

**Naomi:** Hello. I'm Naomi Clatworthy. I'm an Acute Oncology Nurse Consultant in North Devon and UKONS Board Member for Acute Oncology.

**Philippa:** Hello, I'm Philippa Jones. I'm an Acute Oncology Nurse Advisor and I led on the development of the UKONS 24 Hour Triage Tool.

**Naomi:** So, Philippa, you led the team in 2007. So how did that process start?

**Philippa:** Well Naomi, I was a late starter coming into oncology, my first love was accident and emergency and I spent many, many years working in urgent care. When I came into a chemotherapy unit, I was really well supported and trained to deliver chemotherapy and look after patients who were receiving systemic anti-cancer therapy. But I soon realised that actually we provide advice over the telephone really frequently to patients and there was no training and education or support for me or my colleagues in delivering that.

I looked at the situation and considered how I might apply some of the experience I had in accident and emergency, to telephone assessment for our group of patients. We use risk assessment a lot in health care practice. But this seemed to be an area that we hadn't risk assessed and that we didn't use supportive tools and training. This really worried me. I was concerned about patient safety and felt vulnerable myself. I felt that we needed to move forward with this.

Luckily, I found lots of people around the country who wanted to help me with that, and we got together under the UKONS umbrella to develop this wonderful tool.

**Naomi:** I can understand that Philippa. We didn't receive any formal training in regards to telephone assessment or clinical inquiries via the telephone within our nursing studies. And so how did you take your concerns forward?

**Philippa:** Well, I was privileged to join UKONS at the very beginning UKONS when started and got together at a meeting where we were asked to raise any concerns that we had or projects that we wanted to take forward. And I suggested that we should look at advice lines and training and safety of staff and patients when providing this service. And people in the room were asked to go and join in groups and lots of people came to join my group and we took this forward.

It took us 3 years, and we had a mix of oncology and haematology nurses and we involved the wider multidisciplinary team. And we had a large pilot around the country.

We'd obviously hit the right note and people were concerned about safety and we launched the tool in 2010.

I know that you're very involved in supporting the UKONS Tool now Naomi and have led on the development of these educational modules. Can you tell us a little bit about them and why learners should complete the training?

**Naomi:** So we are really excited about the training modules that we are developing. So we have delivered huge amounts of training face-to-face across the UK for the past 14 years. But

actually what's really needed is some online training and we're hearing that from multiple sources.

So we're really excited that we've been able to start to develop these modules, that will be accessible for all and it will be completely free. These modules will not only look at the Triage Tool, but telephone assessment itself and also the governance processes in place to support the patients and staff as well.

**Philippa:** We know, of course, that this is the first step in the training programme don't we? We've gathered a group of experts who've developed this really well-rounded group of modules, but actually people need to be supported in their workplace. We need to have competency assessment and training and ongoing competency assessment as they proceed with their triage practice.

The next steps are clinical supervision in practice and completion of the recognised competency framework. Your organisation may have specific policies and guidance that they wish you to follow when undertaking triage.

**Naomi:** We really hope that this training will be helpful, supportive and informative.

**Philippa:** We would like to ensure that staff feel confident, comfortable and safe when undertaking triage and that patients are safe at all times.

**Naomi:** Good luck!