



## Collaborative Regional Benchmarking Meeting

Meeting Minutes - Monday 26th April 2021

14:00 – 15:00

MS Teams Meeting notes

<p><b>In Attendance</b> Alison Richmond (AR) (Chair) Claire Horsfield (CH) Lesley Durham (LD) Julie Platten (JP) Jo Steffensen (JS) Sheelah Ainsworth (SA) Joanne Walker (JW) Elizabeth Depnering (ED) Wendy Milner (WM) Linda Cross (LC) Hayley Shakesby (HS) Deena Cawood (DC) Michiko Ilagan (MI) Laura Probert (LP) Rosie Amanda Duffy (AD) Samantha Rogers (SR) (notes)</p>	<p>Quality Improvement Lead Nurse, WYCCODN Networkk Manager/Lead Nurse WYCCODN Network Director, NoECCODN Network Manager, NoECCODN Clinical Quality Practitioner, LTHT Clinical Quality Practitioner, LTHT Senior Sister, Calderdale &amp; Huddersfield NHS Trust Clinical Educator, York Hospitals NHS Trust Senior Sister, Bradford Teaching Hospitals NHS Trust Sister Sister, Harrogate District Hospitals Sister, Hull Royal Infirmary Clinical Educator, Hull Teaching Hospitals Sister, Scarborough General Hospital Sister, Scarborough General Hospital  South Tyneside District hospital Data Analyst &amp; Project officer, WYCCODN</p>
<p><b>Apologies</b> Cat Balcolme Donna Higgins Lesley Maxwell Amanda Vickers Jess Thompson</p>	<p>Lead Nurse Quality ACC, LTHT Clinical Educator, Diana Princess of Wales Hospital, Grimsby University Hospital of North Durham Newcastle Freeman Hospital, (Ward 21) Sister, Darlington Memorial Hospital</p>

Item	
1	<b>Introduction &amp; Apologies</b> - As above
2	<p><b>Minutes and Actions not on agenda</b> - Minutes of previous meeting held in November 2020 accepted as a true record. Most actions from last meeting completed or are on this meetings agenda.</p> <p>Actions outstanding not on agenda.</p> <ul style="list-style-type: none"> <li>Helen Casserly (LTHT) was going to share information on #Thinkahead pressure ulcer campaign - JS to follow up.</li> <li>Linda Cross (HDFT) was to share Care Star CPAP hood protocol and decontamination process of Hillrom Progressa Beds/Mattresses - LC to follow up</li> </ul>
3	<p><b>Network Update</b></p> <p><b>North Yorkshire and Humberside Critical Care Network</b></p> <ul style="list-style-type: none"> <li>No update available from Newtork Team</li> <li>LD informed that their network continue to have their Critical Care Course delivered by with Coventry University.</li> </ul> <p><b>West Yorkshire</b></p> <ul style="list-style-type: none"> <li>New Network Manager and Lead Nurse Claire Horsfield now in post.</li> <li>Reconveined network forums after a pause due to covid.</li> <li>First transfer training course of the year running virtually next week. Also produced</li> </ul>



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	<p>some videos to aid transfer training whilst online.</p> <ul style="list-style-type: none"> <li>• Moving forward with restoration and recovery.</li> <li>• Looking at impact of reduced staffing ratios on standard of care with regards to pressure damage/critical incidents.</li> <li>• Development of regional transfer service</li> <li>• Capacity/Enhanced Care areas. Maintaining skills of redeployed workforce</li> </ul> <p><b>North of England Critical Care Network</b></p> <ul style="list-style-type: none"> <li>• Transfer training recommenced one day per month for next 4 months at Nightingale facility. Blended course of online elearning then practical face to face workshops at Nightingale (2 sessions per day 30 people in each session)</li> <li>• Pressure ulcer prevalence audit every month continues. Incidence increased during pandemic.</li> <li>• Education meeting to highlight that staff starting on critical care during the pandemic haven't had the usual mentorship and support. Need to bridge the gaps in knowledge and skills.</li> </ul>
4	<p><b>National Update (JP)</b></p> <ul style="list-style-type: none"> <li>• Nationally, Critical Care Education have been allocated £10 Million funding for 'new' critical care award (same critical care awards as before but ensuring that they are all standardised with 60 credits at level 6). More HEI could also bid to host critical care award as need to have more places available.</li> <li>• Discussions around budget holding for nurse education to make accessibility easier.</li> <li>• Discussions to increase Critical Care Educator ratio from 1:75 to 1:50 and investment in education for educators.</li> <li>• National workstream to look at career structure in critical care and what other workforce could be used in critical care to deliver holistic care.</li> <li>• London transformation and learning collaborative have developed a digital passport for non-critical staff to assess and access elearning. Means their competence can be accessed easily to show which staff have ICU training. Possibly to be rolled out nationally with the aim of all trusts having a register of staff that can be called upon to support critical care in the future. CH asked when this would be available and is it likely to be rolled out by Networks. JP replied meeting on Friday but HEE want networks to be involved in all discussions and are ideally placed to represent units.</li> <li>• Professional Nurse Advocacy Training. Nationally 436 places have been allocated and funded by HEE. The expectation is that each critical care nurse will have access to a PNA who can deliver restorative supervision based on the A-EQUIP model. National WhatsApp group for staff undertaking the training and network groups too. Really good take up from Yorkshire and the North England region. Will eventually be rolled out across other areas of nursing. Feedback on courses is very positive.</li> </ul>
5	<p><b>Benchmarking Discussion</b></p> <ul style="list-style-type: none"> <li>• Nutrition Care</li> <li>• Bowel Care</li> </ul> <p>AR shared screen with benchmark score. Julie to forward AR the North of England Benchmarks. AR to update scores, amend discrepancies and share slides with minutes.</p> <p>JS talked through nutrition scores for LTHT.</p>



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	<p>CH asked when the area of practice would be re audited if a unit had a low score. AR said that each unit when scoring, developed an action plan to address any gaps. It was then locally driven for individual units to implement that action plan with the aim of improving. As a group, the area of practice would be audited the following year with the hope of seeing improved scores, but units could audit before this time to evaluate any interventions.</p> <p>HS talked through bowel scores for Hull Royal Infirmary.</p> <p>AR reminded the group that all shared guidelines and resources for nutrition and bowel care are on the regional benchmarking group page of the WYCCN web site. It is a members only page. Anyone who required access to contact AR.</p> <p><a href="https://www.wyccn.org/apps/member/login">https://www.wyccn.org/apps/member/login</a></p> <p>AR confirmed the benchmarking process moving forward. Continue with annual audit calendar, AR or SR will email out on 1st month the benchmarks due for that month. Scores and action plans to be submitted to AR by end of the month. SR will send a reminder towards the end of the month. All agreed on this process.</p> <p><b>New Rehabilitation Benchmark - Patient Diary's</b></p> <p>AR shared the draft Patient Diary Benchmark that will be used in November in place of weaning. A discussion followed around relative entries/using email entries, encouraging the MDT to add entries, photo entries, handover of diaries and increased use of electronic diaries given the move away from paper on units. AR to make amendments and reshare for final comments.</p> <p>JP to ask for details of electronic diary used elsewhere in the country and to share.</p>
6	<p><b>Best Practice Education Tool</b></p> <p>ET Tube Management - thank you to HS for drafting the ETT management best practice educational tool. AR to share with the group for comments. This now means the group have developed a education tool for all areas of practice audited. These are valuable resources for units as quick look guides, for new starters or redeployed staff. Some of these had been used at Nightingale Hospital. AR praised the group on their engagement to produce such a valuable piece of work.</p>
7	<p><b>AOB</b></p> <ul style="list-style-type: none"><li>• ED asked the group if anyone had an SOP for repositioning intubated patients detailing who should be present to ensure safety of airway. SA to share SOP from LHTH that states a competent practitioner needs to be available for the move just in case the ETT/TT becomes dislodged.</li><li>• National inquiry about how inotropes are weaned, mls/hr or mcg/kg/hr. Most units present worked in mcg/kg/hr. DC developing guidelines at Hull, will share once complete. LD cited National Pharmacy Guidelines. ED to share York guidelines and CH to share drug monographs from Lancashire and South Cumbria Network</li><li>• ED asked if any unit used urinary catheters with a temperature probe. SA said LHTH use these when Maxfax patients and will share details</li><li>• SA asked about practices of using short sleeve gowns to prevent spread of nosocomial infections, allow bare below the elbow, and adequate hand washing between patients whilst still protecting staff from COVID exposure. No consensus,</li></ul>



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	<p>mixed approaches depending on patient status and trust IPC guidelines.</p> <ul style="list-style-type: none"><li>• JP to share ICS Wellbeing Best Practice Guide.</li></ul> <p>AR thanked Sheelah and Liz for their contributions to the group over the years. Sheila is retiring (but returning) and Liz relocating.</p>
<b>Next Meetings</b> <b>20th September 2021 - MS Teams 2pm - 3:30pm</b> <b>10th January 2022 - MS Teams 2pm - 3:30pm</b>	

Item	Action	By Whom
2	Share information on #Thinkahead pressure ulcer campaign	JS
2	Share Care Star CPAP hood protocol and decontamination process of Hillrom Progressa Beds/Mattresses	LC
5	Share presentation with scores and resources.	AR
5	Contact AR if require access to regional benchmarking page on eh website	All
5	Make discussed amendments to Patient Diary benchmark tool and reshare for comments.	AR/All
5	JP to ask for details of electronic diary used elsewhere in the country and to share.	JP
6	Share ETT best practice Education tool for comments	AR/All
7	SA to share SOP for repositioning intubated patients.	SA
7	Share any resources on titrating inotropes	ED/CH/DC
7	Share details of urinary catheters with temperature probes in situ.	SA
7	share ICS Wellbeing Best Practice Guide.	JP