

## **National Major Trauma Nursing Group**

Friday 25<sup>th</sup> November 2016: 10am – 4pm  
Meeting Room, Crown House  
Ground Floor, 123 Hagley Road, Birmingham, B16 8LD

### **Approved Minutes**

#### **Attended:**

Gabby Lomas	Matron, Emergency Medicine	Salford Royal NHS Trust
Sarah Graham	Service Imp. Facilitator	Midlands Critical Care & Trauma Networks
Robert Pinate	Consultant Nurse - ED	Kings College Hospital, London
David McGlynn	Senior Charge Nurse A&E	Queen Elizabeth University Hospital, Glasgow
Jill Windle	Lecturer Practitioner in Emergency Nursing	Salford Royal NHS Trust
Sharon Budd	Trauma coordinator	Royal Derby Hospital
Donna Brailsford	ED Trauma nurse coordinator	Sheffield Children's Hospital
Stuart Wildman	Consultant Nurse Major Trauma	Salford Royal NHS Trust
Lucy Martin	Lead Educator	Queen Elizabeth Hospital Birmingham
Neil Strawbridge	Trauma Nurse Coordinator	Sheffield Teaching Hospitals NHS Foundation Trust
Laura Crowle	Major Trauma Nurse Coordinator	Severn Major Trauma Operational Delivery Network
Sharon Sanderson	Major Trauma Case Manager	Nottingham University Hospital
Jane Bakker	Staff Nurse ED	Royal Hospital for Children, Glasgow
Angela Morgan	Lead Educator, Critical Care	St Mary's Hospital, Imperial College Healthcare
Dawn Moss	CC Lead PDN	University Hospital North Midlands
Steve Littleson	Data Analyst	Midlands Critical Care & Trauma Networks
Louise Wilde	Sister	Sheffield Teaching Hospitals NHS Foundation Trust
Jane Roscoe	Matron	Sheffield Teaching Hospitals NHS Foundation Trust
Angela Lee	Educator Development Practice	RMCH
Pam Perks	Educator QEHB	QEHB
Maria Acton	Paediatric ANP	UHCW
Lorrie Lawton	Nurse Consultant	Kings College Hospital, London
Karen Berry	Trauma Network Nurse Lead	Greater Manchester CC & MT Services
Chelsey Sills	Deputy Sister MTU	QMC Nottingham
Hayley Prior	CNE Critical Care	QMC Nottingham
Claire Marks	Lead Major Trauma Centre Coordinator (MTCC)	Plymouth Hospitals NHS Trust
Sean Treacy	Charge Nurse TNP	Kettering General Hospital
Hannah Sanderson	Major Trauma Coordinator	Salford Royal NHS FT

1. Welcome and Introductions
2. Apologies – as the register is extensive these have been recorded on the register.
3. Approval of minutes of previous meeting 2.9.16 - Approved as an accurate record. RP reminded the sub-groups that they need to send the minutes to SG to attach to the main set.
4. Matters arising – review actions from previous minutes (not on this agenda):

There are now around 127 members on the contacts list and now includes representation from every network in the country. This is a fantastic achievement and reflects the success of this group.

RP reiterated the need for participants to go back and ask if they have a network nursing group and if not why not. This way their network groups will feed into the national meetings and vice versa. This will enable us to ensure the NMTNG remains a manageable size and additionally there will be network specific issues which should be discussed and managed at a network level.

**Action:** Send out European Trauma Course information – SG to Email Tracey Clatworthy for these details.

5. Paper for discussion: Statement regarding the application of APLS certification against the Quality Surveillance Team 'Major Trauma Services Quality Indicators' (NHS England, 2016), Emergency Trauma Nurse/Allied Health Professional Level 2 educational standard

LL lead discussions around the inclusion of APLS. When the quality indicator was written it stated it should be ATN but cost implications need to be taken into account. Since April the APLS structure has changed, there is now continued assessment including a paediatric trauma scenario that nurses must pass.

Group feedback:

- This seems logical, a well-rounded and structured course. It needs to be included so the paediatric community do not fail the standard.
- ATNC/TNCC/ETC still doesn't provide paediatric nurses with a comprehensive educational component on caring for the paediatric trauma patient, which it was felt, APLS did to a greater degree.
- There is no national paediatric trauma course; therefore we need a pragmatic approach without diluting the standards.
- Some of the edits against the education and application on the paper were approved. These will be submitted to the National Clinical Reference Group for approval before putting forward as a recommendation to NHS England.
- MCQ has been stopped on APLS but the candidates are continuously assessed on all station and this includes the management of trauma.
- EPLS includes very little trauma training and LL would not be happy for this to be included.

**Action:** RP to apply minor edits to the paper as discussed and to LL for final approval as chairs action of the paediatric sub-group

6. Review of action plan tracker – RP presented the tracker which the group worked through and updated. One of the new developments is the NMTNG website designed by Steve Littleson from the Midlands CC&T Network on behalf of the group, RP displayed the first draft which will require an initial review to ensure it is fit for purpose before being openly circulated. The group were happy with the layout.
7. Concurrent Workshops – feedback:
  - a. Sub Group 1 – Adult Critical Care  
Update from today's meeting:

- The group reviewed the competencies and how to put forward the endorsement.
  - Logo's discussed.
  - How they will promote the work and competencies, poster for National Trauma Care Conference and the September BACCN in London.
  - Slight amendments made to the competencies, cross referenced with the ward groups and the ED competencies, then next they will review the educational competencies and national standards.
  - They do not require a specific trauma course for CC Wards.
- b. Sub Group 2 – Adult Trauma Ward  
Update from today's meeting:
- The group elected Stuart Wildman as Chair
  - Claire Marks agreed to be Vice Chair
  - Core competencies reviewed and some amendments made. Split into groups for a system review
  - SW will draft the TOR
  - Agenda L1 &L2 include standard and quality indicators.
  - Aiming to complete the full document by the end of December.
- c. Sub Group 3 – Paediatric critical care & ward  
Updates from today' meeting:
- Ward and Critical Care included but there are no ward nurses on the sub group, probably because there are very small numbers around.
  - The group will pull the competencies together with generic statements e.g pain and will send the others out to the CNS for them to inform the group what needs to be done.
  - They aim to write something by March for the ward competencies.
  - Critical Care – 2 nurses will review the current documents with the PICS education group and look at any gaps e.g. broken bones. They will use Manchester as the base to review the gap competencies.
  - They discussed how they will make sure they are competent when complete, maintaining competencies etc but requires further discussion.
  - Publicity – Donna will explore the possibility of adding the information into the TARN newsletter.
  - They will use the ED paediatric competencies as the generic template. Then split it into systems.
  - Ratified their ToR.
  - Quality Indicators or levels of education not discussed but they will explore this.
  - Take to the Cambridge trauma conference for circulation.

## 8. Regional/National updates:

### a. Scotland

There will be 1 national MTN with 4 MTC's. There is no money available but will be different to England. They are only allowed to make yearly plans due to lack of funding. They are developing a Planned Tracker over the next 3 years. North and East has a small number of hospitals. Continued TU discussions taking place but looks like they will be Inverness, Aberdeen, Dundee.

Ambulance Triage Tool – using London version. Piloting in Edinburgh.  
Rehab – the North East and South East is up and running.  
Everywhere else is not functional due to the rehab consultants leaving.

STAG meeting – there is no money but the meeting will go ahead 28.11.16 where they will produce the final network plan.

Paediatrics – still discussion if MTC's will be developed. They will either go to Glasgow or Edinburgh, and are expanding the current paediatric hospital model.

Scotstar – will do the hospital transfers. Activated from a single Major Trauma Desk, manned by CC practitioners. 7am – 7pm. And advice out with those hours.

- b. Wales  
Not represented today, no update available.
- c. Northern Ireland  
Lynsey Sheerin provided update. They have just joined TARN. There is 1 MTC at the Royal Victoria Hospital Belfast who are reviewing the work of this group. TN Lead Dr Duncan Redmill and Emma Geddis is the TN Manager.

## 9. AOB

RP – Emergency Nursing AHP competencies – this is a large document. King's have produced a competency sign off record that can be printed rather than the whole document; it also includes an action plan. RP will circulate both Adult and Paediatrics. There is no electronic version of the competencies available, paper based only. There may be local solutions to this.

**Action:** RP to circulate documents to the group

Nichola Ashby – Has had discussions with Nottingham about ATNC and has observed their course. She has written a business case looking at academic credits for the course. Group discussed including other courses, TNCC, ETC and in the future (subject to approval) APLS. The group would support this. Online modules will be available. All courses could be mapped over.

**Action:** RP to formally write to Nichola reflecting support from NMTNG of this innovation.

## 10. Dates of meetings for 2017:

**Friday 10th February 2017**

**Friday 5th May 2017**

**Friday 8th September 2017**

**Friday 1st December 2017**

## 11. Actions

4. Send out European Trauma Course information – SG to Email Tracey Clatworthy for these details.

6. APLS paper - RP to apply minor edits to the paper as discussed and to LL for final approval as chairs action of the paediatric sub-group

9.

a. Emergency Nursing AHP competencies – RP will circulate both the Adult and Paediatric versions.

b. RP to e-mail Nichola Ashby regarding broad support for academic university module which recognises ATNC/TNCC/ETC and possibly APLS as part of the curriculum with the award of academic credits.

## Appendices

### Appendix one:

#### **Minutes of the Adult Ward Sub Group, 25.11.16:**

##### **Introductions.**

##### **Update of Register.**

##### **Review of the last meeting's minutes.**

##### **Stuart Wildman from Salford was appointed as Chair of the Group.**

The Group had decided at the last meeting to work with a 'core set' of competencies which could be used for any trauma patient, including those looked after locally in Trauma Units, not just major Trauma Centres. This included, among other things, a generic understanding of the organisational aspects of Major Trauma and key contacts in the major Trauma Pathway.

We agreed the 'core set' of competencies.

We then split into groups to review each system competency and sign them off.

The majority of this work was done with a couple of exceptions.

Stuart agreed to draft a 'terms of reference' for the competencies.

We agreed an agenda for the next meeting which included discussion of level 1 and level 2 competencies, educational standards and accreditation and the potential for a quality indicator moving forward.

Becky has offered to write the forward using the already established ED one as template.

Claire Marks has been appointed as vice chair of the Group.

Laura Crowle has offered to collate the competencies and would like each system amends to her by 15<sup>th</sup> December, if not before and she will send out for comments in Jan before the next national Group meeting in Feb/March. She will be in touch with more specific dates.

Joanne Lockwood, Matron - Major Trauma Ward, St Mary's Hospital

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**Appendix two:**

**National Nursing Major Trauma Group Meeting Nov 25<sup>th</sup> 2016**

**Critical Care Sub group**

**Present:**

Angela Morgan	<a href="mailto:angela.morgan@imperial.nhs.uk">angela.morgan@imperial.nhs.uk</a>
Sharon Sanderson	<a href="mailto:sharonsanderson4@aol.com">sharonsanderson4@aol.com</a> sharon.sanderson@nuh.nhs.uk
Dawn Moss	<a href="mailto:dawnj.moss@uhnm.nhs.uk">dawnj.moss@uhnm.nhs.uk</a>
Karen Berry	<a href="mailto:karen.berry@cmft.nhs.uk">karen.berry@cmft.nhs.uk</a>
David McGlynn	<a href="mailto:david.mcglynn@nhs.net">david.mcglynn@nhs.net</a>
Ann Marie Heath	<a href="mailto:AnnMarie.Heath@uhnm.nhs.uk">AnnMarie.Heath@uhnm.nhs.uk</a>
Angela Himsworth	<a href="mailto:Angela.himsworth@uhb.nhs.uk">Angela.himsworth@uhb.nhs.uk</a>
Nichola Ashby	<a href="mailto:nichola.ashby@nottingham.ac.uk">nichola.ashby@nottingham.ac.uk</a>

point	Item	Actions
1	<b>Welcome and introductions, review minutes</b> Minutes reviewed and agreed.	
2	<p><b>Review of competencies:</b></p> <p>a) It was agreed that Angela Himsworth will take the competencies to the following groups:</p> <ul style="list-style-type: none"> <li>• The Alliance members</li> <li>• BACCN</li> <li>• CC3N</li> <li>• North National Outreach forum</li> <li>• RCN</li> <li>• Intensive care Society</li> </ul> <p>b) Angela Morgan agreed to cross reference Crit Care competencies with the ED competencies</p> <p>c) <b>Promotion of the competencies:</b></p> <ul style="list-style-type: none"> <li>• The group discussed presenting the competencies at the Trauma Care Conference 2017</li> <li>• Prepare a poster presentation</li> <li>• In publications- e.g BACCN</li> </ul> <p>d) the group reviewed the competencies and discussed some changes in the wording of each of the titles</p> <p>e) the group cross referenced the Level 1 competencies and agreed on the pages from this should be included in the Trauma Competency document</p>	<p><b>Angela Himsworth</b></p> <p><b>Angela Morgan</b></p> <p><b>Angela Himsworth to send to Angela Morgan</b></p> <p><b>Angela Morgan to make the changes</b> <b>Angela Morgan</b></p>
3	<p><b>Roll out of competencies:</b></p> <p>CC3N have a power point presentation to help PDN's demonstrate how to use their competencies- Angela Himsworth suggested we could adapt this for use for the new trauma competencies</p>	<p><b>Angela Himsworth to send this to the group</b></p>

<b>4</b>	Angela Himsworth has suggested we would benefit from HEI endorsement and awareness of the competencies	<b>Approach HEI once happy with completed competencies</b>
<b>5</b>	The group discussed the need to also cross reference the competencies with the neuro competencies	<b>Dawn Moss to send to the group</b>
	<b>Date of next meeting: TBA</b>	

**Appendix Three:**

**Paediatric Sub-Group - NMTNG**

**25<sup>th</sup> November 2016**

**Minutes**

**Present:**

**Chair** Lorrie Lawton (LL)

**Vice-Chair** Donna Brailsford (DB)

Sarah Pratley (SP)

Jennifer Mitchell (JM)

Lisa Armour (LA)

Angela Lee (AL)

Kerry White (KW)

Kate Hammond (KH)

Charlotte Adkins (CA)

Michelle Russell (MR)

Karen Richardson (KR)

Sarah Jackson (SJ)

**Apologies:**

Darren Darby

Maria Action

Helen Blakesley

1. Minutes of last meeting (2<sup>nd</sup> September 2016) confirmed as accurate.

<b>Item</b>	<b>Discussion</b>	<b>Action</b>
<b>Ward competencies</b>	<p>There was a general discussion surrounding ward competencies. Members of group acknowledged within the group that there was a lack of expertise in ward nursing.</p> <p>LL suggested that each of the members access their specialist CNS to aid us in developing the competencies.</p> <p>DB suggested breaking up the competencies up and this was agreed therefore:</p>	All – to access relevant CNS for

	<p>Spinal - Watford team  Neuro and pain – DB  Burns and plastics - Alder Hey team  Max Fax, Opthal, ENT - BCH  Chest – Addenbrookes</p> <p>Format was discussed and agreed that should be a similar format to the ED competencies. LL agreed to send out the ED competencies again.</p> <p>LL suggested that there are generic competencies that could be the bases for the ward competencies such as safeguarding, communication etc. LL agreed to sort these out and again send out for the CNS to add their part</p>	<p>advice</p> <p>LL to send out ED competencies</p> <p>LL to format template with generic competencies in situ</p>
<b>Critical Care Competencies</b>	<p>Discussion surrounding the Critical care competencies. There are nationally agreed competencies for Paediatric Critical care already in situ. These needs to be reviewed and additional information given. In-particular there may be some additional requirement for Orthopaedic input.</p> <p>LL stressed that we need to start making some in roads into this document so that the team and review and comment.</p> <p>There was also a general discussion surrounding the level of education and how these recommendations would look, again this needs to be discussed further.</p>	<p>DD and KW - to develop critical care competencies and send out for comments.</p>
<b>APLs course as education standard</b>	<p>Completed and sent to the main meeting - for minor amendments then complete</p>	<p>LL to forward to RP</p>
<b>TOR</b>	<p>TOR reviewed and agreed - signed off  <b>Completed</b></p>	<p>LL to forward to RP</p>
<b>Publicity</b>	<p>DB stated that to increase the awareness of this group that a small article will be placed in the next TARN newsletter.</p>	
	<p><b>Next meeting - 10<sup>th</sup> Feb 2017</b>  <b>Dates for next year TBC</b>  <b>5<sup>th</sup> May 2017</b>  <b>8<sup>th</sup> Sept 2017</b>  <b>1<sup>st</sup> Dec 2017</b></p>	