

**Retrieval Advisory Group
March 2021**

NORS TEAM REFRESHMENTS

Background

In 2020, NHSBT carried out a survey amongst NORS surgeons and perioperative staff. One of the themes that emerged was around time pressures and team members' inability to access refreshments prior to working off site over extended periods of time, which contributes to tiredness, low morale, and possibly impacts on performance.

In response to the survey, the commissioning team has undertaken a piece of work to scope the feasibility of providing refreshments for the team at the time of mobilisation.

The initial proposal was that the consumables tariff could be reduced by £25 per retrieval, and money paid to the transport provider who would purchase sandwiches, crisps and drinks in advance of collecting the NORS Team.

Unfortunately, this initial proposal raised several legal, contractual, safety and logistical issues that could impact upon NHSBT, the transport provider and members of the retrieval team. Most importantly, this could lead to accusations of inequality – NHSBT employs people who regularly work away from base, yet the organisation does not provide them with refreshments (staff are instead encouraged to claim reimbursement for meals taken off site).

Discussion has also taken place regarding the other risks associated with this proposal, as follows:

- Extending the terms of the recently awarded transport contract could expose NHSBT to challenge from other providers who may feel the extension of this service should have been offered out to tender;
- There are several risks surrounding expired food, contamination, and allergic reactions, and this raises questions about liability/indemnity/insurance and whether the transport provider really is the right organisation to provide this service;
- This process would be complex to establish. There is no foolproof system for NHSBT to monitor whether refreshments had been provided for the team which exposes the organisation to the risk of fraud.

The benefits of such a proposal would need to outweigh the risks and NHSBT would need to be able to justify providing the service from a contractual and legal perspective, given the valid concerns noted above.

Scoping Exercise with NORS Centres

In January 2021, all NORS Centres were contacted and asked how this issue is handled.

The response to the letter was excellent, which demonstrates that this is an important issue to members of the NORS Teams.

One of the main themes is that there is not sufficient time when preparing for mobilisation for members of the team to prepare or purchase food and drink.

The feedback, which has been anonymised and is presented in full in Appendix A, contained some creative approaches to the provision of refreshments, including:

- Staff purchase their own food prior to mobilisation and each claim reimbursement from the Trust.
- One member of the team purchases refreshments for all and claims reimbursement from the Trust.
- Working away from base is considered normal for retrieval teams so no refreshments or reimbursement is provided.
- Reimbursement only under certain conditions (length of journey/retrieval, time of day).
- Refreshments are provided at base by the Trust.
- No arrangements at present.

One of the issues with the “grab bag” solution is the quality of food and drink available. Centre Eight is exploring slightly more creative ways of addressing this issue, by working with local small businesses to provide varied, nourishing, healthy refreshments, in a more sustainable way.

Next Steps

The Retrieval Advisory Group is asked to review the responses, and consider the next steps as follows:

- Given some centres do not have any arrangements at present, in the first instance the feedback should be shared across the service, and all NORS Centres asked to continue to give this issue their attention.
- NHSBT is undertaking a review of the mobilisation KPI and the need for members of the team to purchase food and drink will be built into any new timings.
- Invite the Centre Eight lead to a future RAG to present their solution, including cost implications, and impact on team well-being and performance.

Acknowledgements: Thanks to Hannah Westoby for leading the communications with the NORS Centres, and for collating responses.

Emma Billingham
Senior Commissioning Manager – OTDT
March 2021

APPENDIX A – Anonymised Responses from each NORS Centre

Centre One

Two responses were received from this centre – one from a perioperative practitioner who did not know they were able to claim back the cost of refreshments purchased when away from site for extended periods, and one from the NORS Lead Consultant:

Perioperative Practitioner Response: Our perioperative team has never been told we could claim any money back for food brought, it has never even occurred to us that this might have been an option.

We are not provided with a 'grab bag'. We all tend to bring our own food if able, or buy something before we leave base or before we leave a retrieval.

We have one Insulin dependent diabetic on our team, so we always have to ensure they have what they need.

Consultant Response: The issue of access to food and drink has changed considerably over the years and not only since COVID stopped the team eating in the vehicles while travelling.

In CENTRE ONE, we have had three different transport providers since the beginning of NORS in 2010. Provision of a variety of drinks and dry food was something that started when our second provider won our transport bid. Our drivers also carried a credit card that allowed them to pay for warm food while en-route after long retrievals or back-to-backs. This was to the discretion of the driver and we used this service within reason. We really appreciated this and created a feeling amongst the retrievals members that we were looked after as part of the team. This was one of the parameters we looked at when awarding the contract to this company as their "customer service" was significantly better than other providers.

Sadly, when we moved to the National Transport Contract things changed significantly. Not only were the credit cards not being used but it became rapidly apparent that stops for nourishment were not welcomed. The constant monitoring of the whereabouts of the team by NHSBT and [the transport provider] made us feel that we were being tracked and stops made the team unavailable for another mobilisation.

Since IMT was given the National contract, things have not improved. The difficulties mustering two vehicles and the inadequacy of these are a recurring problem.

We will look at our NHS conditions and terms of contract as we are not aware of these. Certainly, the current retrieval contract includes no provision for refreshments for the retrieval team members.

I could understand how refreshments provided by NHSBT through the transport provider before retrieval will incur some logistical issues. However, in my opinion the major problem of nourishment is not before but after the retrieval. Most can get food or drink from home at the time of mobilisation. Getting it after hours of travel and operating is the more challenging but then much easier for the transport provider's driver.

It sounds as NHSBT are willing to compromise on "the hour to muster" to pass the cost of team nourishment to the individual Trusts rather than the transport provider. I might have misunderstood the final paragraph of the letter.

We would be delighted to hear the experience of others.

Centre Two

Service Manager: We discussed your recent communication re NORS refreshments at our NORS Debrief meeting last week.

It has been a topic of discussion amongst the team many times in the past.

Our plan here at CENTRE TWO is:

The simplest solution for NORS Refreshments/Food

1. NORS Team leave the CENTRE as normal with the IMT vehicles.
2. Stop at Asda open 24/7 (5 mins away)
3. Each individual can then stock up with their own supplies for the trip if needed.
4. Depart for NORS destination or airport as per normal with each individual's requirements.

Centre Three

Theatres Team Leader: This was an issue with CENTRE THREE NORS team but we have decided to ask the team to buy their snack from their own money and keep the receipt. They can claim back the money individually through our expenses application. I have encouraged them to use it but it seems it is too [much] hassle for them to claim as the money will be return back on salary day.

We were suggesting to have a debit card that the NORS team can use, if they need to buy snack/food, but it is too complicated on where to get the budget. We did also try the grab bag from our own money but it did not last as we haven't got the support. They were suggesting to get some sandwiches from our kitchen before leaving the Trust, but it did not work too.

I'm looking forward to [hearing] from you and hoping we can standardise in future.

Centre Four

NORS clinical lead: In reply to the letter attached – we have a retrieval fridge in the coffee room which is stocked with bottled water, fizzy juice, crisps, sweets and some nature bars and dried fruit. This is topped up regularly to ensure there is always a good supply for the team going out on any retrieval. All items are packed into an ice boxed for transport.

With regard to staff claiming monies back - all staff are entitled to claim back £5 meal cost for any retrieval they are sent on. This is submitted through expenses.

Hope this helps and happy to answer any question you may have.

Centre Five

Clinical lead of the NORS team: To support members of NORS team is important to maintain good quality and sustainable service and "refreshment" support is so minimal but such a crucial part of this initiative.

NHS employer has responsibility to guarantee compensatory rest during work duties (when staff can access refreshment) but does not have duty to provide food.

We explored option to provide food to NORS On-Call team, but we found multiple obstacles to implement (responsibilities, food licence, financial implication, etc.).

Therefore, we recommend a team does regular risk assessment and takes regular break when possible to have refreshment.

This has been always challenging due to nature of business (unpredictability, delays, etc.). Accessing refreshment on retrieval is even more challenging during pandemic (closed catering places, etc.).

In my opinion, the NHSBT should put in place some arrangement either to provide refreshment or extra time to NORS team to access food.

Happy to be involved in further discussion,

Centre Six

NORS lead: I am glad to let you know the situation at our Trust has improved, and each NORS team member can claim £10 refreshment expenses for out of region/out of hours retrievals that take more than 6 hours.

Centre Seven

Practice Educator, Theatres: With regards to the action that the CENTRE SEVEN team regarding refreshments, we are claiming it as subsistence allowance (please see attached copy from AFC).

Centre Eight

NORS Lead: I can confirm as the new NORS lead I am keen to address this issue and circulated your letter to all our team. We have had several discussion and hope to take forward some ideas from our side.

The problem for a number of years that has failed to ever be addressed on a [long] term basis has been food and refreshment. However one of the impacts of COVID has been the different optics and prisms we look through to improve and innovate in challenging time.

The problem currently remains:

- Regular and sustainable supply chains of food and drink
- Food and drink that is both healthy nutritious and appealing.
- Food and drink that is readily available to staff often on minimum muster times of 1 hour.
- [Being] able to have opportunity to have both cold and hot meal options
- To avoid having to ask ambulances with NHS advertisement waiting in drive through of McDonalds or KFC.
- Reimbursements policies are cumbersome and appear complicated for staff wanting compensation for a few pounds that often means they don't bother applying.
- More recently the transport services have been erratic in their provision of food and refreshments and due to covid restrictions having members of the team eating and drinking in cold lay-by or carparks.

Our conversations have been as follows:

- As the CENTRE EIGHT NORS service I believe we should be partnering up with local businesses to promote community partnership . These companies would be organic friendly sourcing food locally.
- These community businesses would ensure that food is prepared in 'go packs' and delivered to hospital at regular intervals and the menus changed and altered overtime to avoid boredom. An example of a local business is this who have supported local school teachers during covid crisis <https://www.leanlunch.co.uk/daily-menus>
- The issue of storage is under consideration and is not a deal breaker and our Charge Nurse will support this organisational issue and ensure funding is in place.
- Some have also mentioned provision of hot food on certain occasions such as long distances or long retrieval times. I think this is entirely reasonable and I support the use of retrieval leads to pay for this with their card and then reclaim all expenses via the trust to be paid directly into their salary. I think it is not efficient to ask everyone to pay and then ask for reimbursement for things cost perhaps a few pounds as the effort of trying to get payment back sometimes offset this.
- The fact that NHSBT has issued out a call for a help on this matter suggested others are in similar positions. I think this is an opportunity now to not only solve this long standing issue we have had but also show CENTRE EIGHT as a unit with innovative ideas such as promoting local businesses, supporting health and well-being with nutritional food of high quality to our staff, delivered and prepared in environmental friendly carbon neutrals ways and the hybrid model also allows us to have hot food when needed but ensuring reimbursement to retrieval leads direct to salary without arduous claim procedures.

The outcomes and current status are:

1. CENTRE EIGHT to start a NORS Twitter page in which we promote our service but also the health and well-being of your teams.
2. We will show case the partnership of local businesses that is keen on organic, healthy food delivered in carbon neutral or efficient ways. The food would be prepared for us, menus regularly changed and delivered to us throughout the week. All packaging would be recyclable and this would be encouraged.
3. We now have 3 local business groups that for this specification all within 4 miles of the hospital. Hot food that can be taken in go packs and eaten at donor centres is being considered that requires minimal prep and most likely just a microwave or hot water.
4. Our retrieval leads have been given clear information and ways to be reimbursed quickly and efficiently through the monthly wage system for paying for any retrieval team members food.

We hope to tackle the issue of storage areas and refrigeration in theatre or other real estate which makes collecting the packs easy at time of packing equipment. Currently we have a core group of people including surgeons, theatre staff and management looking at this to hopefully address our local challenges. Happy to share our progress in the weeks to come.

Centre Nine

Senior Sister, Theatres: Here in CENTRE NINE as a trust we provide the transport company with £25 per retrieval and the drivers then provide the team with a grab bag with food and water in. This is not always available when the team are picked up and if not, they will go and buy food on the way to wherever the team are going. The bag usually contains non-perishable

foods but also a sandwich per person. It is stored in a cool bag and usually contains cold ice packs also.

Centre Ten

Acting Directorate Manager: Currently we do not reimburse any of the retrieval staff for refreshments when out on retrieval. I believe the Trust views the normal working environment to be away from the hospital so the team members' normal working day is out on retrieval.

Most advice I have received relates to staff who are predominately office based then asked to attend a course or meeting etc. away from their normal work base for prolonged times then they can claim some limited reimbursement for expenses.

I think the reasoning is, if you are office based then you would provide your own meals/refreshments in the same way therefore if your working is normally away from the hospital then you would be expected to provide your own in the same way.

There does not seem to be anything specific which relates to staff like the retrieval teams whose normal working base is out away from the hospital

Centre Eleven

NORS Clinical Lead: NORS teams have a "grab bag" containing a variety of foods that have long shelf life, don't require refrigeration, ready for consumption or require only hot water, which is widely available.

The grab bags are provided by the trust. In practice, lead retrieval nurse purchases everything and claims back from the trust. Very straight forward. For example we have noodles, various hot pots, soups, fruit bowls, sweet bars, oat meals and oat bars, raisins etc.

Centre Twelve

Team Leader, Nursing: I am the Team Leader for the nursing side of the CENTRE TWELVE Team, and have discussed this issue with the team to send you some feedback.

Unfortunately we don't have any innovative suggestions to offer, I'm afraid. From the Team's point of view, claiming costs, and the provision of food items hasn't been the main issue or cause of concern. It has been the *when and where* to actually eat that has been the problem.

- The term "refreshments" is somewhat misleading, it makes it sound like a drink and biscuit is all that is needed, when sometimes a decent meal is what the team actually require.
- When to eat – Mobilisation times are often already very pushed, so there isn't always time to eat before leaving base hospital. Similarly, the team are often finding they are encouraged to go straight into theatres and have no time once they arrive at the donor hospital but before meeting with the SN-OD.
- Having mobilised, and travelled, the theatre team are going to be scrubbed for some hours before having any access to food and drink. Even a 9am call to mobilise, having

just had breakfast, mobilise by 10am, travel for two hours, straight into theatre, scrub for 4 hours and it's 4pm or later before any food or drink could be taken.

- If the team are returning with an organ on board, they have been denied a break. We are exploring if an additional vehicle could be provided to transport the organ and team separately.
- Where to eat – the guidelines are that masks are to be worn while in transit to the donor hospital so being able to eat in the vehicles is not an option, and this was the main time to eat either purchased or food from home.
- We're finding coffee rooms aren't being used for handovers, particularly during the day to maintain social distancing, so handover has been in theatre or anaesthetic rooms, where food and drink cannot be consumed.

A review of mobilisation times would be gratefully received, and acknowledgement of the hours the team are working, and factoring in time for food and drink.