

SPRING EDITION 2022

THE RALPHER



We'd love to know how many people read our newsletter.
Please scan this QR code if you do. Thanks!

HI THERE!

Thanks for taking time out to read The Ralpher. You've already met Zodiac (front cover), a disadvantaged kitten being treated with a team effort from our referral community and Team Ralph.

This edition is full of news, advice, stories and tips from Team Ralph. We've got Ziggy's remarkable story following a road traffic accident, an interview with our new Assistant Clinical Director, Meri, plus an insightful article on the impact of psychological safety on veterinary teams. We hope you enjoy it!

Take care,
TEAM RALPH

Team announcements

Celebrating our people!

We're excited to welcome two new clinicians to our team; Andrew Foster joins us as an Anaesthesia and Analgesia Clinician, and Cristoforo Ricco joins as a Neurology and Neurosurgery Clinician.

Andrew joins us from the Royal Veterinary College (RVC), where he undertook his specialist training and continued there as a senior clinician until he achieved European specialist status in November 2021. Andrew's areas of specialist interest include managing critically ill patients, particularly those following trauma, as well as those with advanced respiratory and cardiac disease. He has published research in a number of areas, focussing mostly on ultrasound-guided locoregional anaesthesia.

Cristoforo is a Board-certified Diplomate in Neurology and Neurosurgery. Before joining The Ralpher, Cristoforo worked at Willows Veterinary Centre and Referral Service. Prior to this, he has worked at a number of other referral centres and completed a three-year residency in Veterinary Neurology at "Fregis", a small animal hospital in

Paris. Cristoforo thoroughly enjoys all aspects of veterinary neurology, but particularly enjoys inflammatory disease, neuroanatomy and surgery.

Another cause for celebration as our Internal Medicine Nurse, Katie, has achieved her Nurse Certificate in Medical Nursing, and our Emergency and Critical Care Nurse, Etta has been awarded her Nurse Certificate in Emergency and Critical Care. These awards illustrate Katie and Etta's passion and commitment to providing exceptional care to our patients. We are incredibly proud of their achievements!

A big hooray for our ECC Intern, Clara, who has been offered an ECC Residency at the RVC. It's a huge achievement to be selected for a residency at the RVC, and we are immensely proud of Clara. Clara will embark on her specialist training in the summer, so we don't have to say goodbye just yet!

CRISTOFORO

ANDREW

KATIE

ETTA

CLARA





Ziggy, a 3 year old Working Cocker Spaniel, was on a walk in the summer of 2021 when he was hit by a car travelling at high speed.



Tales from the clinical floor

He was rushed to his daytime family practice who treated him for shock using fluids and analgesic drugs. AFAST [Abdominal Focused Assessment with Sonography for Trauma (ultrasound protocol)] showed a small amount of free fluid around the bladder, but no other free fluid was noted. Ziggy was deep pain negative in both hindlimbs, but exhibited anal and tail tone. Ziggy was not stable enough to undergo an anaesthetic for a thorough radiographic assessment, so initial conscious radiographs were taken which revealed several comminuted pelvic fractures.

Ziggy's practice sought advice from our Orthopaedic Team to discuss the complexity of Ziggy's injuries and if a repair was conceivable. After considering Ziggy's injuries, along with his anticipated prognosis and quality of life, the decision was made to refer Ziggy to The Ralph.

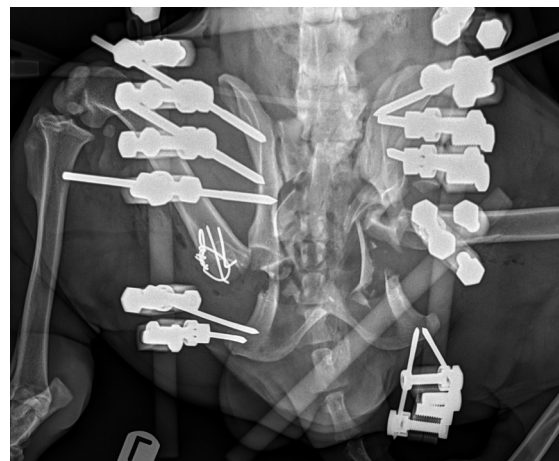
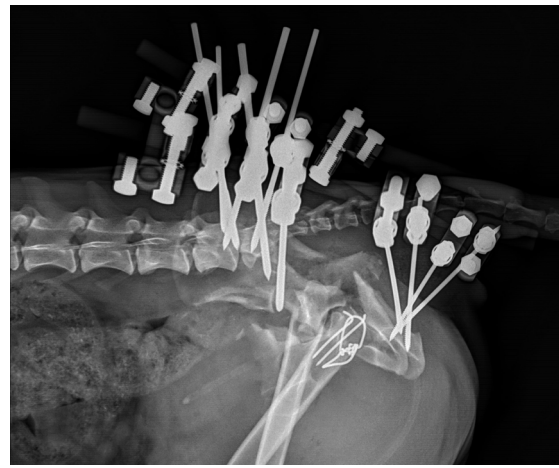
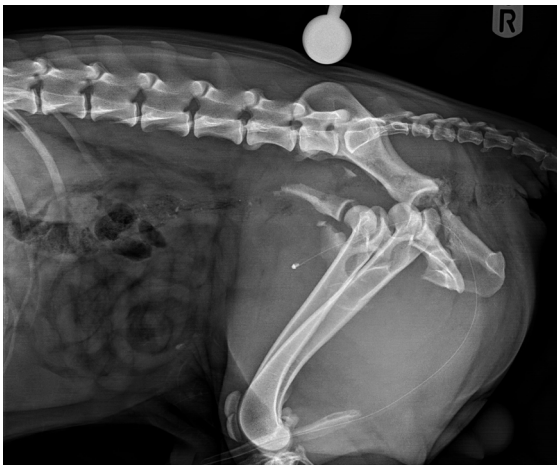
Upon arrival at The Ralph Ziggy was admitted to our Dog ICU. He was given a fentanyl CRI, and a kennel with a pressure-relieving mattress to support his pelvis. A urinary catheter was placed for his comfort and our ICU team monitored him very closely for the next few days.

Once Ziggy could safely receive an anaesthetic a series of X-rays were taken which included a positive-contrast retrograde urethrogram in order to assess the integrity of the urethra and bladder. Orthogonal radiographs revealed a severely comminuted and displaced fracture of both acetabuli and pubis, with subsequent luxation of both hips. The right side appeared to be in a much worse condition than the left. Turn over for X-rays...

TURN THE PAGE FOR X-RAYS...

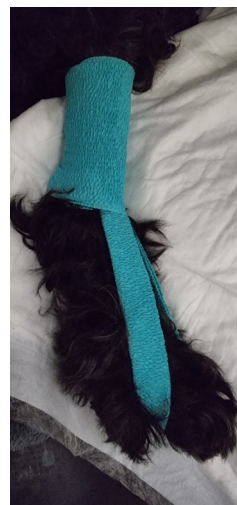


Tales from the clinical floor



Our Orthopaedic Team, led by Alan Danielski, performed a bilateral femoral head excision; on the left side the cut was made less oblique to allow for a total hip replacement to be performed, should Ziggy ever require it in the post-operative period. An external fixator was then placed to somehow realign the bones and support the entire pelvis whilst all the fractures healed.

Ziggy recovered well from the surgery, and commenced his rehabilitation two days post-op with our Physiotherapy team, led by Kim Sheader. The intensive rehabilitation programme included two rounds of exercises each morning and afternoon. As Ziggy's limbs were swollen Kim would start the sessions with soft tissue massage, followed by exercises to improve his function and biomechanics. Ziggy's right pelvic limb showed neurological deficits and he was knuckling on his right paw. To help correct this, Kim created a "sciatic toe up" sling. This sling hooks underneath the two central digits and pulls the foot up into



a 'normal' posture, helping to reduce the amount of knuckling Ziggy did when he walked. Ziggy was eventually discharged 12 days later with a tailor-made home care plan which included strict crate rest for six weeks along with the physiotherapy exercises set by Kim.

Ziggy returned two weeks later for a post-operative check-up. He had made encouraging progress; he was now able to sit by himself, although due to the bulky external fixator around his pelvis he did find this challenging. He was able to complete some basic exercises set for him, including walking over poles. Ziggy's sciatic deficit (neuropaxia) on his right side was still evident due to the nature of the trauma and



the complexity of the fracture and it was also clear he had quite marked muscle atrophy. It was essential that Ziggy continued with weekly physiotherapy sessions to improve his strength and mobility, so he was referred to an ACPAT physiotherapist much closer to his home.

At Ziggy's nine week post-operative assessment, Alan performed a thorough orthopaedic examination and postoperative X-rays. Orthogonal radiographs showed progressive bone healing at the fracture site on the left side and the ilium-ischium axis appeared satisfactorily aligned. Unfortunately, on the right side, due to the severe displacement of the acetabular bone fragments, no significant bone healing was noticed and the ischium appeared significantly displaced ventrally. Fortunately, the pelvic canal appeared of the correct width. Ziggy had his external fixator and all the pins removed. Ziggy was discharged with instructions of room rest and lead-only walk for six additional weeks. It was still imperative that Ziggy continued with his physiotherapy at a constant and intense rate.

Ziggy was assessed again in December 2021, and again he was making good progress. He continues to wear a boot to protect his skin as he occasionally knuckles when he walks. He regularly attends physiotherapy sessions and completes his exercises at home, but there is potential that he has now reached a plateau with his rehabilitation.

Ziggy's road to recovery has been a long one but with the dedication of his carer and the continued support from the veterinary and physiotherapy teams, Ziggy has recovered in the most unexpected way. All this is down to care, determination and collaboration by all involved with Ziggy's recovery. It is likely that Ziggy will have lifelong constraints on his right limb but his overall recovery has been incredibly successful.

YAY ZIGGY!



Tales from the clinical floor

“This is the nastiest pelvic fracture I've seen in my professional life. My initial hope for a functional recovery was incredibly low at the beginning. Bearing that in mind, it is absolutely astonishing how far Ziggy has come. Truly incredible!”

**- Alan Danielski,
Orthopaedic Surgeon**



FELINE ORAL PAIN SYNDROME (FOPS)

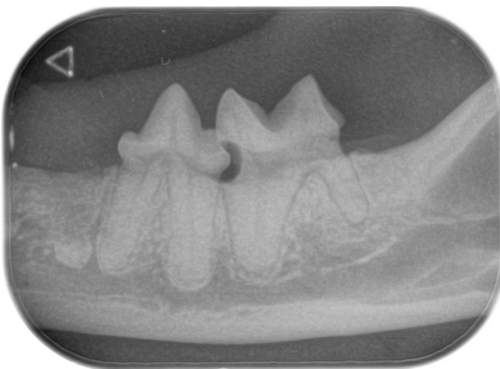
What is feline oral pain syndrome (FOPS)?

FOPS is a pain disorder of cats with behavioural signs of oral discomfort and pawing at the face, potentially resulting in tongue and lip mutilation.

What are the clinical signs of FOPS?

- Pawing at the mouth
- Chewing and licking excessively as though something were stuck in the mouth
- Oral discomfort during clinical examination
- Severe cases can show mutilated tongue and lips where surgical repair may be necessary

DEE DEE'S STORY



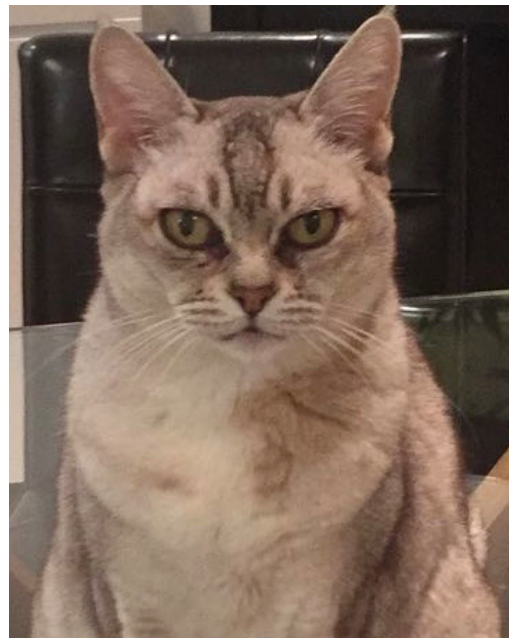
17 year old Asian Semi Long-Haired feline friend, Dee Dee, initially came to The Ralph back in March 2020. She had been referred to us with a history of pawing at her mouth and suspected FOPS, alongside chronic kidney disease (stage 2), diabetes, and auditory stimulus generated seizures. Dee Dee arrived at The Ralph and was initially seen by our Cardiology team who diagnosed her with isorhythmic atrioventricular dissociation. Due to this, Dee Dee required an adjusted anaesthesia protocol (avoiding alpha-2 agonists and bupivacaine) for her dental procedure. Before conducting the extractions, we first took dental radiographs and charted the teeth with dental disease. Multiple teeth were extracted, to help relieve Dee Dee's pain.

Dee Dee returned to The Ralph in January 2021 as she was exhibiting signs of oral pain again, even whilst on gabapentin. She was initially seen by our Cardiology team again, who confirmed she still had isorhythmic atrioventricular dissociation. She was able to have another GA, where we removed more teeth affected by dental disease which were causing her facial pain. She went home the next day once she had recovered.



In December 2021, Dee Dee presented for a check-up and potential extractions of her four remaining teeth. Once again Dee Dee was seen by our Cardiology team before anaesthesia was performed. However, dental radiographs showed she did not have any issues and the four remaining teeth were healthy. We conducted a scale and polish, and suggested she no longer undergoes anaesthetics unless there is supragingival/obvious dental disease.

With cases of FOPS similar to Dee Dee's, the condition is episodic and will need check-ups at least every 12 months. Some cases need to visit their practice more frequently as they can start showing clinical signs of FOPS a few months after treatment.



By nurses, for nurses

TIPS FOR MANAGING FOPS...

1

Talk to your clients with feline pets from the very first consultation about oral hygiene. Teach them how to lift the lip and look at the teeth so their cat gets used to it.

2

Always do a dental check when examining your patient.

3

Prevention is better than cure. So encourage your clients to brush their cat's teeth on a regular basis.

4

Arrange nurse consultations to teach carers how to brush their pets teeth, and recommend they use Veterinary Oral Health Council-approved products.

5

When suspicious of FOPS, ask your veterinarian to take a look. Talk to the client about a dental procedure to take dental radiographs and assess for any dental disease.

6

Ask your client to provide a video of their cat's behaviour. Burmese cats and Burmese-X breeds have a high prevalence of FOPS, with an onset when middle-aged or older.

7

If you are unsure about how best to approach a FOPS diagnosis and/or treatment then seek advice or referral to a dental specialist.

WRITTEN BY DENTISTRY NURSE, TONI DOWD



TOP 10 TIPS FOR WORKING NIGHTS



“Hi! My name is Charmaine, I am one of the night nurses here at The Ralph.

I have been working out of hours for 10 years and have learned a lot during this time, so here are my tips on working night shifts...”

EAT WELL

It sounds very obvious but making sure you eat three well balanced, healthy and nutritious meals, will keep your energy levels flowing throughout your shift. Eat a hot meal before your shift starts so that your brain is well fed before you have to use it. Have a meal or snack during your shift, and then a meal before you go to bed - there is nothing worse than waking up out of your sleep because you are hungry!

Save time! Prepare your meals during your days off to save time in between shifts, allowing you to prioritise sleep.

KEEP HYDRATED

Your brain is 80% water, so when you're dehydrated it can lead to fatigue, being less alert, moodiness and mental drowsiness (brain fog) (Benton D, 2011). It's recommended that you drink 1.5-2 litres of clear fluids, ideally water, a day. To help with this I carry a reusable 1 litre bottle of water and a 500ml hot flask to work. If I finish both I know I have met my quota.

PRIORITISE SLEEP

Adults aged 18-64 years old should get 7-9 hours of sleep a night. (Suni, E. 2021). So, it's really important to prioritise a good sleep schedule and environment.

When looking at your sleeping environment you need to consider controlling:

- The light - use black out blinds, wear an eye mask and avoid using your phone or laptop in bed
- Noise - wear earbuds to bed or choose a quiet room
- Sleep length - where possible stick to the same length of sleep each day
- Temperature- turn your heating down a couple of degrees so you don't overheat



HAVE A BREAK

In 2011 a staggering 1 in 10 nurses reported that they were involved in an automobile accident due to fatigue from shift work (American Nurses Association, 2011), and I personally know two nurses who are very lucky to be alive today. So if you can, grab a lift with a friend, take public transport or walk home. If you do have to drive, please be aware of 'drowsy driving', this is when you yawn a lot, drift from your lane or can't concentrate whilst driving. Please pull over and take a break/15-20min nap/ have some coffee. Ideally a nap before a long journey home would be best.

DON'T RELY ON CAFFEINE

I am not saying don't drink coffee, as we all can agree it can improve our mood, memory and physical performance, but be mindful of how much you are drinking. Drinking more than 400mg/day of caffeine (Doepker, C et al, 2018) on a regular basis can lead to negative health events such as high blood pressure, increased stress levels, depression and poor sleep quality.

If you need an energy boost try a Berocca tablet, or snack on slow energy releasing foods throughout the night.



INVOLVE YOUR FAMILY AND FRIENDS

Tell your friends and family that you will be starting to work the night shifts. This will help improve their understanding of your work schedule and how it affects both you and them.

Building dedicated time in your weekly schedule to see friends and family will help you to maintain these relationships, and will also boost your wellbeing.

CREATE A ROUTINE AND STICK TO IT

It's not always easy to stay on top of your responsibilities both in and out of work when working at night. Invest in a diary, notepad or app to write a list of everything you need to do, and help plan when it is most practical to complete these tasks. I carry my Filofax everywhere, because I love the feeling when you tick a completed task.

Try to group your night shifts into blocks so that your body is not constantly in adaptation mode and can get used to one schedule. When starting your block of night shifts try to stay up as late as possible the night before and then sleep/rest until the following afternoon.



By nurses, for nurses

STAY ACTIVE DURING THE NIGHT

If you are working in a practice that is not that busy at night, you can find the shift very long and tiresome. To keep yourself alert I'd recommend keeping yourself moving with extra tasks, like doing the washing, cleaning or organising things, as it keeps your blood flowing and your mind active, rather than clock watching which only brings about fatigue quicker.

EXERCISE REGULARLY

Exercise helps combat some of the adverse effects of working nights like high blood pressure, and helps to improve your mood and mental function (Harvard health, 2012). It can also be an efficient way to spend time with friends and family as you plan to go to the gym together or play in a team sport.

SET YOUR INTENTIONS AND MINDSET FOR THE SHIFT

Give yourself some time before your shift starts to put yourself into a positive mindset and a 'can do' attitude. This can be done at home or on the way to work and can include things like meditation, exercise, yoga, dream-journaling anything that makes you feel centred and ready to start your day. Personally, you can find me singing my heart out to my 'let's do this playlist' in the car as I arrive at work.

SUMMARY

Adjusting to night work can be challenging in the beginning. It takes time for your mind and your body to adjust to a new routine so give it time and share your concerns with your colleagues, manager or someone who has worked nights for a long time, as they can help.

Overall, being organised, creating a personalised weekly plan to help manage your time, preparing your food in advance, ensuring you have a good sleep and lastly listening to your body will help you survive when working at night.

References

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INTRODUCING MERI... OUR NEW ASSISTANT CLINICAL DIRECTOR!

Meritxell Peris Fernandez, Meri for short, joins Team Ralph as our Assistant Clinical Director. Here she tells us why she believes the greatest asset of any veterinary practice is the team.



Tell us about your journey so far...

Since I was a little girl I have always felt a great love for all living creatures; I still remember the day when I found out that there was a job called a “Veterinarian.” Since that moment I knew that was what I wanted to do in my life.

When I got into vet school I worked hard so that I could become the best vet I could be in order to help my patients in the best possible way. When I started to work, my motivation to continue to improve myself to provide better care for my patients meant I pursued further studies to gain a GP Certificate in Feline Medicine and more recently the Advanced Veterinary Practitioner Certificate in Small Animal Medicine.

Over the years, I have realised that as well as my passion for helping my patients I am also highly passionate about supporting pet carers while their animals are

sick. I am an empathetic and caring person and saw that my interactions with carers made a big difference for some families. I felt that I had a responsibility to support the carers as well as the pets.

I have also had the opportunity to mentor younger vets and to see how vulnerable they are to the challenges within the profession such as high workload pressure, unsupportive working environments and the pressure of public opinion. It saddened me to see how the motivation of young vets can be crushed and to see how easy it is to get burned out in our profession.

After 25 years of practising and feeling passionate about delivering the best veterinary care in an ethical, supportive and compassionate manner, in an environment where the wellbeing of the team is a priority, The Ralph seemed the right move for me.



What is your proudest moment?

During my years working in Emergency and Critical Care I was exposed to many life-threatening situations where I could see the direct impact of my actions on the successful outcomes of my patients and that was very fulfilling. My proudest moments have been the situations where pet carers or colleagues have told me that I have had a positive impact on their emotional wellbeing or on their careers. To have a positive impact on someone's life - animal or human - fills me with joy and pride.

What one thing do you feel not many people understand about the veterinary profession?

I really hope to be wrong but I would say that not a lot of employers understand the true meaning of this: "the main asset of any business are the employees."

Ensuring that working conditions and the wellbeing of the team are thoroughly considered and constantly reviewed is crucial to be able to offer the best possible service to our patients.

The type of people that choose to work in the veterinary profession are often caring and selfless individuals, and we will go the extra mile to ensure that we do our best to look after our patients, sometimes to the detriment of our own personal needs. Unfortunately that means that we are susceptible to physical and emotional burnout. I believe that any employer in this profession should understand they have a big responsibility towards their team.

Employers should ensure that they promote a positive and supportive working environment to best allow their team to thrive in their personal and professional lives. Regardless of our roles we all have the responsibility to look after each other given the challenges we face.

How do you feel about starting your new role here at The Ralph?

I feel very happy and grateful to be part of the management team of a hospital whose values and views are so in line with mine. I am also fully aware of the responsibility that comes with my role. I embrace the challenge and will do my very best to continue to promote a safe and happy environment where our

team can thrive in their jobs so that we can deliver the best possible service to our referring practices and patients.

As a passionate clinician, taking a non-clinical job for the first time in my career is a big personal step which I didn't take lightly, however, I strongly believe that I will be able to continue helping the patients indirectly by promoting a supportive working environment so that all the clinical team can excel in what they do.

What advice would you give to someone following the same path as you?

Despite all the challenges, if I was given the chance I wouldn't change my professional choice and I would do it all again. The advice I'd give to anyone who asks me about being a vet is that you should only do it if you truly love it. Veterinary is not a lucrative profession for most of us. For me the true pay off is the satisfaction that helping my patients, the carers and my colleagues gives me. The job requires hard work, long hours and high emotional involvement. However, if you truly love it, all the hard work is worth it.



PSYCHOLOGICAL SAFETY IN VETERINARY PRACTICE



Human factors + patient safety

When asked what makes a high-performing team, what would many of us say? It is easy to assume that having the most talented/highly qualified team members, expensive equipment or the best resources would lead to the most successful outcomes.

However, a worldwide study conducted by Google in 2015 identified that:

“...who is on a team matters less than how the team members interact, structure their work, and view their contributions”

The study concluded that five key factors differentiated the most successful teams from the rest, including the perceived meaning/impact of their work, dependability within the team and structure/clarity of roles and goals. Interestingly, amongst these factors, by far the most significant was that of psychological safety.

WHAT DOES PSYCHOLOGICAL SAFETY MEAN?

Psychological safety is defined as an environment in which all team members feel safe; to take interpersonal risk and to speak up without fear of judgement or animosity.

Speaking up may involve sharing a new idea, calling out a risk to patient safety, the admission of a need for help, offering constructive feedback or adding (opposing) opinions to a discussion. Data from polls in the US show that only 3 out of 10 workers feel it is safe to speak up. There is also data from professional environments showing that safety incidents can be reduced by up to 40% by increasing the perception that individual opinions matter within a team.

Compassion, integrity and humility from leaders are essential ingredients, however they by no means complete the jigsaw when it comes to building psychological safety. As also described by Stephen Covey in his book, ‘7 Habits of Highly Effective People’, effective team relationships are built around trust. When considering trust in this sense, as a member of a team, it matters whether or not we trust that our unique skills and values will be utilised, that our individual differences will be accepted/welcomed and that we will be treated fairly and respectfully if we raise a concern or make a mistake.



Human factors + patient safety

WHY DOES PSYCHOLOGICAL SAFETY MATTER WITHIN VETERINARY TEAMS?

There are numerous examples within the field of patient safety research in healthcare, linking aspects of psychological safety and patient outcomes. One such example is the subject of 'just culture', which is the basis for an alternative to a blame culture and must be built upon a foundation of psychological safety. A just culture is a key ingredient to learning, improvement and ultimately for safe patient care.

In one NHS trust (NHS MerseyCare), following a process to embed a just and learning culture, within less than three years there was a significant increase in objective patient safety metrics, together with a 75% reduction in team disciplinary cases and a positive increase in staff satisfaction survey results.

Feeling safe is one of our most fundamental human needs and for the sake of our patients, our team and our carers, we believe it is vital to take very conscious and intentional steps to measure, review and continuously improve levels of psychological safety.

At The Ralph, we annually perform a safety culture survey which was validated for use in veterinary teams by the University of Nottingham. The results of this survey help us to form follow-up focus group discussions, which together with patient safety observations and case discussions allows us to understand and review various aspects of psychological safety within the team. This is an example of multiple strategies which are currently in place and forms a central pillar within our 'Ralph Safe' patient safety programme.

For further reading, we recommend material by Professor Amy Emdondson of Harvard Business School such as; 'The Fearless Organization: Creating Psychological Safety in the Workplace for Learning, Innovation, and Growth'.



WRITTEN BY DAN TIPNEY

Head of Culture, Patient Safety and Human Factors

Dan is a human factors specialist with experience across multiple professional disciplines including healthcare, sport and aviation. He oversees the patient safety and human factors programme at The Ralph.

IN CONVERSATION WITH ELLIOT + RACHAEL...



Check out this ECC-themed interview between

Elliot Kneba BVetMed PgDipVCP MRCVS
ECC/ICU Operational Lead + Emergency and Critical Care Staff Clinician

+

Rachael Birkbeck DVM MVM DipACVECC MRCVS
ECC Diplomate + Vet Student Support Officer

They discuss all things ECC: inspiration, insights and ECC hacks in this sub-20 minute video available on YouTube: just search “In conversation with Elliot and Rachael” to find it.



Have you listened to our
“Uplifters and Moodshifter”
playlist on Spotify and YouTube?
CURATED BY TEAM RALPH. GET LISTENING!

Who do you feel grateful for?

Tell them you thought of them when you saw this.

THE RALPH[®]
centre of excellence + compassion