

FOLLOW UP GROUP MEETING NOTES		
Wednesday 6 th February 2019 at 10 am		
Room 6, Mid Staffordshire Postgraduate Medical Centre, County Hospital, Stafford, ST16 3SA		
		Actions
1.	<p>APOLOGIES: Kate Palmer – University Hospital of North Midlands Menik Upatissa – Russell’s Hall Hospital, Dudley Subra Mahadevan – Russell’s Hall Hospital, Dudley</p>	
	<p>PRESENT: Helen Schubert – Russell’s Hall Hospital, Dudley Ruth Moore – SSBC Neonatal ODN Sarah Carnwell - SSBC Neonatal ODN Sarah Nicklin – Walsall Manor Hospital Sagarika Ray – Princess Royal Hospital, Telford Richard Heaver – New Cross Hospital, Wolverhampton</p>	
2.	<p>MINUTES OF THE 7TH NOVEMBER 2018 Agreed with the following amendments: Item 4 – SN remembered Kate Palmer explaining how to find information on babies that move area in Badger. KP to provide explanation/screenshots for the Group to use. Item 5 – SC to amend the dates of the audit to the 1st July 2015 – 30th June 2016. SC to check with City hospital if there is a lead for long term follow up to join this group</p>	<p>KP SC SC</p>
3.	<p>MATTERS ARISING <u>Chair of the Group</u> SC to approach KP to ask if she would be interested, on the basis of the Terms of Reference. <u>Social Emotional and Adaptive Questionnaire Consensus on Completion</u> HS completes and enters the data on Badger. SN, SR and RH do not use. RH thought that Kate Palmer did use the questionnaire and that the information was used in order to score an uncooperative child. KP to feedback the usefulness of the questionnaire, how she analyses the data and if she would be willing to provide training to others in the Network on how to use it. The Group will then agree if all going to use the questionnaire going forward. HS has got spare copies of the questionnaires she can distribute to others in the group to use if it is agreed that all with use them in the future. <u>Four Year Assessment</u> RM felt that the Group had discharged its responsibility and that it was other services responsibility to take this forward. This can be removed from the agenda for subsequent meetings and only be included in the future if any member of the group has an update from their area regarding this to share with others.</p>	<p>SC KP</p>
4.	<p>ANNUAL AUDIT OF OUTCOME DATA <u>Template for Audit of Compliance</u> SaTH’s data had been circulated by SR prior to the meeting. RH had done the wrong dates due to an error in the notes he had done January 2016 to December 2016 and will get the correct data for 1st July 2015 – 30th June 2016 in line with the NNAP year. SR confirmed that it was all babies less than 30+6 weeks gestation. Babies that move into the area are not on Badger, see Matters Arising. All agreed did not include passively cooled babies, only those that had active cooling or should have had active cooling. Babies that are not discharged from your unit, are not included in your units Badger list. HS to contact NNAP Lead on the neonatal unit to get assistance with data extraction. All suggested asking a junior doctor to assist in completing the audit. SN has got the data however she has not got the outcome data as this requires going into each individual record. The Group discussed the subjective nature of the outcome. If only an isolated delay in one area, for example speech, then all agreed would not consider the child to be delayed. SR extracted the classification of delay that was entered into the Badger system by the person undertaking the</p>	<p>RH HS All</p>

	<p>assessment. RM suggested that all complete the audit then look at the results to see if there are any differences between units and whether they are differences in babies or differences in perception/assessment. SC to ask KP if she has completed the audit for Stoke. All agreed that in future it would be easier to record data prospectively at the time of assessment rather than trying to capture the information retrospectively. If seen in clinic can use that assessment even if not formal named assessment. All agreed to complete the audit of compliance with NICE guidelines at each appointment. RH to add the appointments that the NICE guideline recommends into the audit proforma and send to SC for circulation to the Group. SR and RH to confirm if they are available to give a presentation at the Network Audit /QI Competition on the 20 March 2019 on the process, proforma and issues with implementation of the Network Audit of Compliance with the NICE Guidelines, with an aim that the actual data will be presented next year at the Audit /QI Competition. SN to adapt the current proforma into a tick sheet for use in clinic for each baby and send to SC for circulation to the Group for comments. Then all can input this data into the same spreadsheet for collation and comparison across the Network.</p>	<p>All SC RH SR and RH SN and SC</p>
<p>5.</p>	<p>NETWORK GUIDELINE <u>RM Update Regarding Amendment at Board</u> As it is not a NICE requirement for a formal Bayley assessment, there was a comment at the Network Board that this should be reflected in the Network Guideline. The NICE Guideline recommends a face to face recognized structured developmental assessment tool. All agreed that (Bayley) be removed from the title of the network guideline. The group believed that the guideline should identify bayley as the recommended assessment. RM stated that all Trusts in the Network complete the formal adoption form identifying which guidelines they are following or not therefore if a trust is not using Bayley they are able to reflect that in their returned formal adoption form. RM to ask Stoke to confirm what assessment they will be using instead of Bayleys. The Group to feedback to the Board that four of the units in the Network are using Bayleys. SR to ask Kathryn McCarron for the current updated Guideline, as it is going through the BCGP processes. <u>Badger List of Patients Requiring Follow Up</u> All babies less than 30+6 weeks. The Badger list does not pick up babies of any gestation with other issues such as HIE, etc. SC to ask KP for feedback following her attendance at the Badger Conference with regards to information about follow up and the Badger List and Babies Moving Area. Information can be requested for babies going out of region using the letter template on the Network website.</p>	<p>SC RM Chair SR</p>
<p>6.</p>	<p>ANY OTHER BUSINESS There was no other business.</p>	
<p>7.</p>	<p>DATE AND TIME OF NEXT MEETING SC to liaise with the new Chair of the Group.</p>	