

Chair's Welcome

I would like to extend a huge thank you to everyone who attended the NNNG Conference this year. Early feedback indicates that it was a success and feedback from delegates have given us ideas for next year!

The speakers were all absolutely first class and those of you who attended would have been privileged to hear patient experiences of their nutritional care. I think this input is incredibly important and as a result of this we are forging closer links with the Motor Neurone Disease Association and the Progressive Supranuclear Palsy Association. We already have strong links with PINNT.

It was also wonderful to put faces to names and it was great to see everyone relaxing and forgetting about the stresses and strains of the 'day job'.

I hope those of you who attended Conference are finding their gastrostomy and weighing guidelines useful – I am afraid the rest of you will have to wait a little longer for the guidelines to be online when you can download them, hopefully by the end of October 2013.

If you are a 'newbie' to the NNNG or even if you are a long standing member, I strongly urge you to try and come to our Conference next year. It is the only one of its kind organised by nurses doing the job for nurses and dietitians in the field – two days full of practical tips, good theoretical knowledge and sharing ideas with nutrition nurses and other HCPs from

all over the country. PLUS we do throw a good party in the evening!

At the AGM we announced a few Committee changes. Neil is stepping down as Secretary on 31st December 2013 and I would once again like to say a huge thank you for all the work he has done for us in the past three years. He has kept us all on the straight and narrow and his efficiency and organisational skills will be sadly missed. I am, however, delighted to say that Carolyn Best has agreed to take on the role of Secretary. We have also welcomed Angie Davidson Moore to replace Lena Walliman, and Bridget Penney will be joining us in January 2014 when Neil stands down.

I was also honoured and privileged to be asked by the Committee to stand another term as Chair of the NNNG. During my first term I have had the pleasure of working with some fantastic people and hope that during my second term I am able to continue to assist the NNNG in growing from strength to strength. Nutrition is on the national agenda at last and I am determined to use my role to ensure it stays that way and that the NNNG plays an important part in formulating policies and guidelines that have a positive impact upon patient care.

Thank you all for helping making the NNNG such a vibrant, friendly, welcoming group of people.



NNNG Conference 2013

Compiled by the NNNG Committee

This year's NNNG Conference was held at the St Johns Hotel in Solihull ensuring that overnight accommodation was available on the same site as the spacious conference facilities. Over one hundred delegates attended Conference with most attending both days.

Day 1

Liz Evans began the proceedings by welcoming delegates and setting the scene by providing an overview of reports and initiatives released over the past twelve months and discussed their impact upon the way we currently provide nutritional care. Liz recognised the impact of the Cavendish Review the Berwick Report, National Minimum Standards for HCAs (Skills for Health) and changes from the NMC – Revalidation for Nurses.

She discussed the importance of listening to patients and their family regarding the care they receive, and the importance of moving away from relying on complaints long after an event has occurred to identify problems and the need to change practice. She announced the NNNG's commitment to provide patient groups with the opportunity to exhibit each year and our plans to forge stronger links with patient groups and recognised the strong patient representation throughout Conference.

This was followed by a key note speech from **Andrea Cartwright**, Consultant Nurse Nutrition, Basildon and Thurrock University Hospitals NHS Foundation Trust, who discussed the role of the nutrition nurse specialist and how we can be financially justifiable and sustainable in the current climate of healthcare austerity. Andrea's presentation delivered key areas for the audience to focus on to not only demonstrate key quality indicators but also financial incentives to maintaining and investing in nutritional services.

Mark Grumbridge, Nurse Advisor, from the MHRA (Medicine and Healthcare products Regulatory Agency), gave an interesting glimpse into the process undertaken by the MHRA to investigate a healthcare product once a problem is reported to them. Mark also highlighted educational packages the MHRA had developed in order to inform and educate healthcare. He challenged the NNNG to develop an educational programme for nasogastric tube insertion and aftercare, for which the Committee accepted the offer and will be working with the MHRA over the coming months.

As always industry was well represented at this year's Conference, but in addition the NNNG Committee invited the **Progressive Supranuclear Palsy Association** and the **Motor Neurone Disease Association**. Nutritional support is particularly vital for patients who develop either of these diseases as many of them may experience increasing difficulties eating as their disease progresses. *The Motor Neurone Disease Association* supported not only the NNNG symposium this year but provided a key link to delegates in building links with the organisation to support the patients they care for. The symposium presented delegates with a multi-professional perspective of the disease with a medical focus on current research findings into the causation of disease and disease progression given by **Professor Karen Morrison**, Consultant Neurologist at University Hospitals Birmingham

NHS Foundation Trust. This was followed by **Heidi Jew**, Motor Neurone Disease (MND) Nurse Specialist, Queen Elizabeth Hospital, Birmingham, discussing the nursing role in supporting patients with MND at home. Heidi also included a video showing a patient's perspective of living with MND who made use of her gastrostomy tube to enjoy the odd glass of wine. The symposium concluded by a heart rending presentation from the partner of a patient living with the disease who talked about the everyday problems they face and the care they had received.

During the first break of the day delegates were invited to visit both industry and charity stands but to also take time to view the posters that had been submitted by delegates. This is the first year that posters were included as part of the Conference, with seven posters being displayed ranging from protected mealtimes to the accuracy of x-rays when checking the position of nasogastric tubes.

A prize of £250 toward educational development was offered to the poster most voted for by delegates.

The Conference was also used to launch two further sets of NNNG guidelines, the first a Good Practice Consensus Guideline for the *Management of Exit Site Problems around Gastrostomy Tubes for both Adults and Children* and the second regarding obtaining an *Accurate Body Weight Measurement in Adults and Children*. All delegates were offered a hard copy of the guidelines ahead of their release on the NNNG website in late October.

Neil Wilson facilitated an interactive session of Hot Topics based on some of the issues that had promoted discussion on the Google groups. Topics included nasogastric tubes, traction removal of gastrostomy devices in the community and PICC with purple hubs, to name a few.

The first day of Conference closed with members of the NNNG being invited to attend the AGM. During this meeting Liz Evans highlighted the various activities the Committee had been involved in during the previous year and announced changes in the Committee resulting from the resignation of **Lena Walliman** in March 2013 and the planned resignation of **Neil Wilson** at the end of his current term of office in December 2013. Liz thanked Neil for all his hard work and commitment. **Angie Davidson Moore** will be taking over Lena Walliman's post for the remainder of that term of office (see biography) and **Bridget Penney** will be joining the Committee in January 2014 to fill the post left vacant by Neil. The Committee gave a brief overview of membership, changes made to the NNNG website, financial status of the charity and the various publications to which the NNNG has contributed over the previous year. Full minutes of the AGM will be verified at next year's meeting, with draft minutes being circulated over the coming months.

Annual Conference Evening Dinner



Following a short respite to undertake some shopping or just relax, delegates, industry and the Committee returned to the conference hall for the evening dinner. The theme for this year's Conference Dinner was a medieval joust. The hall was filled with medieval ladies and knights and a couple of monks and wenches. Robin Hood and the Three Musketeers also made an appearance. To see all the pictures members can login to the members' area of the website: www.nnng.org.uk/members-home/nnng-conferences/

Day 2

The second day commenced with a presentation from **Linda Warriner**, Home Enteral Feeding Specialist Nurse & Florence Nightingale Award Recipient, from Bishop Auckland Hospital, County Durham, who regaled delegates with her experiences in Australia during her six week scholarship in April 2013, when she visited to explore enteral tube feeding practices in Melbourne and Sydney. Linda was followed by a motivational speech by **Professor Elizabeth Robb**, Chief Executive of the Florence Nightingale Foundation, London, who discussed the importance of nursing scholarships in promoting nursing as a profession and nursing practice. She highlighted the different types of scholarships available and encouraged delegates put themselves forward for a Florence Nightingale Foundation scholarship.

The second key note speech of the Conference was presented by **Professor Gordon Carlson**, Consultant and General Surgeon, Salford Royal NHS Foundation Trust, who discussed *The surgical management of the patient with an abdominal catastrophe*. The knowledge and experience and very practical approaches to managing such patients was warmly received by delegates.

This was followed by representation by **PINNT** (Patients on Intravenous & Nasogastric Nutrition Therapy), who presented a very real experience of living with an enteral feeding tube. This presentation reminded delegates to consider the aesthetic and emotional needs of our patients, as well as addressing the technical side of care provided. It was clear by listening to the presenter that many patients' who require long-term support feel that their opinions and lifestyle are often not considered. Delegates were urged to fight for some stability in care provision for patients, and to provide clear and concise information for patients, relatives and carers.

Following lunch the winner of the poster prize was announced. **Hazel Rollins CBE**, Clinical Nurse Specialist, Luton and Dunstable University Hospital NHS Foundation Trust, was the winner of the £250 educational prize for her poster entitled *Audit of x-ray reports of the position of nasogastric tubes*.

John Speakman, Locum Consultant in Palliative Medicine from University Hospital Birmingham NHS Foundation Trust, delivered an informed presentation addressing issues that are important to patients – nutrition and hydration issues in palliative care. John

discussed real patient cases, highlighting issues that had arisen in his practice and explored the problems and solutions that affected those patients with delegates.

Rebecca White, Consultant Pharmacist in Nutrition and Intestinal Failure, and **Charlotte Harris**, Specialist Pharmacist in Nutrition and Surgery, both from Oxford University Hospital NHS Trust, explored why antibiotic locks were necessary in the salvaging of central venous devices and the discussed the various products available on the market, including the effectiveness of each product.

Winnie Wagambo, Vascular Access Team, Oxford University Hospitals NHS Foundation Trust and Vice Chair, National Nurses Nutrition Group, concluded the presentations on the second day of Conference with her discussion on an audit on the use of positive displacement IV connectors in the prevention of central venous access device (CVAD) occlusions. The presentation explored the different types of needless connectors on the market and their mechanism and discussed the outcomes of the audit which showed a reduction in CVAD occlusions since the introduction of the positive displacement needless connectors.

Liz Evans closed the Conference by thanking delegates for attending and for contributing both during the presentations and with suggestions for presentations for next year's Conference.

The Committee will reconvene again in November 2013 with Mark Allen to review this year's Conference and start planning for the year ahead.



Angie Davidson Moore Joins the NNG Committee

Angie Davidson Moore trained at King's College Hospital and has worked within specialist nutrition roles since 1994. Angie worked for 12 years at St Mark's Hospital, London, where she developed the nurse consultant role and experienced the initial designation of St Mark's as one of the two national centres of excellence for adult Intestinal Failure services.

After becoming a Mum and family being the top priority, Angie moved to the South West and enjoyed the position of CNS Nutrition at University Hospitals Bristol and the Royal Devon & Exeter Hospital. Although still passionate about nutrition and patient care, Angie craved new and exciting challenges; an opportunity arose resulting in Angie taking the leap out of the NHS and into industry where she now enjoys a Lead Nurse Regional Manager role based in beautiful Devon.

Angie has enjoyed studying, attaining a diploma and degree in nursing, a certificate and post graduate diploma in psychodynamic counseling and a Masters in clinical nutrition. Angie is also a non-medical prescriber.

Angie's professional interests include intestinal failure, parenteral nutrition, psychology and psychotherapy, psychological wellbeing living with long-term conditions, and education.



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