

Tri Critical Care Network Clinical Forum

23.5.19

Birmingham

NOTES

Welcome and Introductions

Steven Cook (SC), Network Manager welcomed network colleagues to the forum and introductions were provided by everyone attending. In attendance were Sisters, Senior Nurses, Physiotherapists, Pharmacists, Matrons, Practice Development Nurses, Consultants, Outreach Nurses, ICNARC Clerk, Ward Managers, Sepsis Lead.

Regional Clinical Forum Terms of Reference (ToR)

SC asked colleagues to review the ToR and email the network office with any amendment requests. We aim to sign this off at the next forum.

Service Specification / NHSI Long Term Plan / GPICS

Dr Zahid Khan (ZK) CC Network Clinical Lead and SC provided an overview of the approved service specification (D05). Key messages include:

- that all trusts must actively engage with their operational delivery networks (ODN)
- have clear oversight and governance systems in place
- need to improve accountability, service improvement and performance management
- continued peer review of units by the ODN
- ODN's are here for the long term
- ODN will produce a plan for the delivery of the D05
- CRG will advise the CQC that they should review units against the D05 and not the GPICS.

There will be a lead commissioner for critical care and there will be 2 funding options which is part of the payment reform. There will be penalties for the delayed discharges >4hours and future workstreams will add value, reduce variation, improve flow, improve cross working, review data and serve to reduce inequalities to access.

SC shared the latest network work plan and highlighted some aspects e.g. MDT led clinical forums, clinically led sub-group meetings, peer reviews, network incident reporting system, mass casualty work group, pandemic flu planning.

The GPICS consultation period is complete but to date we have not received the final approved version.

Network Forums will have access to the results of peer reviews, dashboards and will support the sharing of and learning from other units, thus providing true peer support.

Peer Review Results

Sarah Graham (SG), Network Service Improvement Facilitator presented the results of the last round of visits to the units in the Central England network region and of those units who submitted their self-assessments. We have been able to create an overall compliance

spreadsheet that clearly identifies the main areas of non-compliance, where there is further progress required and where there are areas of good practice and quality improvement.

The future peer review schedule is to be confirmed but visits will be done by the networks.

Data Collection

Steve Littleson (SL), Network Data Analyst presented an overview of the relevant data sources accessible by the network e.g. MELA, ICNARC, Quality Surveillance Programme and the types of reports he receives, what information we hold and how we can use the data to help the units.

He presented the latest version of the dashboards which now has a slightly different format. These will be discussed at regional forums.

MELA Solutions

Cristina Willans presented the MELA software changes that are currently being implemented and installed in units and will include things like customised reporting. The software will be accessible from anywhere in the trust as it will be cloud based. Everyone should still ensure that they are performing daily back-ups of their data.

Question Time / Feedback

1. ITU courses & the 50% target – many trusts are struggling to hit the target, they have had training budgets cut, staff leaving for the trust and issues with overseas staff. SL has the non-medical workforce survey data and can provide examples of which trusts are doing well, which we can use to find out how they are achieving their figures, accessing funding streams etc.
2. 24 hour Outreach – Which trusts have this in place? SL can obtain this from the workforce survey and will distribute the findings.
3. Citrate discussions around dosing etc. Possible presentation at the next forum.
4. Medical device related pressure sores – some units having issues especially with face masks. Network office to circulate email asking what units are doing to reduce these types of sores.