

<b>BADGER GROUP MEETING NOTES</b>		
<b>Tuesday 6<sup>th</sup> November 2018 at 1 pm</b>		
<b>Meeting Room, Gem Centre, Wednesfield, Wolverhampton, WV11 3PG.</b>		
		<b>Actions</b>
<b>1.</b>	<b>APOLOGIES:</b> Subramanian Mahadevan – Russell's Hall Hospital	
	<b>PRESENT:</b> Ruth Moore – SSBC Neonatal ODN Kate Palmer – Royal Stoke Melanie Sutcliffe – Royal Wolverhampton Hospitals Chrisantha Halahakoon – Royal Wolverhampton Hospitals Tamsin Lane – Walsall Manor Hospital Sharon Turner – Royal Stoke Sarah Crowshaw – Royal Wolverhampton Hospitals Anna Griffin – Royal Wolverhampton Hospitals Claire Cockburn – Russell's Hall Hospital	
<b>2.</b>	<b>MINUTES OF THE 23<sup>rd</sup> MAY 2018</b> All agreed.	
<b>3.</b>	<b>MATTERS ARISING</b> <u>Baby Diary</u> CC has written a SOP which is now out for comments from the neonatal team. The nursing staff are on board and enthusiastic. Envisage implementation, if no adverse comments received by the end of November deadline. <b>CC to circulate the SOP to the group once finalized and implemented.</b> RW plan to use baby diary once EPR is up and running. <u>RSV Algorithm</u> MS completed audit, however unable to differentiate between those in oxygen and those in air. <u>Thermoregulation Guideline</u> MS thermoregulation flow chart circulated to the Group. <b>MS to forward flow chart to Kathryn McCarron for inclusion in the Neonatal Guidelines.</b>	<b>CC</b>      <b>MS</b>
<b>4.</b>	<b>NNAP REPORT</b> KP went through her report. Steroids SaTH performance 5% lower than 2016. <u>Quarterly Benchmark Measures</u> Consultation measure is changing so it will only have grades of ST3 or above for doctors. ANNPs should be on the middle grade rota to count. . CC stated that Dudley was an outlier for this measure and has implemented an action plan to address this, <b>CC to share action plan with the Group.</b> NEC – this is a new item and not all cases may have been identified If NEC inputted as a diagnosis in Badger a pop up form comes up requesting further information. <b>Units need to do work on ensuring robust data capture.</b> Breastfeeding – strengthens case for network audit about initiation of breastfeeding. KP to add this to report and units should engage in Network project to obtain neonatal BFI status. <b>KP to update report and recirculate including names of units doing better or worse. SC to add to Network Board agenda for January 2018 meeting and KP to present a brief paper.</b> Blood cultures are not included in network level report as data is not good enough. <u>Unit Posters</u> <b>All to share their action plans – SC to request and circulate to the group when all received.</b> TL has taken NNAP performance to Trusts Audit meeting and they have taken breastfeeding measure to Board to see how this can be supported.	<b>CC</b>      <b>All</b>   <b>KP</b> <b>SC</b> <b>KP</b>   <b>SC/All</b>
<b>5.</b>	<b>ANY OTHER BUSINESS</b> <b>Data Analyst, Rachel Salloway, please ensure she has access to your Trust data.</b> CH impact of primary reason for admission on discharge diagnosis on SHIMI	<b>All</b>

	(Standardised Hospital Mortality Index) regarding coding. This can be changed in Badger for babies that die, ie cause of death should be placed at the top in discharge summary 'principle problems/diagnosis during stay' and ensure it isn't prematurity if not appropriate. Badger Con meeting in British Museum next week, several people attending.	
6.	<b>DATE AND TIME OF NEXT MEETING</b> <b>SC to liaise with KP and MS for date in May for next Badger Champions Group meeting.</b> <b>SC to liaise with KP and MS for date in March for Audit and QI Competition.</b>	<b>SC</b> <b>SC</b>