PEER SUPPORT AND COLLABORATION **AMONGST CRITICAL CARE OUTREACH TEAMS:** THE ROLE OF A NEW REGIONAL PEER **SUPPORT NETWORK DURING THE COVID-19** PANDEMIC

### **Objectives**

We describe the structure, role and impact of a newly created regional South London Network (SLCCON) in supporting outreach services from different hospitals with Covid-19 challenges.

# Introduction

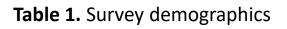
Critical care outreach teams (CCOT) provide an outward facing service, supporting acutely unwell patients on the wards. During the last two surges of the coronavirus (Covid-19) pandemic, CCOTs played a pivotal role in providing support to ward teams. This was particularly evident in the management of acute non-invasive respiratory support, delivered outside of Critical Care areas at a scale not previously seen in the United Kingdom.

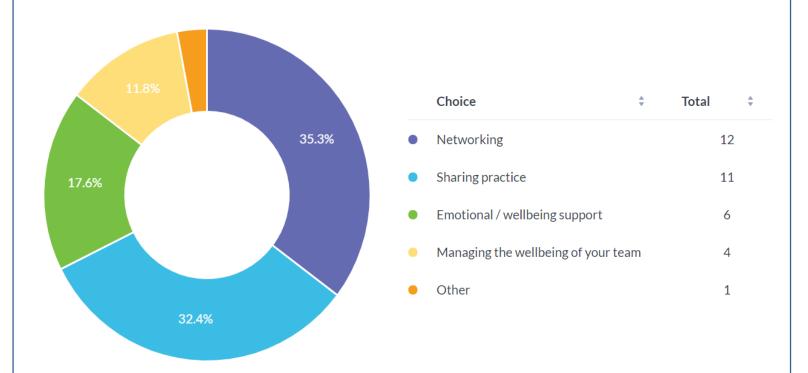
# **Methods and Materials**

SLCCON

Results		
Characteristics	Number	Percentage of total
Nurses	13	93%
Doctors	1	7%
AHP	0	0%
Service lead	8	57%

**SQA21** 





### **Figure 1.** Benefits of network membership

•The SLCCON was established in June 2019, and it comprises of 25 individuals, both nurses and doctors. The SLCCON represents seven hospitals within South London, including both district generals and larger tertiary referral hospitals.

•The aim of the network was to explore the opportunities for collaborative working and standardisation of CCOT service delivery.

### •Survey

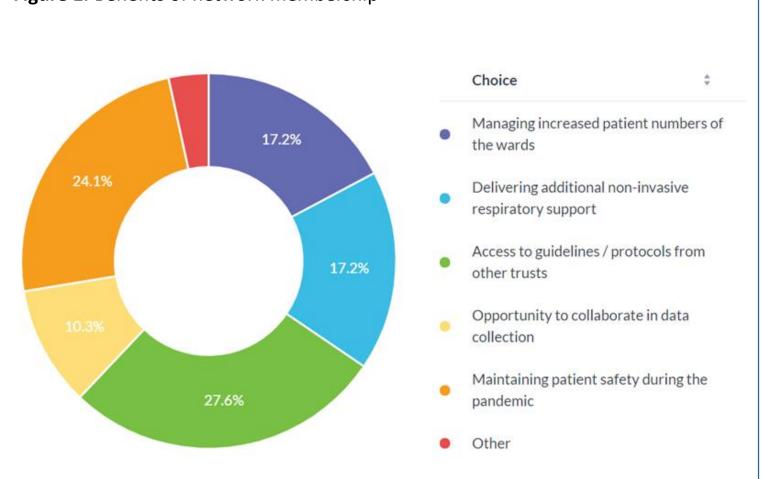
•A cross-sectional, anonymous online survey (SurveyPlanet)<sup>®</sup>, containing 13 mixed questions, was emailed to all members of the SLCCON (n=25). The aim of the survey was to understand the impact of the network on individual and team experience.

•Questions were generated by two senior team members in consultation with CCOT leads.

•The survey was emailed in August 2021 with one reminder emailed at two weeks.

# **Results**

Out of 14 (56%) respondents who completed the survey, 13 were nurses (93%) and 1 was a doctor (7%), 8 (57%) were service leads (Table 1) and 6 (43%) were team members. Eleven (79%) respondents had attended network meetings, and of these, 11 (100%) thought the network meetings had been useful in providing peer support. The main perceived benefits of the network were opportunities to collaborate with colleagues and the sharing of practice (fig. 1). In addition, respondents perceived access to guidelines from other hospitals and advice on maintaining patient safety during the pandemic to be the most important support received from the network (fig. 2). All participants expressed a wish for the network to continue. Respondents suggested further potential going forwards to share and standardise data collection and practice, and to collaborate on publications and the delivery of education (fig. 3).



**Figure 2.** Benefits of the network during the Covid-19 pandemic

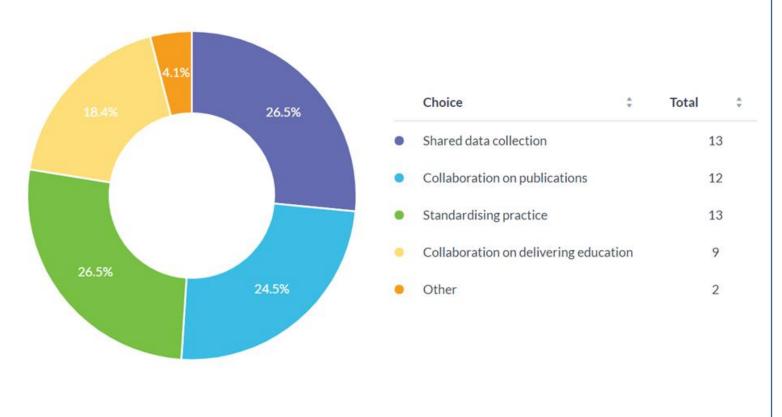


Figure 3. Core focus for the network in the future

### **Conclusions**

### Despite the relatively low number of responses,

the results indicate a positive impact of the SLCCON. The opportunity to share practice and the provision of important wellbeing and peer support during a period of extreme pressure and stress, demonstrates the importance of the network. The future of SLCCON was associated with educational, research and data sharing opportunities.

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