

**Notes of LSEBN ODN Board (Core Group)**  
**27th March 2018**

**In Attendance**

- David Barnes (Chair)
- Alexandra Murray
- Rachel Wiltshire
- Lisa Williams
- Krissie Stiles
- Jorge Leon-Vilapalos
- Gareth Teakle (Chelsea & Westminster)
- Michael Wiseman
- Pete Saggars

*Apologies from:*

*Gary Slegg, Sian Summers, Richard McDonald, Victoria Osborne-Smith, Robert Hodgkiss*

**Notes**

**1 Chairs Introduction**

DB welcomed everyone to the meeting. DB confirmed that this was his final meeting as Chair of the ODN and thanked everyone for their contributions and offered best wishes to AM and JLV for the coming years.

It was noted that NHS England was not represented at the meeting. PS will write to the three members asking them to confirm their attendance at the next ODN Board in June 2018.

**2 Notes of the previous meeting**

The notes of the previous meeting held in December 2017 were approved.

**3 Actions and matters arising**

- LSEBN Strategic Vision Statement  
DB noted that the document had been circulated to stakeholders in NHS England, the other burn networks and trauma networks in the LSE region. DB and PS had held a meeting with the NHS England (London) medical director (Dr. Vin Diwaker) and the content of the report had been included in the discussion. The meeting had covered a number of areas, including the potential for a burns centre located in London. Whilst nothing formal had been agreed, it was a positive meeting and was valuable in the context of the review of burn standards and the paediatric burns review. PS mentioned that the recent meetings with RLH Whitechapel had been somewhat influenced by the discussion (see item 4).
- LSEBN Budget 2017-2018 Funding development  
PS noted that agreement on utilising the funding surplus in 17-18 had been agreed with clinical leads. By a 3:1 majority, it had been agreed to use the surplus (circa £33,000) to support training and education opportunities in the burns services. PS has written to clinical and management leads at each hospital to explain the process and details of how to invoice / claim the agreed amounts. PS confirmed that the monies was provided without restrictions on use, except that it should improve the knowledge and skills of the burns MDT and benefit the delivery of care for burns patients and their families.

#### 4 **Burns Facilities** RLH Whitechapel – Progress

PS spoke briefly about the most recent meetings between the RLH team and NHS England (London). Unfortunately, there has been little progress since the meetings in November and December 2017. At the March 2018 meeting, it was again agreed that the RLH team needed to complete the comprehensive Business Plan for the service, highlighting;

- Activity profiles for current and future years
- Cost analysis to accompany the trend in activity
- Manpower / Workforce implications

The plan should clearly describe the steps required to become a fully operational burn facility for adults and children from April 2019. The meeting noted that a peer review would be required at some point. The Quality Surveillance Team (QST) would be involved but they would need a number of burns professionals to contribute to the process.

The meeting briefly discussed access to IBID for the facilities in both Oxford and RLH Whitechapel.

##### **Action**

- ❖ ***PS will confirm that the IBID system has been made available by Manchester to both of the LSEBN facilities.***

#### 5 **TRIPS telemedicine**

As an issue brought forward from the December ODN meeting, the members discussed the TRIPS telemedicine system. The group discussed the benefits of a telemedicine system and noted that initial plans and funding to develop the TRIPS system (with a mobile App) were being investigated by the QVH team, with local discussions with SEC Ambulance and local fire chiefs.

The topic had been mentioned at the recent National Burns ODN Group meeting and it had been noted that whilst both the LSEBN and Midlands networks had developed a local telemedicine system, nothing was immediately available in the SWUK, and the Northern network's initial trial of the "stroke trolley" system had not been successfully rolled-out. However, it was noted that the Manchester IBID team was developing a mobile App telemedicine system. This was being trialled in a number of trauma and burns systems in the north and south west. Little is known about the Manchester system and it was agreed that more information was necessary before any decision about the QVH TRIPS system was reached. The following was agreed:

##### **Actions**

- ❖ ***The subject of telemedicine should be raised formally by the NBODNG at the earliest opportunity.***
- ❖ ***If supported by the other ODNs, an invitation should be extended to Ken Dunn, to attend the NBODNG and give a presentation / demonstration of the Manchester system.***
- ❖ ***PS will write to the NBODNG members proposing these actions.***

#### 6 **LSEBN Finance** 2017-2018 Budget Statement

PS presented a short briefing paper on the LSEBN budget for 2017-2018. The M11 position remains unchanged from that reported in December 2017; the ODN team is forecast to underspend by circa £36k at year-end.

## 7 National Burns ODN Group

PS presented the proposed Terms of Reference and draft national Work Programme for the NBODNG. It is proposed that the arrangements for the NBODNG are more formally presented to ODN members, and it is proposed that the national group is described “as *the nationally aligned clinical and management group for specialised burns ODNs*”. The NBODNG will have a formal annual work programme, consisting of nationally significant issues that require a national and consistent response across all burns ODNs. A copy of the draft work plan for 2018 has been circulated to the LSEBN ODN members. PS noted that the work plan format will also be used as a quarterly report to the NBODNG, monitoring progress with a “RAG” rated exception report.

### **Action:**

- ❖ ***It was unanimously agreed that the LSEBN ODN will endorse the Terms of Reference for the NBODNG and approval was given for the National Work Programme 2018-2019.***

PS also presented a short briefing report for the NBODNG MDS Project. It is proposed that the work undertaken in the LSEBN, developing a local minimum dataset and a series of service and network reports is adopted by each of the other burns ODNs. At the February NBODNG meeting, MW gave a short presentation on the work on the project and it was unanimously approved by the clinical and management leads. A briefing paper for the Northern, Midlands and SWUK ODN boards has been prepared, proposing that MW leads a national project to roll-out the LSEBN MDS across all other burns services in England and Wales. The National project will require additional time and will incur additional costs for the LSEBN. It is proposed that the Northern, Midlands and South West UK Burns ODNs contribute an equal share of the additional costs. The proposal has been approved by Mid Essex NHS Trust.

## 8 LSEBN Work Programme

### Q4 Updates for 2017-2018

A short briefing report was prepared for the meeting, setting out progress against the current network work programme. One issue of note was raised by LW. LW is experiencing some difficulty with attendance and engagement with the new burns facilities. It was agreed that a letter must be sent to clinical leads, emphasising the importance of all of the network professional groups.

### **Action**

- ❖ ***PS will write to the clinical leads for RLH Whitechapel and Oxford, asking for support for the network professional groups and for staff in the MDT to be given time to attend and participate in network activities.***

### Draft Work Programme for 2018-2019

The draft work plan for the new year was presented. With some amendments needed to the Psychosocial work plan, the draft network plan was approved. PS noted that in future, the quarterly reports will mirror the format used by the NBODNG, with a “RAG” rated exception report.

KS informed the meeting that she would be leaving her post as Network Lead Nurse at the end of May 2018. KS has accepted a new position with the Katie Piper Foundation. DB and PS thanked Krissie for all of her hard work, during her time with the ODN team, and wished her well for the future. KS will inform the network SNF and invite expressions of interest for the post.

## LSEBN Therapy Audit 2017-2018

RW reported on the network audit of standards for Physiotherapy and Occupational therapy in the management of burn injured adults and children (2017). This was a self-assessment process, with data collected by practising Occupational Therapists or Physiotherapists within each of the four principal burn services. Prior to the audit the target was set at 100% compliance, meaning that every patient received optimum treatment to the level set in the standards. The audit result shows an overall average percentage compliance with the standards for our network of 86.5 %.

The report indicates that there is a lot of excellent practice across the network and in certain core areas, services scored very highly. Consent and documentation of assessment findings were recorded in 99% of cases. The results show over 90% compliance with identification of problem lists and 97% compliance with clear treatment plans documented.

A second audit is planned for six months' time. This will allow more time for the new standards to bed-in, as they had only been introduced three months prior to the audit on this occasion. It will also allow time for the changes to practice and documentation to be instigated. It is therefore expected that services will show an improvement in the compliance, on completion of this work in early 2019.

### Items of business for information

#### 8 **National Burn Standards Review Group (BSRG)**

PS spoke briefly about progress with the standards review. The 4<sup>th</sup> meeting of the BSRG had taken place last week, with members receiving a first draft of the new document. It is planned that a second draft is circulated in advance of the BBA Annual conference in April. Whilst good progress is being made, there are one or two important issues that remain to be resolved, most notably the evidence (or otherwise) for increased volumes and improved outcomes. DB is leading this work on behalf of the BSRG but accessing data from the IBID system is proving difficult.

It was noted that the separate, CRG work-stream for the development of a Paediatric Burns specification is also progressing. It is not expected that there will be divergence between the two pieces of work. It was also noted that the paediatric review is also seeking an evidence base for a number of fundamental issues:

- *evidence that co-location of paediatric and adult burn services improves patient outcomes*
- *evidence that co-locating level 3 paediatric intensive care (meeting national PIC standards) with paediatric burn centre services results in improved patient outcomes and experience of care*
- *evidence that children with centre level burn injuries have improved outcomes when numbers admitted are above a certain activity level*
- *evidence that co-location of a paediatric burn centre and paediatric Major Trauma Centre improves patient outcomes*

### Date of next meeting(s)

PS will circulate the details and provide a calendar invitation for the next ODN meetings.

- ❖ Thursday 14th June 2018  
09.00-10.30 – ODN Main Group  
10.45-15.30 – LSEBN Network M&M Audit
- ❖ Monday 2<sup>nd</sup> July 2018 (9.00am) - National Mortality Audit

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