

LSEBN ODN Board (Core Group) and Winter M&M Audit
Thursday 10th December 2020

NOTES of the ODN Board

In Attendance:

Jorge Leon-Villapalos	▪ Chelsea & Westminster (ODN Chair & Clinical Lead)
Lisa Williams	▪ Chelsea & Westminster
Nicole Lee	▪ Queen Victoria Hospital
Nora Nugent	▪ Queen Victoria Hospital
David Barnes	▪ St Andrews
Vicky Dudman	▪ St Andrews
Alexandra Murray	▪ Stoke Mandeville
Gareth Teakle	▪ Chelsea & Westminster
Gail Murray	▪ NHSE Commissioning
Joanne Pope	▪ NHSE Commissioning
Julie Hales	▪ NHSE Commissioning
Victoria Osborne Smith	▪ NHSE Commissioning
Rob Hollingsworth	▪ MDSAS
Enis Muminovic	▪ MDSAS
Ken Dunn	▪ MDSAS
Pete Sagers	▪ Network Manager

Apologies received from: Kathy Brennan, Jane Hubert

1 Chairs introduction and apologies

JL-V welcomed all to the meeting. The network M&M audit follows immediately after the ODN Board and we will aim to close the meeting at 11.20am.

2 Notes of the previous meeting September 2020

PS briefly went through the notes of the previous ODN Board meeting, noting the following issues not on the agenda for today's meeting:

- SJS-TENS: No progress to report
- PPV: No progress to report
- MOU: All services have signalled approval of the ODN MOU, with the exception of C&W. GT confirmed that a number of questions had been raised by the Trust senior team, but it was likely to be signed off in the next few weeks.

3 Matters arising, not on the agenda

- EU-Exit: Disruption to burns referrals / transfers
It was noted that the EPRR discussion about potential traffic disruption on the Channel Port routes - M25 / M2 / M20 – was being raised again by EPRR in NHSE London and South East. The meeting noted that there is an existing and agreed protocol for “outreach” from QVH, if a patient is identified as a delayed transfer that will impact on the patient's outcome. It is acknowledged that these arrangements do not include a defined solution for the transfer method for the burns team to travel away from East Grinstead.

- ❖ **Action: It was agreed that VO-S would organise a meeting SECAMB and QVH, to ensure that the MTC network and ambulance teams were aware of the protocol.**

- Burn Care Guidelines (Need for Surgery)
A revised version of the LSEBN guidelines for the initial management of severe burns has been amended to include reference to escharotomies. This is now uploaded to the ODN Website.
- Pre-hospital transfers (Air Ambulance)
The meeting noted the discussion at the September ODN meeting but agreed that this was an important issue that needed to be considered in the future. It was concluded that this topic should be included in the 2021 ODN Work Programme, and that this would include:
 - An early discussion with the MT networks
 - Scoping the current situation across the whole network
 - Reviewing audit cases where transfer delays were noted as an issue
- Annual Report 2019-2020
PS is working on the final draft of the network annual report and this will be circulated to the ODN team as soon as possible.

Items of business ODN Board

4 Mass Casualty Incidents – Burns Annex

Telemedicine – MDSAS Presentation (Rob Hollingsworth, Ken Dunn, Enis Muminovic)

JL-V welcomed the MDSAS team to the meeting. PS explained that during the work on writing the Burns Annex to ConOps (EPRR Mass Casualty plan), there had been considerable discussions about adopting a common, tele-referral system across all of England for specialised burns referrals. The MDSAS team had given a briefing and presentation to the National Burns ODN Group and were now at today's meeting to demonstrate the system to all LSE services and commissioners.

After the presentation, the team invited questions, including the following issues:

- Mandatory fields for patient information
- Ability to configure the referral information in a format that is needed in the LSE area
- Using the MDSAS system for other services (plastic surgery referrals etc)
- Using the smart-phone App and how images are stored
- Upgrade to link the tele-referral to the IBID data record, being actively developed by the MDSAS team.

It was agreed that the MDSAS tele-referral system, with the inclusion of the mobile-phone App was a significant improvement on the existing TRIPS. However, it was important to reflect on the presentation and discuss the issue with colleagues in each service, to weigh the benefits and consequences of adopting the new system.

- ❖ ***Action: It was agreed that the Service Clinical Leads would look at the impact of adopting the new MDSAS system in their services and would meet again at the end of January 2021, to discuss the matter further, with the aim of making a final decision at the next ODN meeting.***

5 Burns Critical Care SOP for Surge & Escalation

PS spoke briefly about the current situation with the 2020 SOP and recent national agreements to roll-out the SOP at the earliest opportunity across all burn care services and the NBBB. PS has held a number of video meetings with senior nursing staff, demonstrating the actions that are to be deployed when services are at OPEL 2 and not able to accept referrals as normal and are seeking mutual aid, through the Bed Bureau. Colleagues in the South West network are adding an audio / video track to the PPT presentation and this will be made available for services to use locally.

6 **Service delivery issues – To note the current position**

London & South East Burns Strategic Vision
QVH Adult Burns and St Andrews Paediatric centre

PS spoke about the background to the Strategic Vision paper, written by the network team in 2017-18 and intended to open a dialogue with commissioners, about the configuration of burn services in London and South East. Since that initial document was written, the situation with the paediatric specification has been clarified, and it was announced by NHS England in early 2020, that the St Andrews Burns Centre would continue to provide centre-level burn care for children, under the collaborative arrangements and protocol, with Birmingham Children's Hospital.

JH commented on the current position with discussions about the adult burns service at QVH and noted that the SE Commissioners have developed an Options Appraisal paper for the future configuration

PS explained that over the past weeks, during the regular fortnightly tele-conference meetings between the ODN team and LSE commissioners, the issue of the 2020 ODN work programme had been raised.

As a consequence of these discussions and older, previous conversations at the National Burns ODN Group, PS told the ODN meeting that it was proposed that, as part of a "return to normal business" for the ODN Team, the LSEBN develops a new Peer Review Process for specialised burns.

JP commented that this would be an external review panel, with a focus on Quality Assurance. The new Regional Quality Surveillance Teams (QST) will support the process and JP confirmed that the EoE QST will support this project on behalf of the three regions.

The proposal was approved and PS will work with the Commissioners to establish the arrangements and process.

- ❖ **Action: A meeting between PS, JP and Hannah Coyle (EoE QST) will take place on 21 December. At this meeting, the aims, objectives and scope of the Peer Review Process will be agreed.**

Due to time constraints, the remaining items on the agenda were not discussed.

- 7 **Coronavirus (Covid-19) – Reflection on National and Network issues**
- 8 **ODN Work Plan 2020 – National and Network projects**
- 9 **Network ODN Issues for information**
- and ODN Risk Register Q3 (attachment 02)
- 10 ODN Team Budget: Month 7 and forecast outturn (attachment 03)
- 11 **Commissioning Issues**
 - Major Trauma CRG
 - Other Strategic or Delivery issues

Date of next ODN Board meeting(s)

- ❖ **ODN Core Group and Spring M&M Audit: Tuesday 16th March 2021**
- ❖ **NBODNG National M Audit: Monday 26th April 2021 (MS Teams)**

The notes of the LSEBN Winter M&M Audit meeting follow below.

Thursday 10th December 2020

NOTES of the Winter M&M Audit

In Attendance:

Peter Drew	External Chair: Clinical Lead for the South West Burns Network
Balj Dheansa	Queen Victoria Hospital
Barbara Weatherall	Chelsea & Westminster
Carolyn Young	NHSE/I Commissioner (National)
Cath Spoons	St Andrews
Clara Upson	Queen Victoria Hospital
Dan Markeson	St Andrews
Jorge Leon-Villapalos	Chelsea & Westminster
Lisa Williams	Chelsea & Westminster
Fadi Issa	Stoke Mandeville
Hodan Abdi	Chelsea & Westminster
Isabel Jones	Chelsea & Westminster
Jamil Moledina	St Georges
Joanne Atkins	Chelsea & Westminster
Pete Siggers	Network Manager
Julie Baker	Queen Victoria Hospital
Gail Murray	NHSE/I Commissioner (East of England)
Kaneka Bernard	Stoke Mandeville
Katherine Elworthy	Chelsea & Westminster
Joanne Pope	NHSE/I Commissioner (East of England)
Liz Pounds-Cornish	Stoke Mandeville
Maria Chicco	Stoke Mandeville
Niall Martin	St Andrews
Victoria Osborne Smith	NHSE/I Commissioner (London)
Nicole Lee	Queen Victoria Hospital
Paul Drake	Queen Victoria Hospital
Nora Nugent	Queen Victoria Hospital
Peter Dziejewski	St Andrews
Rachel Wiltshire	St Andrews
Richard Hartop	St Georges
David Barnes	St Andrews
Roger Adlard	St Georges
Sara Boylin	Chelsea & Westminster
Siji Joseph	Oxford
Sonja Cerovac	St Georges
Sophia Opel	St Georges
Stephanie Hill	Oxford
Suzie Whiting	Stoke Mandeville
Teresa Tredoux	St Andrews
Vicky Dudman	St Andrews
Alexandra Murray	Stoke Mandeville

1 **Chairs introduction and apologies**

JL-V welcomed all to the meeting and gave a special welcome to Mr Peter Drew, who as an external Chair for the meeting, provides the extra layer of governance and oversight to our network event. PS made a general statement about the need for confidentiality during the meeting and reiterated that the meeting was only for NHS staff involved in specialised burn care. This includes the NHSE Regional and National Commissioners, who are welcome to join and participate in the meeting.

2 As is the case for all of the network and national M&M Audit meetings, there will be no formal written notes of the meeting. This is because of the sensitive nature of patient information that is discussed. The purpose of the audit is to add a layer of governance and scrutiny to the existing burn service & hospital audit function, and to support services and networks in sharing experiences and good practice, with the aim of improving patient outcomes and quality of care.

3 The audit period was six months, April to September 2020.

4 The Audit format includes the following information, separated for adults and children:

- A summary analysis of activity (patient referrals)
This is sub-analysed between burns and non-burns skin loss activity
- Analysis of resus cases, with or without ventilation
This is also sub-analysed for burns cases and non-burns skin loss cases
- Case analysis of any serious incidents
- Case analysis of all mortalities
Mortalities are categorised as follows:
 - *Expected mortalities / Comfort care*
 - *Out of service mortalities*
 - *Unexpected or actively treated cases*

5 Each of the five specialised burns services in the network gave a presentation on activity, serious incidents and mortalities.

6 One of the objectives for the network audit meeting, is to identify cases for the national Mortality Audit meeting. In addition to all SIs and all mortalities in children, cases for the national meeting are usually those that are unexpected or outlier cases (low Modified Baux Score or other indicators of morbidity).

- **From the presentations, it was agreed that three cases would go forward to the national meeting.**

7 The process of audit allows aspects of the care pathway and treatment of burns to be discussed. In regard to non-patient specific issues discussed at the meeting, two areas were noted:

- Access and availability of post-mortem / Coroner's Office reports, and;
- The major trauma pathways and impact of delayed transfers.

These issues will be discussed with colleagues in the National Burns ODN Group and may be taken up as part of a national work programme.

8 The next series of audit meetings are:

❖ **ODN Core Group and Spring M&M Audit: Tuesday 16th March 2021**

❖ **NBODNG National M Audit: Monday 26th April 2021 (MS Teams)**