

MINUTES OF THE YORKSHIRE AND HUMBER PAEDIATRIC CRITICAL CARE OPERATIONAL DELIVERY NETWORK EXECUTIVE GROUP MEETING

THURSDAY 19 JULY 2018, 10AM-12 NOON, HATFEILD HALL, WAKEFIELD

Present	Apologies Received
<ul style="list-style-type: none"> • Alison Cowie, Matron for Paediatrics, Rotherham • Angela Hughes, Lead Nurse, SCH • Anna Linden, Consultant Paediatrician, Harrogate • Kathryn Davison, Consultant Paediatrician, Mid Yorkshire • Chris Medd, Consultant Anaesthetist, Chesterfield • Cliff Bevan, Consultant ICU, SCH • Debbie Bray, Deputy Head of Nursing, North Lincs & Goole • Ezzedin Gouta, Paediatric Clinical Lead, Barnsley • Helen Brown, Network Manager, Y&H PCC ODN • Helen Matusewich, Sister, Paediatrics, Harrogate • Jeff Perring, Clinical Lead, Y&H PCC ODN • Jo Whiston, Interim Nurse Manager, Embrace • Karen Perring, Lead Nurse, Y&H PCC ODN • Kay Rushforth, Head of Children's Nursing, Bradford • Lesley Harrison, Matron for Children, Grimsby DPOW • Lisa Gorry, Network Co-Ordinator, ODN • Liz Cottrell, Deputy Divisional Manager, SCH • Murray Wheeler, Consultant, York • Rum Thomas, Clinical Lead, Sheffield Children's • Sian Cooper, Clinical Lead, Y&H PCC ODN • Tim Haywood, Consultant, Leeds • Vanessa Brown, Senior Matron, Children & Young Person, Hull and East Yorkshire • Donna Webb Matron for PICU & Cardiac Leeds • Kirsty Randell, Matron For Children's Services, Airedale 	<ul style="list-style-type: none"> • Alec Musson, Service Manager, Leeds • Elaine Eckersley, Educator, Y&H PCC ODN • Emma Andrews, Interim Clinical Networks Project Consultant • Helen Moore, Consultant Paediatrician, Chesterfield • Joanne Reed, Clinical Nurse Manager, Calderdale • Karen Bartholomew, Consultant Anaesthetist, Calderdale & Huddersfield • Sarah Halstead, Senior Service Specialist, NHSE • Shoma Ganguly, Consultant Paediatrician, Doncaster & Bassetlaw • Stephen Hancock, Transport Consultant, Embrace
ITEM	ACTIONS
<p>1. Apologies, welcome and introductions</p> <ul style="list-style-type: none"> • Introductions were given around the table. • It was noted that the meeting was quorate. • There were no conflicts of interest. 	
<p>2. Minutes of the previous meeting held 24 April 2018</p> <ul style="list-style-type: none"> • The minutes from the previous meeting were accepted as a true and accurate record with the following amendments to be made: <ul style="list-style-type: none"> - Air Ambulance – JW clarified that there were delays and this had not been brought forward to July. - CAHMs to be amended to CAMTs. • Matters Arising from the previous minutes are to be covered under the relevant 	<p>LG</p> <p>LG</p>

	agenda item.	
3.	<p>Annual Review of Terms of Reference</p> <ul style="list-style-type: none"> The annual review of the EGM Terms of Reference is now due and HB asked the group for input. The following suggestions were made: <ul style="list-style-type: none"> - Amend High Dependency to Levels of Care 1-3. - Add descriptions to Levels of Care. - Add Karen Perring to membership section. - Representation from pre hospital organisations at EGMs e.g ICS? 	HB
4.	<p>WC4 Paediatric Networked Care Cquin (Enc C)</p> <ul style="list-style-type: none"> The Project Plan has been updated following the SCOG presentation (3 May 2018). All attendees confirmed that they were happy with developments so far and the proposals for year 2 of the Cquin. “Has Time Moved On Yet?” - Monday 17 September 2018 - It was agreed to class this as an engagement event rather than a Clinical Forum as the event will be to discuss next steps and proposals. HB suggested representation from all Trusts at the above event including management. Flyer to be amended and re-circulated. National PIC Review - National recommendations have not been ratified as yet. It was noted that a report will not be produced. A decision as to which 2 areas will operate as test sites will be made this month. SHal will meet with the National Team shortly to decide whether PCC will become a Vanguard for this piece of work. Re-audit 2018/19 – KP proposed a re-audit to capture January 2019 activity. The group agreed to the proposal and this will run November to January 2019 for a period of 3 months. Further details will be circulated by KP. 	All KP
5.	<p>Feedback from Y&H PCC ODN Presentation to SCOG (Specialised Commissioning Oversight Group) – 3 May 2018</p> <ul style="list-style-type: none"> Slide Set (See Enc E1) – The ODN team reported back on the presentation given to the Commissioners. The presentation was positively received by all in attendance. Proposed Y&H Children’s ODN Structure – An expansion of the role of the Networks across Y&H has been suggested and a proposed structure has been produced for consideration. HB confirmed that the Cardiac Network were not included in the new structure as they are a Provider Clinical Network and hosted by Leeds, whereby Operational Delivery Networks are commissioned by Specialised Commissioning. It is expected that further resources will be required in order to support the proposed structure. There were no comments made during today’s meeting. HB encouraged any feedback/comments to be made. The Y&H Paediatric Specialised Surgery is the new element within the structure and will enable further work with STPs. 	
6.	<p>Matters Arising</p> <ul style="list-style-type: none"> Network Capacity Update - SCH – (1 Oct – 31 March) <ul style="list-style-type: none"> - 20 out of region patients admitted during this period, 17 from the North West, 2 from Birmingham and 1 from Coventry. - Very minimal vacancies going into Winter - Bed days and activity are down and may reduce numbers. It is hoped that all beds will be open going into Winter. Still taking patients from NEWTS. KP – no out of region transfers since March from Y&H – continuing to receive weekly reports from Embrace - Staffing – 3 nurse vacancies, 14 new starters in September. New ways of working to be looked at this Winter. PIC staff are well resourced but SCH facing nursing crisis with internal issues. PIC staff supporting the Trust. HB stated that a report would be submitted to NHSE following the Winter Planning Meeting Friday 14 September 2018. A save the date for this meeting will be circulated to appropriate parties following the meeting. Leeds – <ul style="list-style-type: none"> - Staffing – Maternity leave is having an effect. 4 vacancies by September. Situation had improved but declining again. Exploring ways to improve retention, e.g career pathways, staff support, social events, rewards, 	

	<p>educations.</p> <ul style="list-style-type: none"> - 14 beds expected to be open by January 2019. - Recruitment and retention handout circulated covering 2016-2018. Capacity problems extended well into the Spring in 2016 (6 patients). • Information is routinely collected via PicaNet. HB felt it was important that this information is reported on and suggested a quarterly report. Patterns are showing mass importing and less exporting. Transport is also playing a key role. • Winter 18/19 Planning Meeting – Friday 14 September 2018 • Winter Wash-up post Deep Dive – A Working Group to look at outcomes around repatriation was suggested at this meeting, it had been agreed that a Commissioner would also sit on the Group. KP will follow this up as no further communication has been received about it. • Surge and Escalation SOP Repatriation Letter – Circulated in June with comments received by KP. There were no negative comments and the general feedback is that units will follow their own local policies but will risk assess if a patient requires repatriation. KP to report further at next EGM. No evidence to suggest this is causing delays. Leeds no longer collect discharge data but SCH are continuing to do so. HB will look at pulling together a minimum data set and will circulate accordingly (no negative comments received following letter). 	<p>KP</p> <p>KP</p> <p>HB</p>
7.	<p>Draft Annual Report</p> <ul style="list-style-type: none"> • HB thanked all those who had contributed to the report so far. The report will be circulated to the group shortly. Embrace reports are outstanding. 	<p>HB</p> <p>JW</p>
8.	<p>Education & Training</p> <ul style="list-style-type: none"> • Update circulated on behalf of EE – see Enc G. • Discussions continue regarding the cancellation of PReS Days. MDT attendance has been difficult to obtain. The situation will be reviewed again in Winter. • The ODN Education Team will meet 21 November 2018. RT gave apologies. KP asked that the meeting is rescheduled by ODN Education Admin Team. Rescheduled now for 29 November • Future Clinical Forums <ul style="list-style-type: none"> - 6 November 2018 will be a case based forum, to include an update on Transition and possibly Morbidity. Volunteers to give presentations were welcomed. • Annual Yorkshire Paediatric Respiratory Meeting, Horizon, Leeds, 5 October 2018 - Further details to be circulated. Meeting focus is on Long Term Ventilation. • Online feedback received for suggested Clinical Forum topics were Cardiac Arrest, Embrace, Sepsis, Asthma, Respiratory. It was agreed to cover Cardiac Arrest early 2019. JW suggested that Embrace run the Embrace event half day covering expectations and remit. • Annual Conference – The event was a great success and positive feedback was received, with over 80 attendees on the day. It was agreed that the event should take place again early June 2019 at the same venue possibly on a Monday? Suggestions for clinical topics to be covered were welcomed. 	<p>HB</p> <p>All</p> <p>All/LG</p>
9.	<p>Y&H PCC ODN Guidelines</p> <ul style="list-style-type: none"> • Trauma Guidelines – The document has been finalised and ratified by the Trauma Networks. SC thanked all for their comments. The document may be accessed via Embrace and Y&H PCC ODN websites. 	
10.	<p>Feedback</p> <ul style="list-style-type: none"> • Children's Surgery & Anaesthesia (MCN/WTP) – Working towards designated units providing out of hours surgery. There has been a 6 month pause implemented by Commissioners. 2 out of the 3 hubs have completed their action plans. A robust service model has been agreed and guidelines are ready for implementation, which is aimed to be September 2018. Any queries please direct to emma.andrews@sch.nhs.uk • Acutely Ill Child – There has been a pause in the work programme due to awaiting further outputs from the sustainable hospital review. Guidelines and workforce assessments are to be worked on. 	

	<ul style="list-style-type: none"> Nic Jay, Clinical Lead for the Acutely Unwell Child MCN is keen for input from other Paediatricians outside of the footprint who are involved in any work around STPs, guidelines or work programmes. If interested please contact KP or Nic Jay direct. CRG – The next meeting is scheduled for Monday 23 July 2018. It is expected that the PCC National Review will be discussed, along with ECHMO provisions. JP agreed to continue to provide updates to the Y&H PCC ODN. 	
11.	<p>Parent Representatives</p> <ul style="list-style-type: none"> The role of the Y&H PCC ODN Parent Representative has been reviewed. Chris Beattie of Doncaster and KP and HB met to discuss the role and experience so far. It is suggested that the best way forward is to look at other ways of engaging parents which would give an accurate and balanced overview of short stay cases. KP has met with Family Care Sisters in Leeds and SCH and plans to tap into regular coffee mornings to meet and greet parents with CB. 	
12.	<p>Embrace</p> <ul style="list-style-type: none"> Activity Reports – It was agreed that going forward Embrace will provide a summary report to accompany their update at forthcoming EGMs. <ul style="list-style-type: none"> 280 referrals (May and June). Paediatric Transfers - 40, in 3 months 1 out of network Paediatric transfer. 8 time critical transfers in May and April. Non Embrace transfers – keeping an eye on ward to ward – but not a consistent package as only done when they can. CAMTs accreditation obtained until 2020. Air ambulance delayed until end of August 2018. Only fixed wing at present. Leadership fellow starting in August. Peer Review had focused on current building and space required for cleaning kit. Discussions taking place regarding moving premises continue. May share an office space with ODN. SHan had previously asked for information from the units regarding provision of helipads. Hazel Talbot will now lead on this and will communicate to the units via email shortly 	HT
13.	<p>Any other business</p> <ul style="list-style-type: none"> Website Usage - HB reiterated to the group that the Y&H PCC ODN NHS Networks website is <u>public facing</u> and asked all to be mindful of this. As a result of many Trusts blocking PDF files it had previously been agreed to store meeting documents on the website – the group confirmed they were happy to continue with this arrangement and to continue issuing meeting documents via the NHS networks link. Any reports and external documents will continue to be checked before adding to the website. Embrace will provide a Summary Report of the 3 monthly activity sheets for both the PCC and Neonatal ODN EGMs going forward. Guidelines - No further guidelines are required at this stage. HB thanked Jeff Perring for his contribution to the Y&H PCC ODN and wished him well in his new post as Medical Director at SCH. 	JW
14.	<p>Diary Dates for 2018 Executive Group Meetings</p> <ul style="list-style-type: none"> Tuesday 16 October 2018, 10am – 12 noon, Hatfeild Hall, Wakefield Tuesday 15 January 2019, 10am – 12 noon, Hatfeild Hall, Wakefield 	All