****

**Adult Critical Care Networks**

**England, Wales & Northern Ireland**

|  |
| --- |
| **Action Notes - DRAFT****NATIONAL CRITICAL CARE NETWORKS****DIRECTORS/MANAGERS & MEDICAL LEADS MEETING****Wednesday 16th October 2019****Venue – 15 Marylebone Road, NW1 5JD**  |
|  | **Present**  |
| Andrea Baldwin (ABa, Co-Chair), Graham Brant (GB, Co-Chair), Lesley Durham (LD), Sue Shepherd (SS), Angela Walsh (AW), Bincy Padiyara (BP), Julie Platten (JP), Melanie Wright (MW), Gezz Van Zwanenberg (GVZ), Rose Tobin (RT), Kujan Paramanantham (KP), Victoria Parr (VP), Andrea Berry (ABe), Helen Morrison (HM), Jonathan Walker (JW), Mark Blunt (MB) , Dan Nethercott (DN), Paul Dean (PD), Banwari Agarwal (BA), Donna Hall (DH), Chris Langrish (CL), Adam Wolverson (AWo), Isabel Gonzalez (IG), David Cressey (DC), Jerry Thomas (JT), Caroline Wilson (CW), Sam Waddy (SDW), Kathy Nolan (KN), Nicola Vaughan Jones (NV-J), Simon Whitely (SW)Telephone participation from Jane Eddleston (JEd)Guests – Ganesh Suntharalingam - Chair ICS, Sandy Mather- CEO ICS*Meeting note-taker Andrea Baldwin/Graham Brant* |
| **2.0** | **Welcome and Apologies**  |
| ABa and GB welcomed everyone to the meeting, especially to new members and introductions were made. **Apologies** were received from: Mike Carraretto, Sarah Clarke, Maureen Issott, Dan Dineen, Steve Cook, Sue O’Keefe, Ifor Evans, Zoe Goodacre and Nicola CullenABa kindly agreed to take notes of the meeting. |
| **3.0** | **Confirmation of minutes from previous meeting**  |
| The minutes from the last Directors/Managers/Medical Leads meeting held on the 9th July 2019 were reviewed and approved following amendments to item 9 as highlighted by SS. **Action: ABa to amend grammar to point 9 on July minutes before circulating a final version.****3.1 Action Log from July** **3.1.1** On agenda for update from SS**3.1.2** No response received by LD from Alison Pittard as yet on ODN input into the Enhanced Care document.**3.1.3** Date for Annual Conference is 27th April 2020 – action completed.**3.1.4** TOR –these had been updated following comments received following the last meeting. AB mentioned these would need updating again to reflect Medical Leads membership. **Action: AW requested these be brought back to the next meeting.****3.1.5** ODN Engagement Principles– this document was updated following suggestions and comments from members. The final version was circulated via email, no further comments received, so this is now available for ODNs as and if they wish to refer to it – action completed.**3.1.6** Action completed**3.1.7** Action completed**3.1.8** Action completed, on agenda for information from GVZ**3.1.9** No comments received, action closed.**3.1.10** Action completed.**3.1.11** Information received with thanks from all ODNs on the critical care data systems used. Information shared with HM (CRG/NHSE) – action closed.**3.1.12** Link to next years’ Patient Safety/NOrF Congress for information <https://patientsafetycongress.co.uk/> - action closed**3.1.13** Report shared by AW – action closed**3.1.14** Link to BMJ article shared by SC – action closed.**3.1.15** On agenda for discussion**3.1.16** GS and LD provided an update. Current data demonstrates likely impact on adult critical care services if there are changes to paediatric services/pathways. ICS have concerns over the de-centralisation of paed services. GS is to attend future stakeholder meetings and will liaise with LD to share information with the ODNs - Action closed.**3.1.17** Unclear how access to the paediatric tool kit. **Action: GB to review the link/address for access to the paediatric tool kit.****3.1.18** Scotland’s maternal NEWS tool share by LD - action closed.**3.1.19** Action completed.**3.1.20** Action completed.**3.1.21** Action completed.**3.1.22** Action completed. ABe expressed her thanks all for the flowers. | **ABa****ABa/GB****GB** |
| **4.0** | **Adult Critical Care CRG** |
| **4.1** CC Payment Reform: HM provided a summary of discussions and key actions from the Blended Payment Reform meeting held on the 18th September. Despite informed of the urgency of implementation it is highly unlikely there will be any system change from April 2020 as was the original intention, due to the number of political issues; however work will progress to aim for a change in 2021. **4.1.1** Next Steps. SS asked if it was possible to have a concise paper informing of next steps and future plans, however HM felt this would be difficult at this stage due to the variety of discussions in progress and no decisions as yet on what the next steps should be. There are vast challenges to be worked out in how NHSE can work with CCGs to ensure an equivalent and equitable funding system for critical care that can be agreed. MW asked if the request for pilot sites had been put on hold. HM confirmed at this stage it was unclear what value piloting would achieve and there needs to be development of a clear exit strategy from any current payment mechanism, therefore no pilot sites are to be sought. Key questions are: Can it be simplified? What is the model going forward? SW asked whether a national review on CC capacity had been considered, given funding is currently based primarily on historical data? - this has not been considered. AW also highlighted the importance of recognising the challenges related to capital required for sustaining and/or developing critical care environments.**4.3** JE dialled in to the meeting to provide any additional CRG information: An ECMO task and finish group is to be set up. Members (SW and IG) to work with FICM on ‘critical care after neurosurgical interventions’. SW shared the link to the national neurosurgery workshop, to be held on 6th November: <https://www.events.england.nhs.uk/events/neurosurgery-national-workshop>. The RCOP are now involved and supporting the Enhance Care document, which is aiming to go to the POC Board on 24th November, then for release in February 2020. Some discussion took place on the Enhanced Care document and some concerns arose that it didn’t mirror words from DO5 in relation to nursing ratios. Many felt enhanced care areas are not a critical care issue, but they may need to provide support to other clinical teams to offer oversight on patient management/practices.JE confirmed there will be suspension from trusts of submission of ‘cancelled elective’ data to the national dashboard. All trusts/units are expected to submitted annual QSIS data; JE agreed that it would be useful for ODNs to be informed of the dates for this in future to support data submissions, which were poor this time due to lack of communication about this. **Action: JE/HM to arrange for ODNs to be informed of future QSIS data submission dates.** **Action: JE/HM will ensure CRG minutes are received by the groups Co-Chairs for sharing with the group.**SW provided an update on some of the data groups work: there are discussions in place to ensure ICNARC and other critical care data sets are compliant with GDPR, the governance related to this is under review. MB raised that as ICNARC data is a mandated dataset, would this be covered within the data ‘rules’ – **Action: SW & HM will confirm**. SS asked for support/advice on how ODNs should manage the transfer data they receive as part of their audit role, no advice offered at this stage. CW asked whether ODNs should stop using carbon copy transfer forms and KP highlighted the need for ODNs to review the confidential aspect of data they receive/use and store – HM suggested current processes and systems should remain unchanged until there is more clarity. | **JE/HM****JE/HM****SW / HM** |
| **5.0** | **ICNARC Developments** |
| A presentation was provided by KR and KG on ICNARC V4. Units are being approached directly to allow for readiness for a phased implementation. KP asked if units of different sizes have been used for the phased implementation – KR confirmed this was the case. IG asked whether there was to be development of an Outreach ‘platform’, KR informed this would not be available as yet, as it was felt there are still challenges related to local resources to capture and collect this data effectively. Early work is taking place in Wales with software developers to review opportunities for interfacing ICNARC with hospital data systems. V4 system updates/changes will also be communicated via newsletter. Version 4.1 will likely follow quickly, with the intention of reducing data burden in trusts. **Action: ICNARC presentation to be circulated.**Concerns were raised by KR and KG on the variability across ODNs on the deliverables/reports from ICNARC and the potential need to identify a ‘standard’ for equity. It was unclear how this could be progressed given ODNs do not have any funds to request reports that may historically be received by others. Suggestions were made to discuss this at the CRG / CRG Data Group. **Action: AW and SW to raise issue of ICNARC reporting equity for ODNs at next CRG /CRG Data meetings.** | **GB****AW / SW** |
| **6.0** | **ICS Update** |
| Deviation from the planned agenda took place to allow for an ICS update before lunch.SG and SM thanked members for the invitation to provide an update on the key activities of the ICS, which has been restructured into 5 divisions to ensure focused activities to support the ICS strategy. GS thanked the ODNs for their willingness to collaborate and valued the contribution made by ODN reps at the various ICS groups/committees. He reiterated it is not the intention of using the ODNs as a ‘mouthpiece’ for the ICS, but hopes to work together for the benefit of the service, its patients and critical care multi-professions. The ICS survey circulated via the ODNs hopes to identify whether the networks can support a mechanism for engagement with critical care Clinical Leaders. GS supported that any information obtained via the ODNs would be shared for mutual benefit.SM was pleased to announce the sum of £500K is available to support research in critical care; further information is available on the ICS website. A review of the patient/relatives strategy is in progress and links into their public affairs work; future activity includes a suite of short TV documentaries to been shown over 2021 highlighting the work of teams in ITUs. |  |
| **6.0** | **ODN Governance** |
| **6.1** SS shared the presentation of the work she has collated on ODN status. Each region of England was represented with 100% return. Wales and Northern Ireland was not included in this survey. Sue explained that data is standalone and not related to previous reports. SS asked if Networks would be prepared to share their annual reports with her to add to this data. Sue is keen to have a task and finish group to create an editorial for JICS. Sue will be happy to receive any amendments, following which she will update the document and re-circulate to members. **Action: Those willing to share their annual reports please forward them to SS.****Action: Please forward any changes required to SS ODN ‘report’ then Sue can circulate it. Action: Anyone interested in being part of a task group to look at writing and publicising the work and outputs of the ODNs to contact SS by Friday 18th November.** **6.2 Action: ODN Governance Structures to be discussed at the next meeting as Mike is unavailable.** | **ALL****ALL****ALL****MC** |
| **7.0** | **Medical Leads** |
| **7.1 –** Mark Blunt kindly stepped in to deputise in MC’s absence. The GPICS2 gap analysis tool will be available to use nationally hopefully from November/December following a number of requests for it to be developed (tool similar in format to that used for DO5) **7.2 -** The D05 gap analysis tool, updated by the three network managers across the South of England,has been a valuable tool for networks to gather data. MB suggested it would be useful to share data to present at the annual meeting in Birmingham in April 2020. Data will be required by January to allow development of a presentation in time for April. **Action:** **KP to share SEODN report with MB****Action: All ODNs to share DO5 gap analysis with MB and KP when completed to enable development of presentation for April.****7.2a –** MB discussed with the group the request to incorporate the Medical Leads with the Network Managers/Directors meetings from April 2020 onwards as much of the information shared and discussed is pertinent to both groups. All agreed this was a good way forward and ensure a cohesive approach to discussions that enabled key operational/strategic and clinical issues to be discussed. **Action: ABa to ensure calendar invites are sent to Medical Leads for meetings from April 2020 onwards.****7.3 & 7.4 -** already covered and discussed elsewhere on the agenda | **KP****All****ABa** |
| **8.0** | **QI quickie**  |
| Agenda item differed to the next meeting | **ABe** |
| **9.0** | **Updates from National groups/key topics:** |
| **9.1 CC3N/Nursing Alliance (JP) –** The workforce survey is being repeated again for two weeks during October. Data will be collated centrally in London to ensureconsistency**9.2 CCLF (GB)** –new Chair now in place, meeting discussed enhanced care and paediatric review* 1. **DoS (GB)** –New platform now live a few local issues around log in but overall went well. No progress on escalation status grids despite being raised regularly by GB
	2. **NOrF (LD/IG)** – IG discussed an upcoming publication but will send papers around before publication for group to view. GVZ said that NEWS 2 training online was very good and worth undertaking if required.
	3. **EPRR (AW)** – Much EPRR activity with Keith Willetts remaining in overall control. SitReps between Trusts to Regions will start soon if they are required. Daily phone calls for additional issues will also be initiated if required at this level

AW pointed out it is important to understand what are normal issues and what is Brexit related. There is some resilience work to ensure sensitivities around availability of kit from abroad. Major concerns that must remain a consideration are of course the maintenance of main utilities, fuel, and the need of staff should schools need to shut etc. AW will keep us updated by e mail as things progress.* 1. **ICS** – item covered
	2. **Transfers (GVZ)** – Gezz presented information concerning the use of Stryker transfer trollies for ambulance transfer. Most trollies will require a retro fit to ensure they meet safety standards and showed in the presentations a number of options available. All transfers in London to use Stryker trollies going forward. GVZ keen to hear from anyone who would be keen to use Stryker model in the future.
	3. **GVZ also mentioned the app STrAPP for transfers with data**- the web developer is currently costing this and GVZ will update us as this progress’.
 | **IG****AW** |
| **10.0** | **Group Admin and Schedule** |
| * 1. Dates of meetings 2019/2020 proposed. AW confirmed she will be able to host July and October 2020 dates in the same building, thanks extended for this.

ABa highlighted that the next meeting on 8th January will not be able to accommodate Medical Leads attendance due to the size of the booked venue. |  |
| **12.0** | **AOB** |
| * Single Sex breaches- when does this start in Critical Care? – The message of the group was that needs to be decided locally.
* Twitter account now set up for the group **@CCODN\_UK**
 |  |
| **Date and Time of Future Meetings** |
| * **ODN Directors/Managers only** - Wednesday 8th January 2020, The Plough and Harrow Hotel, 135 Hagley Road, Birmingham B16 8LS
* **Collaborative Annual Meeting –** Monday 27th April 2020, The Studio, 7 Cannon Street, Birmingham, B2 5EP
* **ODN Directors/Medical Leads –** Wednesday 29th July 2020,15 Marylebone Road, London NW1 5JD
* **ODN Directors/Medical Leads –** Tuesday 20th October 2020, 15 Marylebone Road, London NW1 5JD
 |

**Action List – National Critical Care Network Directors Meeting 16th October 2019**

| **Action No.** | **Action** | **By Whom** |
| --- | --- | --- |
| **1.** | ABa to amend grammar to point 9 on July minutes before circulating a final version. | ABa |
| **2.** | TOR to be updated to reflect Medical Leads attendance and brought back to the January meeting | ABa |
| **3.** | GB to review the link/address for access to the paediatric tool kit and share | GB |
| **4.** | JE/HM to arrange for ODNs to be informed of future QSIS data submission dates. | JE/HM |
| **5.** | Ensure CRG minutes are received by the Co-Chairs for sharing with the group | JE/HM |
| **6.** | To confirm if ICNARC and other critical care datasets are covered by data rules. |  SW / HM |
| **7.** | Share ICNARC presentation | GB |
| **8.** | To raise issue of ICNARC reporting equity for ODNs at next CRG /CRG Data meetings | SW / AW |
| **9.** | Those willing to share their annual reports please forward them to SS. | ALL |
| **10** | Please forward any changes required to SS ODN ‘report’ then Sue can circulate it. | All |
| **11.** | Anyone interested in being part of a task group to look at writing and publicising the work and outputs of the ODNs to contact SS by Friday 18th November.  | All |
| **12.** | ODN governance structures to be discussed at next meeting  | MC |
| **13.** | All ODNs to share DO5 gap analysis with MB and KP when completed to enable development of presentation for April. | AllMB/KP |
| **14.** | Ensure calendar invites are sent to Medical Leads for meetings from April 2020 onwards. | ABa |
| **15.** | To send NOrF publication to group ahead of going to press | IG |
| **16.** | To update group by email on any EPRR issues related to Brexit  | AW |

|  |
| --- |
| **MINUTE TAKING ROTA FOR FUTURE DIRECTOR MEETINGS 2019/2020:** |
| 8 January 2020 | Directors/Managers | Birmingham | Victoria Parr |
| 27 April 2020 | Annual Meeting | Birmingham | Bincy Padiyara |

**Dates for Future Meetings**

* ODN Directors: Wednesday 8th January 2020, The Plough and Harrow Hotel, 135 Hagley Road, Birmingham B16 8LS
* Collaborative Annual Meeting: Monday 27th April 2020, The Studio, 7 Cannon Street, Birmingham, B2 5EP
* ODN Directors/Medical Leads: Wednesday 29th July 2020, 15 Marylebone Road, NW1 5JD
* ODN Directors/Medical Leads: Tuesday 20th October 2020, 15 Marylebone Road, NW1 5JD