

In the blink of an eye...



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And in the blink of an eye, it's November again. Almost Harrogate, almost Stop the Pressure Day, almost time to be head down into winter, bed pressures, staffing challenges, flu, norovirus and probably yet more COVID-19 patients.

All this in a time of political and social unrest that hasn't been seen since the 1970's and 80's, strikes, fuel (and everything else) having massive price rises, inflation, mortgages going through the roof, but of course a pay rise that for some meant they were worse off.

How do we support our staff through this, how do we make sure we don't burn out? It is a really troubling time for all of us. Despite all of the pressures, we are constantly asked to do more (usually with less), deliver improvements, deliver efficiencies, meet targets. Is this even possible?

I guess it depends on how you look at it — can we make improvements that deliver better outcomes for our patients and streamline care processes — if so, isn't that actually relieving our burden a little? Fewer patients with wounds that heal quicker reduces the caseload, having space in the caseload means you have time for health promotion and delivering preventative care, which again means there are even fewer people developing wounds, which means the real cost savings and clinician time being freed up to focus on other aspects of patient care. But isn't that like Utopia? It sounds amazing in theory but the reality of getting there is impossible. In order to successfully make those changes and deliver quality improvements, you need time and head space to plan and engage and pilot, and who has that time in the current hamster wheel of care delivery? As we lurch from one urgent task to another, how do we find the time to deliver the care we want to give and our patients deserve?

Maybe we need to take a long hard look at what is truly important and what genuinely makes a difference to patient care, and what is done because it has always been done or because of defensive practice. What difference would it actually make to a patient's care delivery if you didn't validate every single pressure ulcer? What would really happen if you didn't attend a meeting and just read the notes? What would happen if we had a national wound

assessment chart, or a national pressure ulcer policy etc, so you don't all have to spend hours cooped up in a room developing your own versions, reinventing wheels, wasting hours and hours of clinicians' time, doing things that don't play to your strengths. Why not just adopt one that has been done by someone who has a flair for doing that kind of thing?

I don't know if we will ever get there, but — oh my goodness — how much time would it save? I really don't understand why as a National Health Service we don't have national documentation? I can't tell you how many hours I have spent in meetings debating the format of a form. Should it be portrait or landscape, going through the same steps about readability and equality assessments... WHY? Do it once and do it well; the requirements for most forms should be the same everywhere. If I go into a fast food restaurant and look in their kitchen, they will have the same form for checking fridge temperature irrespective of which city or even which country I am in. Why can't we do the same (for patient temperature, obviously — not the fridge!).

It feels like it gets harder and harder to do our job — our real job: delivering the best care we can to our patients, because of admin and red tape. Perhaps we need to take a stand and strip out what isn't important. Perhaps we need to band together and agree our paperwork or digital version of rather than all working individually with providers.

It is a time of huge frustration for clinicians. Everywhere we look, people are taking early retirement or just leaving because of the impact of working on their quality of life. We need to do what we can to help each other through this. I for one am not seeing any light at the end of the tunnel yet and certainly don't expect to through winter. So, take care of you and those you are responsible for's mental health as well as their physical health. Do NOT feel guilty if you are ill, take the time off to recover; You will come back stronger than if you struggle through.

Make the most of this time at Harrogate to learn, to share, to offer support to your colleagues and, most importantly, to have a very brief period of letting your hair down because you are among friends. We have missed seeing all of you. It's great to be back!

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