care.'

'The workshops have introduced me to project management in a practical and useful format, giving me templates and processes for planning projects and service development in the work place. They have also helped me to improve on skills such as reading academic literature understanding national policies and better understand the structure of health services. It is great to attend such high quality training which is free for members of PCRS-UK.

'The diversity of practitioners who come to the meetings means I always learn something new and feel enriched by spending time with people who are all striving to make steps to progress services for respiratory patients.'

**Dr Stephen Gaduzo**, co-lead of the programme, says: 'The programme is about enhancing your natural leadership expertise and nurturing the skills that you may not even realise you have, so you can improve care for more than the individual patient sat in front of you.'

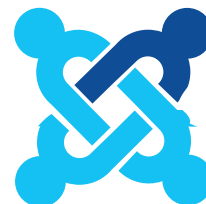


Stephen, who went to the first workshop in 2007, says the programme gave him the confidence to present at meetings, become part of the North West Respiratory team and eventually PCRS-UK Chair. 'I would say to anyone who is, or maybe (even reluctantly), a respiratory lead of any description or magnitude, come along. It's free, due to a big investment in you by PCRS-UK. It's fun, supportive, and who knows where it might lead.'

### A doctor inspired to lead an integrated team with patients at the centre



**Dr Helen Ward**, consultant respiratory physician, New Cross Hospital, found the support of the Clinical Respiratory Leaders Programme invaluable when, six months into her promotion to consultant, she took over as lead of a new respiratory action network in Wolverhampton.



This initiative had been set up by her predecessor, Dr Lee Dowson, to integrate services and move respiratory care closer to home. It has been taken in new directions under Helen's leadership.

The RAINBOW group (Respiratory Action Network for the benefit of Wolverhampton) pulls together all the respiratory leads from primary, community and secondary care and a CCG representative for regular meetings to discuss respiratory matters.

Developments include:

- Multidisciplinary team meetings held every fortnight to discuss patients with chronic respiratory conditions.
- Respiratory hospital outpatient treatment clinics to prevent admissions. These clinics provide a single point of access for patients with any respiratory problem who a healthcare professional is concerned about and may need admission to hospital.
- Respiratory in-reach into the Acute Medical Unit where a consultant is available seven days a week to provide a specialist opinion for patients with acute respiratory problems. A nurse completes discharge bundles and coordinates early supported discharge for respiratory patients.
- Rapid intervention team, a senior community nursing team available seven days a week to assess, do observations and prescribe, providing crucial support to help keep unwell patients at home.
- Helen ran joint community clinics for a while in GP practices to engage with practitioners and boost practice nurse respiratory skills.
- She now does a monthly joint palliative/respiratory clinic at the local hospice with one of the palliative care consultants with patients with end stage respiratory disease.

Since setting up these services, hospital admissions, readmissions and length of stay have been reduced for COPD

patients. Joint working across primary and secondary care has resulted in shared learning.

Helen explains that the key to the success of this initiative has been the importance of good communication. Each sector now appreciates and understands each other's workload and pressures and are able to share frustrations and ideas for solving problems. 'You have to be politically sensitive and aware of the bigger picture when working across healthcare sectors like this. Communication is probably the most important aspect of working together, it is about building relationships and building trust. If you build trust, people will come and talk to you. If people don't communicate with each other then integrated working is never going to happen. This is the way forward - everybody working together with the patient in the centre.'

Helen says the Respiratory Clinical Leaders Programme equipped her with the skills and confidence to make things happen. 'The workshops teach you how to develop yourself as leader in that they give you the tools for internal reflection, how to lead people, how to work as a team and how to deal with challenging people. You also learn practical skills on topics such as developing a business case and understanding your target audience.

'Crucially the programme gives you networking opportunities to meet others who are going through similar experiences. Communication is key. It's about giving people support who haven't got much confidence and to say - you can do it. The programme provides people you can go to if you are unsure about what you are doing or want reassurance.

'I've grown in confidence as I've gone along. What has helped me is being able to identify a group of primary care leaders that I can go to who think that what I'm doing is right and who give me support. The Respiratory Clinical Leaders Programme has opened up another group of people that I can rely on for a GP or primary care perspective or reassurance,' she says.