



Collaborative Regional Benchmarking Meeting

Meeting Minutes - Monday 10th January 2022

14:00 – 15:30

MS Teams Meeting notes

<p>In Attendance Alison Richmond (AR)(Chair) Claire Horsfield (CH) Julie Platten (JP) Lesley Durham (LD) Jo Steffensen (JS) Bertrand Porthal (BP) Beth Hill (BH) Laura Bayliss (LB) Chloe Hardcastle (CHa) Matt Marks (MM) Stephanie Gale (SG) Linda Brennand (LB) Victoria Jourdain (VJ) Samantha Rogers (SR)(notes)</p>	<p>Quality Improvement Lead Nurse, WYCCODN Network Manager/Lead Nurse WYCCODN & SYBCCODN Network Manager, NoECCODN Director and Lead Nurse, NoECCODN Clinical Quality Practitioner, LTHT Clinical Educator, York Hospitals NHS Trust Clinical, Educator, York Hospitals NHS Trust Sister and Practice Educator, Harrogate District Hospitals Sister, Castle Hill Hospital, Hull ICU Educator, Scarborough Hospital Clinical Coordinator and Education Lead, North East Hospitals Clinical Educator, Airedale Hospital Nuffield Health Leeds Data Analyst/Project Officer, WYCCODN</p>
<p>Apologies Cat Balcombe (CB) Darren Watson (DW) Angela Jones (AJ) Sharon Johnson (SJ) Liz Ellis (LE) Shirley Moorhouse (SM)</p>	<p>Quality Improvement Lead Nurse, LTHT James Cook ICU, Sunderland Royal Hospital Ward 18, ICU, RVI Lead for Education, Mid Yorkshire NHS Trust Sister, Calderdale & Huddersfield NHS Foundation Trust</p>

Item	
1	Introduction & Apologies - As above
2	Minutes and Actions not on agenda - Minutes of previous meeting held in Monday 20th September 2021 accepted as a true record. Actions from last meeting have been completed or are on this meetings agenda.
3	<p>Network Update</p> <p>North Yorkshire and Humberside Critical Care Network - No update available</p> <ul style="list-style-type: none"> • BP - It is likely that Coventry university will continue to deliver their Critical Care Course but no confirmation as yet. <p>West Yorkshire Critical Care Network</p> <ul style="list-style-type: none"> • Completed Virtual Peer Reviews, just writing up reports to circulate to the Units. Self assessment was done against GPICS - required lots of audit/policies to demonstrate compliance. Paul Stonelake (Deputy Medical Lead) is developing plan to make this easier next year. • PNA implementation - WY & SYB PNA Forum continue to meet to sharing experiences, resources & offer peer support. • Continuing with 3 times per year Service Improvement Lead meetings for WY in addition to this regional meeting. • Benchmarking recommenced by most units • Looking at Delirium Care Bundle development based on LSCCCN work, AR to share when finalised • Recently completed Best Practice Principles for nursing patients in single rooms. AR will share with the group. • Development of Adult Critical Care Transfer Service for the Yorkshire & Humber region in progress • Medication Safety Forum established in response to critical incident project analysis. • Critical Care Course @ Leeds was successful in its bid to deliver the course via the framework. The Network are monitoring access to place numbers after both Huddersfield and Bradford



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	<p>Universities didn't tender to deliver via the framework.</p> <ul style="list-style-type: none">• Successful in receiving three HEE funded places for Post Graduate CertEd for Clinical Educators.• Several WY Units are interesting in piloting Step 1 transition onto a digital platform. <p>North of England Critical Care Network</p> <ul style="list-style-type: none">• Ensure places for Critical Care Course are used optimally and support embedding of new process.• Supporting and embedding the PNA role in the units.• Held a Quality Improvement event (online) to share good practice which was well attended.• Continue to report benchmarks monthly.• Some units are using the benchmarks as a topic of the month to highlight and promote best practice - many reported practice changed in nursing COVID patients - most notably sedation where sedation holds or targeted RASS were not always used.
4	<p>National Update CC3N</p> <ul style="list-style-type: none">• Working with HEE to digitalise Step Competencies- starting with Step 1 competencies then hopefully move onto step 2 & 3. Asking for Pilot units - WY units and NoE units keen to be involved in the pilot. If NY&H units keen to be involved AR suggested they contact their Network Lead.• Working with HEE to iron out access to Critical Care Courses that are now on the national Framework.• Critical Care Workforce - NHSEI supportive of CC3N suggestions such as:<ol style="list-style-type: none">1. recognising critical care nursing as a speciality2. Limiting the movement of critical care nursing staff to other wards and departments3. Embedding the role of the PNA in critical care units4. The standardisation on the variation of Bank Rates5. Establishment numbers are being looked at in order to standardise this throughout the country and ensure it takes into account appropriate uplift for supernumerary time / study leave / PNA / etc• LD reorted that the Critical Care Outreach Career Framework and Credential (CCOPCRED) will hopefully be out for consultation in the next 2 weeks. LD asked the group to share when this comes out. AR to contact Natalie Pattison (Chair of NORF) about the Quality and operational Standards for CCOT Self Assessment Tool.• PNA's - national implementation document has now been published and the CC3N SOP for PNA's in Critical Care is with members for comments. The role will also be in the NHS contract from April 2022• HCSW Competencies- the draft document has been circulated via Network Leads several times. Now split into Band 2 & Band 3 competencies following feedback so each trust/unit can use which ever competencies fit best with their own HCSW as there are variations in what HCSW do. These will be published as two documents.• CC3N Symposium - **New Date Friday 15th July *** The Studio, Birmingham. The group discussed and agreed a nominal charge for this event. JP to circulate flyer.
5	<p>Benchmarking Discussion</p> <p>AR shared benchmarking review for January 2022 and thanked the units for their commitment to submission through difficult times. Discussion followed about each of the areas of practice benchmarked and resources that are available on the wyccn website were shared.</p> <p>Benchmarking: Review Scores for:</p> <ul style="list-style-type: none">• TT management - Good scores and good practice. Harrogate talked through their scores, they need to update there guidelines for this. Tracheostomy patients can only being cared for on ICU at Harrogate. Clinical notes were up to date and documented well. There are looking for tracheostomy tubes from a different manufacturer presently. AR pointed anyone short of



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	<p>guidelines to the following documentation:</p> <ul style="list-style-type: none">- CRBG Best Practice Education Tool- ICS Guidance for Tracheostomy Care- ICS Percutaneous Tracheostomy Checklist- LTHT Tracheostomy Guideline- BRI Tracheostomy Guideline- National Tracheostomy Safety Project <ul style="list-style-type: none">• ETT management - There is the best practice guidelines previously produced by this group but they are out of date. AR to and update. JS shared that there was no specific guideline for adult intubation at LTHT and has taken to the respiratory group and shared documentation found on the WYCCODN website. BP to share York's ETT guidance. Resources available include:<ul style="list-style-type: none">- CRBG Best Practice Education Tool- ICS intubation checklist- VAP Care Audit in West Yorkshire - AR to share- Tissue viability conference - Preventing facial pressure ulcers using head supports and Insight extra long ETT holders. Details of these products on the attached slides.• O2/Humidification - Scarborough to roll out new guidelines and provide easy access so people know where to find them. LB will focus on these guidelines, BP will share York guidelines. Resources available include:<ul style="list-style-type: none">- CRBG Best Practice Education Tool- NOECCN Oxygen Therapy and Humidification Best Practice Guide (2013). These are due an update JP to action.- HDFT Nasal High Flow Guidance- LTHT Prescribing & Administration of Oxygen• Suctioning - Harrogate need guidelines producing, LB to action. Leeds scored high but was this was useful in highlighting their guidelines were not located the rest of the guidance so has been rectified. Suction therapy resources include:<ul style="list-style-type: none">- CRBG Best Practice Education Tool- LTHT Suctioning Guidance- BRI Suctioning Guidance• Patient Diaries - New benchmark AR asked for feed back. The group agreed this was valuable to benchmark. LB suggested this benchmark has brought up the importance of diaries. An electronic version would be really useful. ICU Steps are looking at electronic patient diaries JP to follow this up. VJ will share Nuffield SOP on patient diaries. Patient diary resources available:<ul style="list-style-type: none">- HDFT Patient Diary Protocol (on the WYCCODN website)- NOECCN (2016)/SECCN - Patient diary guideline (JP to update)- Colchester resources- www.icu-diary.org• Prone Therapy - Not proning as many patients currently due to reduced number of Covid-19 therefore some factors difficult to benchmark. Proning resources available include:<ul style="list-style-type: none">- CRBG Best Practice Education Tool- ICS Guidance Prone Position in adult critical care (2019) - includes checklist- ICS Guidance for conscious proning in COVID 19 (2020)- LTHT - Prone Guideline- How to prone video- NHS Stop the Pressure Programme- Relative information leaflet - AR to share.- Skin damage prevention in the prone ventilated critically ill patient: A comprehensive review and gap analysis (PRONect study) <i>Anika Fourie, Journal of Tissue Viability</i> https://dai.org/10.1016/j.jtv.2021.09.005
6	<p>Wellbeing Benchmark</p> <p>At the last meeting developing a staff wellbeing benchmark was discussed. AR shared the ICS wellbeing tool</p>



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	developed by Dr Julie Highfield. The group agreed to use the ICS self assessment on their units and this was well researched and recognised by the ICS as good practice. Now is the time to do this to get a baseline and progress from there. AR asked the group to have a go at the ICS wellbeing tool and feedback at the next meeting. Links within attached powerpoint.
7	<p>AOB</p> <ul style="list-style-type: none"> - The group discussed securement of arterial lines. No unit used specific securing devices but secured with dressing or sutures if required. JP will feed this back to SG. CHa asked for an arterial line guideline AR will share what is on the WYCCN website and LB will share Harrogate's. - JS asked if anyone had updated eye care guidelines to share. - Chlorohexidine gel in mouthcare was discussed. LTHT recommended using chlorhexidine gel on ventilated patients following local research. Currently stock is limited. JS to feedback once they have collected some more data. - LB asked the group about standardised mouth care. Harrogate have been told not to use 'pink sponges' for ventilated patients due to incident elsewhere in the trust. This is similar at Hull. Most units brush twice daily with toothbrush /toothpaste and then use oral swab 4hourly. LTHT still use pink sponges but do not soak. York use Hallyard Advanced Oral Care kits which contain more substantial swab and advise to tug the swab before use to ensure integrity. LTHT do the mouth care scores and 2-3 hourly mouthcare. LB at Airedale has developed a new scoring system for mouthcare. The group to share any mouthcare assessments. - The group discussed compliance to handwashing. Continue to challenge staff when necessary, occasional daily hand hygiene audits, hand hygiene champions.
<p>Next Meetings: 23rd May 2022 - 13:30 - 15:00 19th September 2022 - 13:30 - 15:00</p>	

Item	Action	By Whom
3	Share Delirium Care Bundle when complete	AR
3	Share Best Practice Principles for nursing patients in single rooms	AR
4	Circulate CCOPCRED for comments when available	LD/All
4	Contact Natalie Pattison (Chair of NORF) about the Quality and operational Standards for CCOT Self Assessment Tool	AR
5	Update CRBG ETT Guidance & Share VAP audit tool	AR
5	Share ETT/Oxygen Therapy Guidance from York	BP
5	Update NOECCN Oxygen Therapy and Humidification Best Practice Guide	JP
5	Update NOECCN Patient Diary Best Practice Guide and contact ICU Steps re electronic diary	JP
5	Share Nuffield SOP on patient diaries	VJ
5	Share Relative Leaflet on Proning Patients	AR
6	Units to utilise the ICS Wellbeing Framework Self Assessment tool and feedback at the next meeting	All
7	Share oral assessment tools.	All