



## Collaborative Regional Benchmarking Meeting

Meeting Minutes - Monday 20th September 2021

14:00 – 15:00

MS Teams Meeting notes

<p><b>In Attendance</b>          Alison Richmond (AR) (Chair)          Claire Horsfield (CH)          Julie Platten (JP)          Jo Steffensen (JS)          Shirley Moorhouse (SM)          Bertrand Porthal (BP)          Beth Hill (BH)          Linda Cross (LC)          Eve Geldart (EG)          Rebecca Wall (RW)          Amanda Duffy (AD)          Elizabeth Williamson (EW)          Liz Ellis (LE)          Christopher Hyde-Wyatt          Amanda Holmes (AH)</p>	<p>Quality Improvement Lead Nurse, WYCCODN          Networkk Manager/Lead Nurse WYCCODN          Network Manager, NoECCODN          Clinical Quality Practitioner, LTHT          Sister, Calderdale &amp; Huddersfield NHS Trust          Clinical Educator, York Hospitals NHS Trust          York Hospitals NHS Trust          Sister Sister, Harrogate District Hospitals          Sister Sister, Harrogate District Hospitals          Sister, Hull Royal Infirmary          South Tyneside District hospital          Northumbria Healthcare NHS Foundation Trust          Lead for Education, Mid Yorkshire NHS Trust          Scunthorpe General Hospital          Unit Manager ICU, Scunthorpe General Hospital</p>
<p><b>Apologies</b>          Laura Bayliss          Chloe Hardecsatle</p>	<p>Sister, Harrogate District Hospitals          Sister, Castle Hill Hospital, Hull</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 April 2021 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>Linda Cross (HDFT) was to share Care Star CPAP hood protocol and decontamination process of Hillrom Progressa Beds/Mattresses - LC to follow up</li> <li>JP to ask for details of elcetriconic diary used elsewhere in the country and to share - Jp to follow up</li> </ul>
3	<p><b>Network Update</b></p> <p><b>North of England Critical Care Network</b></p> <ul style="list-style-type: none"> <li>Benchmarks continued to be submitted by units throughout pandemic</li> <li>Network Benchmarking meeting renamed Practice Developemnt meetings. Aiming to looking pressure ulcer care and end of life in november.</li> <li>All units remain under pressure.</li> </ul> <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>AH from Scunthorpe will submit backdated benchmarks</li> <li>All unit in NY&amp;H have been under immense pressure</li> <li>Completion of 6 new isolation rooms at York Hospital has been delayed until December meaning unit is still divided into hot &amp; cold areas</li> </ul> <p><b>West Yorkshire</b></p> <ul style="list-style-type: none"> <li>All units remain busy</li> </ul>



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	<ul style="list-style-type: none"> <li>Peer Reviews to take place virtually</li> <li>Developing Adult Critical Care Transfer Service to cover Yorkshire &amp; Humber region Funding will only cover a daytime service.</li> <li>Completed critical incident project over last two years to look at all critical incidents reported in ICUs in the Network. Aim was to identify common themes and develop workstreams/QI to address issues raised. Led to development of best practice principles to apply when nursing patients in single rooms, medicine management group, LTH Tissue Viability Conference.</li> <li>Reconvened network forums after a pause due to covid.</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 standardisation of Critical Care Courses of 60 credits at level 6/7 . Procurement now complete and successful HEI/Trusts are waiting to hear outcome.</li> <li>Additional £10 million for Critical Care Educators - to increase ratio from from 1:75 to 1:50 (head count). JP suggested looking at current ratio to see current position in preparation. Aspiration for this money to also be used to standardise level of qualification held by educators. Monies will be held by ODN's</li> <li>Nursing Associate competencies for critical care now complete and with RCN for endorsement.</li> <li>Exploring option of ODP's to be used as bedside practitioners. Mapping work ongoing against Step Competencies but need agreement from all bodies. Anticipated that this would be for a small number of ODP's. Some units already have ODP's in critical care establishment.</li> <li>Career pathway for critical care nurses that recognises critical care nurses as specialised and should be paid as such has been developed. Discussions ongoing with NHSEI.</li> <li>Reviewing establishment numbers for critical care nurses.</li> <li>Enhanced Care Practitioner Apprentership has now being signed off. Could be used within critical care. 2 year programme covering steps 1, 2 &amp; 3. Funding from apprenticeship programme. 20% time must be supernumerary/education over the 2 years. Webinar coming soon. Currently out to Trusts for expressions of interest.</li> <li>Professional Nurse Advocacy Training. Ruth May vision in recognition of the stress critical care staff had been exposed to during the pandemic. Nationally 436 places have been allocated to critical care nurses and funded by HEE (now rolled out to other specialities). The expectation is that each nurse will have access to a PNA who can deliver restorative supervision based on the A-EQUIP model. Will only be successful if we have buy in from organisations and PNAs are allocated dedicated time to implement model. Successfully implemented in Birmingham. Staff from all units in WY &amp; NoE currently undertaking the training. Unsure of NY&amp;H situation. York did have an allocated place but unable to commence. Will look to have someone able to undertake the training in the future. JS reported that the plan for implementation at LTH was going well and is looking like it will be very valuable to staff. EW agreed that plans for PNA implementation were also going well at Northumbria. LE reported they just have one band 5 undertaking the training at PGH who is finding implementation a challenge. AR asked for contact details as linking with other PNAs from WY for support and ideas might be of use.</li> </ul>
5	<p><b>Benchmarking Discussion</b></p> <p>AR shared benchmarking review for September 2021 and thanked the units for their commitment to submission. Discussion followed about each of the areas of practice benchmarked and resources that are available on the wyccn website were shared.</p> <ul style="list-style-type: none"> <li>CVC management - AH explained that Scunthorpe do have guideline for CVC</li> </ul>



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	<p>management therefore their score submitted is incorrect.</p> <ul style="list-style-type: none"><li>• Arterial Line Management - AH explained that Scunthorpe do have guidelines for Arterial line management but out of date so their score is higher than submitted. AR to make amendments to database.</li><li>• Transfer - NoECCN currently updating transfer guidelines to include their Adult Critical Care Transfer Service (NECTAR) who do the majority of their Critical Care transfers. AR asked if/how all transfers were reported to the other networks. JP said that they use Survey Monkey but not all are reported. Suggested most reliable would be pulling data from WardWatcher. JS intends to revisit transfer processes at LTHT by linking with Transfer Champions.</li><li>• Pressure Ulcer Prevention - Northumbria lacking guidelines, but looking into within Trust. Resources available of website for sharing. JP to share videos produced by the National Stop the Pressure campaign.</li><li>• Renal replacement Therapy - good scores from those units that submitted.</li></ul> <p>Discussion around guidelines highlighted that once new/revised guidance was written governance in trusts took a prolonged time to approve. LE explained that PGH ICU has written Standard Operating Procedures (SOP's) or Local Operating procedures (LOP's) which didn't need to go through Trust Governance but just ICU governance. JS added that the influx of new starters knowing where to access guidelines was impacting upon scores for LTHT. This is been addressed.</p> <p>JS has found the benchmarking process useful in identifying gaps in guideline availability. AR reiterated that BMs are widely used in NHS &amp; can demonstrate service improvement and how your unit is performing against its peers and where improvements can be made. Encouraged to share when CQC visit, at Peer Reviews and share with clinical teams celebrate success/areas to improve.</p> <p>Next benchmarks due are</p> <ul style="list-style-type: none"><li>• September - ETT &amp; TT tube management</li><li>• October - Oxygen/Humidification Therapy &amp; Suction Therapy</li><li>• November - Rehabilitation - Patient Diaries</li><li>• December - Proning</li></ul> <p>AR reminded the group that if units scored 9 or above to guidelines or education packages can be shared and uploaded on to the website.</p> <p>A reminder will be sent out by AR/Sam Rogers/Sarah Gray at the beginning of the month for benchmark submissions.</p>
6	<p><b>Best Practice Education Tools/Next Projects</b></p> <p>Project complete - best practice educational tools now available for each of the areas of practice audited. All have been circulated and uploaded onto the website for use on ICU's, with new starters, redeployed staff, students or as refresher. JP congratulated the group on this piece of work and said that they had been recognised nationally and some used as quick look guides for the Nightingale Hospitals. AR suggested that this would be a good presentation of collaboration and education at conferences next year.</p> <p>JP added that the collaboration of the 3 networks should also be celebrated and recognised for its value in sharing good practice across a wider geographical area.</p>



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	<p>AR asked for future project ideas, bearing in mind continued pressures within critical care.</p> <p>JP suggested benchmark on wellbeing. EW agreed that this could be project to look at and share resources.</p> <p>AR to pull together wellbeing benchmark resources before next meeting. All to share ideas/resources.</p> <p>CH - WYCCN working in partnership with Yorkshire &amp; Humber Patient Safety Transformational Leadership Research Centre and Bradford Teaching Hospitals, in the Reboot Coaching Programme. Funded by the Burdett Trust and aims to prepare Critical Care Nurses for highly stressful clinical events and aid recovery. Included coaching workshops &amp; psychological therapy sessions. Currently open for staff in West Yorkshire but will feedback on outcome.</p>
7	<p><b>AOB</b></p> <p>TV Conference for Critical Care hosted by LTHT will be held on Tuesday 9th November via Zoom. 9:30am - 4:00pm on Zoom. Open to critical care nurses from across North of England. Guest Speakers, workshops &amp; master classes. Opportunity to share your QI projects. Flyer has been circulated. Link to google registration form below</p> <p><a href="https://docs.google.com/forms/d/e/1FAIpQLSf0YSTvL8P9yWUSqMZCro68ly7SVFSz0Hrf2x9-g_lpHWeHTg/viewform">https://docs.google.com/forms/d/e/1FAIpQLSf0YSTvL8P9yWUSqMZCro68ly7SVFSz0Hrf2x9-g_lpHWeHTg/viewform</a></p>
<b>Next Meetings</b> <b>10th January 2022 - MS Teams 2pm - 3:30pm</b>	

Item	Action	By Whom
2	JP to ask for details of electronic diary used elsewhere in the country and to share.	JP
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	Share videos produced by the National Stop the Pressure campaign.	JP
5	Submit scores resources for September/October/November and December Benchmarks.	All
6	Share wellbeing resources	All
6	Pull together Wellbeing Benchmark	AR