

Notes of the LSEBN ODN Board (Core Group)
Wednesday 18th September 2019

In attendance

- Alexandra Murray
- Jorge Leon-Vilapalos
- Rachel Wiltshire
- Kathy Brennan (NHS England London)
- Nicole Lee
- Lisa Williams
- Pete Saggars
- David Barnes
- Nora Nugent

Apologies from

*Bruno Botelho (Chelsea & Westminster Hospital – ODN Host),
Victoria Osborne-Smith (NHS England National), Richard Macdonald (NHS England East),
Su Woolard (NHS England South East), Paul Carter (NHS England South East)*

NOTES

1 Chairs Introduction

Jorge Leon-Vilapalos welcomed members to the meeting.

2 Notes of the previous meeting held June 2019 (attachment 01)

The notes of the meeting, consisting of the main ODN Board and the Summer MDT audit were approved.

3 Actions and matters arising

No additional issues related to the previous meeting were raised.

4 ODN Annual Report 2018-2019

PS had circulated a final draft Annual Report for discussion and approval. A small number of minor amendments had been identified and PS will circulate the final version within the next few days.

Action:

- ❖ **PS to finalise annual report and circulate final version to team members, for final approval.**

7 ODN Risk Register

PS had circulated a draft report for discussion and action. The LSEBN is the only burns ODN that does not routinely record and report an ODN risk register and this draft includes only those issues that are seen to be truly network wide. The meeting discussed and approved the content and process / scoring that would indicate the risk “score”.

With regard to the individual topic areas, it was noted that two of the six relate to commissioner derogation; one relates to the delay in developing a burns facility in East London and; one relates to the wider, commissioner-led strategic review for specialised burn care.

The meeting agreed the appropriate classification and scoring for the six identified areas of ODN risk, also noting that a conversation with clinicians at Royal London Whitechapel should be sought at the earliest opportunity.

There was discussion about any potential “missing” risks and it was agreed that the TRIPS telemedicine system should be included. There has been a long-standing hope that the system can be developed and enhanced as a smart-phone application, together with all of the necessary security and encryption. TRIPs will be added to a revised Risk Register.

Action:

- ❖ **PS to finalise the Risk Register Report and circulate final version to all ODN members.**
- ❖ **PS to make contact with the Clinical Lead at RLH Whitechapel and arrange for a meeting with NHS England Commissioners.**
- ❖ **RLH to be invited to the Winter MDT Audit and to give a presentation on patient activities, including poly-trauma cases.**

With regard to the subject of St Andrews and the paediatric referral matrix, it was agreed that the clinical lead will give a short presentation at the Winter MDT meeting.

8 **EPRR Surge & Escalation SOP**

PS gave a short verbal update on the National Burns Annex and Critical Care SOP. The work on the burns annex to ConOps is progressing well and the draft document has been seen and approved by the MTCRG. A BIRT Information day was held on Tuesday 17th September and had been a great success.

There had been considerable interest at the BIRT meeting in the importance of the role of the Burns Strategic Clinical Lead (as part of the incident clinical cell). It was very clearly noted that the potential postholders would need lots of training and education to be able to confidently undertake the role. The NHS England national EPRR team will announce the roll-out of this role in the near future.

PS also noted that the new Burns Critical Care SOP was due to be introduced at the same time as the Annex. The SOP covers surge and escalation under “normal business” conditions and will include a revision of the NHS Pathways DOS system. Work has been undertaken with the NBBB and a new format for both the DOS input screen and the NBBB reports will be introduced. PS has been asked to write a short national guide for the new system, and this will be available in mid to late October.

There will also be an ODN template for a service Action Plan, to be used as a guide for actions to be undertaken during a period of surge and escalation. This will cover both normal business and major incidents. Both of these topics are included in the ODN work programme for 2019-2020.

6 **ODN Terms of Reference and Memorandum of Understanding**

PS circulated a draft MOU for discussion and action / approval. The MOU is required by NHS England commissioners and seen as a way of increasing engagement with ODN stakeholders. The draft circulated describes the relationships between the host Trust, burn services and their Trusts, commissioners, and the ODN team. It is intended to improve engagement and help ensure that there is “buy-in” to issues discussed and decisions made by the ODN. The LSEBN currently has a “Partnership Agreement” document, that describes the roles of stakeholders and includes the ODN Board Terms of Reference. In the future, the MOU will sit separately from the ODN Terms of Reference. It is possible that some national guidance will be issued for ODNs and this is likely to include the requirements for the MOU and ODN Terms of Reference

Action:

- ❖ **PS to meet with Kathy Brennan to finalise the MOU and ToR**

Self-Assessment 2019-2020

PS had circulated a Draft report and recommended action plan.

At the June 2019 ODN meeting, the results of the self-assessment had been presented in the form of a spreadsheet table analysis. Commissioner members had asked for a more detailed report, articulating the gaps in compliance and categorising them for actions in terms of low, medium and high priorities.

After some helpful initial work by Andrew Williams and the clinical team at ChelWest, PS wrote a detailed report on the areas of compliance and non-compliance and made recommendations about the necessary actions and timeframes for action. PS explained in the report that there appeared to be a significant number of areas of non-compliance where it seemed that services had interpreted the standards in different ways, leading to an inconsistent response in the assessment. It had been impossible to be absolutely clear in the report where these inconsistencies were, but the discussion at the meeting suggested that the number of inconsistent responses was very significant. It was agreed that most of the report could only be properly scrutinised after a second assessment, and that services must work more closely to agree a common interpretation of the requirements, in those areas where there was potential or actual ambiguity.

Action:

❖ **It is proposed that the ODN professional leads for surgery/medicine, nursing, therapies and psychosocial care review these areas, to enable a common interpretation of the standards and the sharing of compliant processes.**

There were a small number of areas in the report, highlighted as high priority for action. Most of these relate to the derogated services at St Andrews and QVH. It was quickly concluded that these were issues highlighted in the draft Risk Register and were for the commissioners to consider.

There are issues related to the minimum number of cases seen at centre- and unit-level, for Queen Victoria and Stoke Mandeville. The ODN needs to develop a monitoring system that records, each year, the number of cases at each level. In addition, the ODN will need to agree a programme that enables members of the MDT, at services not reaching the minimum number of cases, to maintain skills and clinical competencies.

- ❖ **As recommended in the ODN report, PS will work closely with the service clinical leads to develop:**
 - **A common toolkit for monitoring activity and complexity of admissions over a rolling average five-year period;**
 - **A common assessment tool, as described in F.05.G, and;**
 - **A process for reporting to the ODN and an action plan for services that are not compliant with minimum numbers.**
- ❖ **It is expected that the toolkit will be ready for implementation by 31 March 2020.**
- ❖ **This work will be added to the ODN Work Programme (Section 6).**

There are two issues (St Andrews) related to Safeguarding (B.22.D) and services for people with SJS / TENS (C.09).

Safeguarding level 3: DB reported that all the surgical consultants are compliant, but that there is a national discrepancy between the RCA and the paediatric standards as to what is needed and when. The service is making progress in training members of the wider MDT

TENS: DB reported that patients are referred to a dermatologist within 12 hours, as per the requirements of standards (BAD) and Burns. However, the burns service cannot guarantee that they will see in that time frame, although at present, they usually do.

Action:

- ❖ **As recommended in the ODN report, St Andrews will provide a briefing report will be provided to the ODN Board in December 2019.**

5 **ODN Work Programme 2019-2020**

PS presented the Final draft report for approval. Earlier in the meeting, it was agreed that two additional topics are to be included in the 2019-2020 programme (see actions above).

Action:

- ❖ **PS will amend the draft Work programme to include the issues discussed and circulate a final version to all stakeholders.**
- ❖ **The ODN Team will provide a Q3 update to the ODN Board in December.**

10 **Commissioning Issues**

- Major Trauma CRG
- Draft 2019 Burns Quality Dashboard and MDS

There has been no release of notes from the most recent MT CRG meeting and VO-S was not able to join the meeting today.

PS had circulated a copy of the most recent (draft) adult specialised burns service quality indicators. The QI's include the revised dashboard and also a series of "self-declared" topics, including some derived from the BBA Standards and Outcomes. The draft QI's are circulated for information only and are subject to change. A small T&F group, led by Jacky Edwards, is responsible for leading this work.

Date of next meeting(s)

CONFIRMED

- ❖ Tuesday 10th December 10.30-15.00
LSEBN ODN Board (Main Group) and Winter Audit / MDT
Queen Victoria Hospital

TO BE CONFIRMED

- ❖ Wednesday 11th March 2020
LSEBN ODN (Core Group)
Venue to be confirmed

- ❖ Thursday 28th May 2020
LSEBN ODN Board (Main Group) and Summer Audit / MDT
Venue to be confirmed