

QIPP Group Meeting	
Tuesday 25 <sup>th</sup> November 2014 at 1 pm	
Seminar Room Route 126, Walsall Manor Hospital, Walsall, WS2 9PS	
Minutes	
1.	<p><b>Apologies:</b> Jo Cookson Claire Cockburn Claire Thompson Wendy Tyler</p>
	<p><b>Present:</b> Alison Moore, Audit Lead, SSBCNN (Chair) Ruth Moore, Network Manager/Lead Nurse, SSBCNN Babu Kumararatne, Lead Clinician, SSBCNN Melanie Sutcliffe, Clinical Effectiveness Lead, SSBCNN Lynsey Clarke, Practice Educator - SSBCNN Sarah Carnwell, Administrator – SSBCNN Tilly Pillay, Consultant – Dudley Maria Francis – Walsall Bashir Muhammad – Walsall Julie Price – Walsall Subramanian Mahadevan –</p>
2.	<p><b>Minutes of the 11 August 2014 Meeting</b> Agreed</p>
3.	<p><b>Matters Arising;</b> <u>NeoNEWS Audit</u> Now completed with 600 cases analysed and 30 midwives surveyed pilots. TP is preparing an abstract for submission to the RCPCH. <b>TP will present results to the Group at the next meeting, SC to put on the agenda. TP to e-mail AM with copy of submission and preliminary findings prior to submission to RCPCH.</b> BK suggested presenting the results at the Quad Network meeting in January.</p> <p><u>Escalation Policy</u> <b>RM is taking a draft policy to the Education and Workforce Group meeting on the 17 December.</b></p> <p><u>Scaling Up Improvement Funding</u> Bids have to be submitted through an NHS organisation in order for that Trust to be responsible for the finances therefore need to agree which provider Trust could submit bid on behalf of the Network. Applications are now closed. RM has registered to receive email alerts if further funding is available. <b>RM to discuss with UHNM, as host of the network and David Loughton as Chair and Chief Exec at New Cross.</b></p>
4.	<p><b>Early Preterm Births Proposal to NDAU</b> The project has now been expanded nationally including the University of Oxford and the University of Leicester, and will commence around the middle of next year.</p>
5.	<p><b>Network Clinical Effectiveness Lead Update</b> <u>Activity and Workload Quarterly Benchmark Report</u> SCBU and TC days are still increasing. Cooling has increased significantly from 8 babies in quarter 2 last year to 14 for quarter 2 of this year. <b>BK and MS to raise with RM the need to include cooling as an</b></p>

	<p><b>exception for inclusion on the Board report.</b> There is a function in Badger to extract babies that have received cooling, Nitrogen, etc. <b>MS to produce a presentation to the junior doctors for all units use stating the data that they are required to input into Badger, explaining why it is important that accurate and specific data is entered and what it is used for.</b></p> <p><u>Standardisation of Transitional Care Criteria</u></p> <p>AM attended a national stakeholder meeting to try to define transitional care. At the meeting they focused on the level of care required by a baby receiving transitional care, such as:</p> <ul style="list-style-type: none"> <li>• 12 hour observations</li> <li>• Phototherapy</li> <li>• Babies above 2.2 kilos and 35 weeks gestation or over</li> <li>• Babies of diabetic mothers with normal glucose levels</li> <li>• Receiving IV antibiotics</li> <li>• Congenital abnormalities requiring additional care</li> </ul> <p>All at the national meeting agreed that the aim of transitional care was to keep mum and baby together where possible. The group stated that transitional care has a different funding mechanism to that of neonatal care. The new definition will feed into commissioning tariffs for 2016/17. Further consultation is to take place prior to a final definition being circulated. Following which models of care will be developed in how TC is delivered.</p>
6.	<p><b>Audit Lead Update</b></p> <p><u>Audit of Term Admissions</u></p> <p>MS has forwarded the presentation of the term admission audit at New Cross. <b>MF to ask Jane to send AM Walsall's term admission data that is collected.</b></p> <p><u>Reducing Term Admissions</u></p> <p>Having looked at the reason for admission on admission in Badger, they are hypoglycaemia, jaundice, sepsis, etc. <b>AM will provide a review of reasons for admission for all units in the Network except Telford who have yet to provide her with access to their data.</b> SaTH have agreed to provide data to AM for network audits, <b>RM to contact Cathy Smith to ask how and who AM needs to contact to request the data she requires.</b></p> <p><u>Neonatal Safety Thermometer</u></p> <p>Maternity are just starting roll out a safety thermometer. RM and AM attended a national meeting looking at developing a neonatal safety thermometer. <b>RM will circulate the notes of the National Neonatal Safety Thermometer meeting once she receives them from NHS England.</b></p>
7.	<p><b>Current Research Update</b></p> <p><b>AM to contact SD regarding current projects in the Network.</b></p>
8.	<p><b>Mortality Review Sub Group</b></p> <p><u>Update from 14 November Meeting</u></p> <p><b>Notes will be circulated with the notes of this meeting.</b></p> <p>BK suggested looking at undertaking one case review in more detail following an Ex Utero death in order to examine both Trusts input and maternity involvement. Looking at getting Trust agreement to do this. <b>BK will discuss with the Group in order to develop practical solutions for this to happen in a timely fashion.</b></p> <p><u>NDAU Mortality Report Update</u></p> <p><b>MS circulated report which will be circulated to the Group with the notes.</b> MS made a number of observations of the data:</p> <ul style="list-style-type: none"> <li>• Stoke have 6,000 deliveries per year compared to New Cross having 4,000 therefore this accounts for the difference in mortality</li> <li>• All babies included in the report died on an NNU except 1, which died during transport following home delivery.</li> </ul>

	<ul style="list-style-type: none"> <li>• Care pathways were only just being introduced during this time period</li> <li>• There is a 25% chance of death if a baby is transferred Ex UT therefore if at all possible must transfer babies IUT.</li> <li>• The results of the report replicate the results of other similar studies nationally.</li> <li>• Telford keeping babies of lower gestations at the expense of transferring higher gestation babies.</li> <li>• Walsall sent out the most babies both IUT and Ex UT, they have 5,200 deliveries per year.</li> <li>• The Network survival rate is improving, following implementation of the agreed care pathways.</li> </ul> <p>The group discussed actions coming out of the report:</p> <ul style="list-style-type: none"> <li>• Need to get maternity involvement in order to increase IUT transfers and decrease Ex UT.</li> <li>• Need to give parent information leaflet at 20 weeks gestation, informing parents that if deliver in Level 3 unit baby has a better chance of survival.</li> <li>• Need GPs, ambulance service and community midwives to help in directing/triaging women to the right unit when go into premature labour less than 27 weeks.</li> <li>• The Network will be sending the action plan to NDAU and the CRG</li> <li>• The reason for death recorded on the death certificate should be written in the notes and recorded in Badger.</li> <li>• SWMMNN have agreed to share their data in order to benchmark our network data.</li> <li>• Walsall have capacity issues for IUT and Ex UT and increased mortality data which is being externally reviewed.</li> </ul> <p>The MBBRACE data will be coming out shortly and NDAU data for 2012/13. <b>SC to put NNAP Report 2013 on the agenda for the next meeting.</b></p>
9.	<p><b>SUI's including NTS Incidents</b>  <u>Sharing Lessons</u>  <b>RM to find out SWMMNN reporting procedure. RM provided a brief outline of the main points in the report which will be circulated to the Group prior to the Board meeting on the 9 December. SC to draft an e-mail for AM to send as Chair of the Group asking units to provide SUI data in a timely manner in order for shared lessons to be discussed by the QIPP Group.</b>  <u>Low Lying UVC's Survey</u>  RM circulated the survey at the time, however the information was brought to the meeting in order that everyone is aware that this complication can occur.</p>
10.	<p><b>Care Pathways</b>  <u>Exceptions Report</u>  There was an increase in quarter 2 of IUT exception from 19 to 26, however there was a reduction in the number of Ex UT exceptions from 46 to 33. <b>SC to circulate the exception report to the Group prior to the Board meeting on the 9 December.</b>  <u>PDA Pathway</u>  A new guideline has been implemented, the documents are on the Network website, <b>SC to circulate link with notes.</b> All agreed that LNU's should not routinely be undertaking PDA's without discussion with NICU. PDA's should be returned to NICU's for after care as complications following surgery are common.</p>
11.	<p><b>Parent Experience Survey</b>  The results of the Picker Survey should be available in March/April next year.  <u>National Neonatal Parent App</u>  RM has secured funding and commitment from Clicky Media to produce the same App that SWMMNN have used for our Network. RM will be taking this work forward with the Education and Workforce Group.</p>
12.	<p><b>Standards Assessment Peer Review Proposal Update</b>  No update.</p>

<b>13.</b>	<p><b>Any other Business</b>  <u>Reconstituting IV's</u>  LC identified that units were reconstituting the same IV several times in order to meet the requirements of the unit and Transport Team. The Transport Team use BWH formulary, units use Northern Neonatal Formulary. All agreed it would save replication of work if all units and the Transport Team used the same. Pharmacist in each of the Trusts need to agree to the same standardisation. <b>LC to speak to Alex Philpott/Lee Abbott in order to take this forward with the Education and Workforce Group, as well as pharmacists in the Trusts.</b></p>
<b>14.</b>	<p><b>Date and Time of Next Meeting</b>  The next meeting will be held on Monday 23 February in the afternoon at the University Hospital of North Staffordshire, <b>SC to book a venue.</b></p>

**ACTION LOG – For the QIPP Group Meeting held on 25<sup>th</sup> November 2014**

Decision / Action	Owner	Timescale
TP will present results to the Group at the next meeting, SC to put on the agenda.	Tilly Pillay and Sarah Carnwell	Next meeting
TP to e-mail AM with copy of submission and preliminary findings prior to submission to RCPCH.	Tilly Pillay	Prior to submission
RM is taking a draft Escalation Policy to the Education and Workforce Group meeting on the 9 December.	Ruth Moore	9 December
RM to take forward with UHNS and David Loughton as Chair and Chief Exec at New Cross, host for submitting bids for Scaling up for improvement	Ruth Moore	Before next meeting
BK and MS to raise with RM the need to include cooling as an exception for inclusion on the Board report.	Babu and Mel Sutcliffe	Before the next meeting
MS to produce a presentation for all units to use with junior doctors stating the data that they are required to input into Badger, explaining why it is important that accurate and specific data is entered and what it is used for.	Mel Sutcliffe	Before next junior doctor intake
MF to ask Jane to send AM Walsall's term admission data that is collected.	Maria Francis	Before end December
AM will provide a review of reasons for admission for all units in the Network except Telford who have yet to provide her with access to their data.	Alison Moore	Next meeting
RM will circulate the notes of the Neonatal Safety Thermometer meeting once she receives them from NHS England.	Ruth Moore	Before next meeting
AM to contact SD regarding current projects in the Network.	Alison Moore	Before end December
Notes of the Mortality Review will be circulated with the notes of this meeting.	Sarah Carnwell	Before end December
BK will discuss case review with the Group in order to develop practical solutions for this to happen in a timely fashion.	Babu Kumararatne	Next Mortality Group meeting
MS circulated report which will be circulated to the Group with the notes.	Sarah Carnwell	Before end December
SC to put NNAP Report 2013 on the agenda for the next meeting.	Sarah Carnwell	Next meeting
RM to find out SWMMNN SUI reporting procedure.	Ruth Moore	Before next meeting
SUI report to be circulated to the Group prior to the Board meeting	Sarah Carnwell	Before Board

on the 9 December.		
SC to draft an e-mail for AM to send as Chair of the Group asking units to provide SUI data in a timely manner in order for shared lessons to be discussed by the QIPP Group.	Sarah Carnwell	Before end December
SC to circulate the exception report to the Group prior to the Board meeting on the 9 December.	Sarah Carnwell	Before Board
LC to speak to Alex Philpott/Lee Abbott in order to take this forward with the Education and Workforce Group, as well as pharmacists in the Trusts.	Lynsey Clarke	Education and Workforce Group
SC to book a venue for the next meeting.	Sarah Carnwell	Before end December