

**National Major Trauma Nursing Group  
Paediatric Sub-Group  
28<sup>th</sup> June 2018**

**Present:**

Lorrie Lawton (Chair) (LL)  
 Caroline Rushmer (Vice-Chair) (CR)  
 Kelly Clamp (KC)  
 Lisa Armour (LA)  
 Sarah Swan(SS)  
 Louise Raine (LR)  
 Simon Kendal (SK)  
 Mary Glover (MG)  
 Jackie Fulton (JK)  
 Kimberly Hamilton (KH)  
 Usha Chandran (UC)  
 Aimee White (AW)

**Apologies:**

Andrew Bedford  
 Charlotte Clay

Item		Action
Review of Minutes 9 <sup>th</sup> March 2018	Minutes of March 2018 reviewed and confirmed accurate	LL
Matters arising not on agenda	<p>Ward competencies - still have not been signed off at the CRG. It was understood that chairs actions would be taken, however this does not seem to have taken place. The next CRG meeting will not be until Autumn</p> <p>Adolescent definition. - raised at main meeting, decided that paediatric group would concentrate on 0-16 years. There would be need for the Paeds group to assist the Adult groups in ensuring specific adolescent concerns were covered in their documents</p>	LL to talk to RP re: CRG
Feedback from Critical Care group	<p>The critical care competences are nearly completed, and the critical care team are making final changes. This will then be sent around to the group for final approval.</p> <p>JF, KH and UC had presented the current competences to the PICSE group in May. It was received positively. It is envisaged that these</p>	

	<p>competencies will be incorporated into the National competencies that PICSE are developing,</p> <p>A National PICSE conference is taking place on 19<sup>th</sup> Sept – LL suggested that the group try to present the competencies on this national stage. KH suggested that it may be too late but she will try to get a poster presentation in.</p> <p>KH, JF and UC asked for the group to give her useful links regarding paediatric trauma, so they can add this to the reference section</p> <p>LL stated that these competencies may need to go to the CRG for approval. This could be the same time for the ward competencies. LL encouraged that the Competences be completed by September. All agreed this was possible.</p>	<p>KH</p> <p>ALL</p> <p>LL</p>
Vice-Chair	<p>Caroline Rushmer has kindly volunteered to be Vice -Chair of the group.</p> <p>LL stated that next year she would stand-down due to studying commitments, but would still be an active member of the group.</p>	
Learning Outcome	<p>LL recapped on the piece of work surrounding the development of some LO for a Ward based educational programme. The 6 areas selected were based upon the questionnaire completed earlier in the year. Member of the group were asked to develop LO for each of the areas.</p> <p>It was highlighted the Caroline Cunningham is no longer in post - however Lisa Armour and Kelly Clamp will take Orthopaedics forward.</p> <p>LA also offered to set up a drop box so that people could put resources into it for the group to share.</p> <p>There was a general discussion surrounding copyright of materials use and gaining permission. It is important that all members of the group ask permission from the authors of</p>	<p>LA &amp; KC</p> <p>LA</p> <p>All</p>

	<p>the work to use and observe any copyright laws</p> <p>LL asked if people could try to get something written by next meeting so that they could be reviewed.</p>	All
Work streams/Way forward	<p>LL asked if there were any more work stream that the group felt that we needed to review.</p> <p>There was general discussion surrounding the Rehabilitation and paediatrics. It was felt in general that the rehab group would be best suited to take this forward – however the Paediatric sub-group would offer any support they would need from a paediatric view point.</p> <p>AW asked if she could review the ward competencies regarding any rehab information. LL will send to AW for her to review.</p> <p>LL suggest that there now needs to be a review of the implementation of the L1 and L2 Paediatric Emergency Nursing competencies in ED across England. From anecdotal evidence the mixed paed and adult units are concentrating on the adult competencies. There was reassurance that Paediatric units had started to complete the competencies. SK suggested that the Networks Leads should have some information regarding the completion of the competences.</p> <p>LL agreed to e-mail the Sub-group to gain a feel of how the L1 and L2 sign off were proceeding for stand-alone units vs combined.</p>	<p>LL</p> <p>LL</p>
AOB	<p>SK presented information regarding a Paediatric TILS courses that has been developed in the Northern Trauma Network. It is based upon TILS but focuses on paediatrics. It has been mapped against L1 competencies and was completed with 12 candidates. The group generally thought this was an excellent idea and it was suggested that this could be</p>	

	<p>rolled out across the country if successful. SK will review and keep the group informed.</p> <p>No other AOB presented.</p>	
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Next Meeting. - TBA