LSEBN ODN Board
Tuesday 9ᵗʰ January 2024

Attended:
David Barnes – St Andrews (Chair and Clinical Lead)
Joanne Lloyd – Network Advisor   Lisa Williams – Network Lead Psychosocial Care
Vicky Dudman – Network Lead Therapies   Nicole Lee – Network Lead Nurse
Alexandra Murray – Stoke Mandeville   Joanne Atkins – Chelsea & Westminster
Paul Drake – Queen Victoria Hospital   Gail Murray – NHSE East of England
Victoria Osborne-Smith – NHSE London   Konstantinos Tsormpatzidis – NHSE London
Kathy Brennan – NHSE London   Pete Saggers – ODN Manager

SHORT NOTES

1   Chair's introduction and apologies
Apologies from: Sara Atkins, Joanne Pope, Osian Powell

2   Notes of the previous meeting October 2023
The notes of the meeting in October were briefly discussed and approved. A number of issues are included on today's agenda.

3   Any matters arising

- Annual Report 2022-23
  PS noted that the report is almost completed, although the service report for C&W has not yet been received.

- Peer Review
  PS noted that a draft letter to Trust Chief Executives has been prepared, and shared with DB and the other service clinical leads. The letter explains the network's position with regard to the published Peer Review reports. The draft was approved at today's meeting and will be sent to the Trust CEOs.

- Clinical Audit – Resus fluids analysis
  PS explained that there was agreement to cease the general collection of resus fluid data, as part of the M&M audit process. JL noted that the data collection was essentially a survey of clinical service delivery for fluid resuscitation, and it was difficult to link levels of fluid to any clinical complications. There was recognition that collecting the data was problematic, particularly for resus undertaken before arrival at the burn service. Data collection will continue for mortality cases (network and national meetings) but only for the first 24 hours post-injury and only for cases that were actively treated. This action will be communicated to all specialised burn services, together with the revised templates for the national audit presentations.

- QVH Thresholds
  This issue will be included later in the meeting.

- Facial Burn Injury Leaflet
  NL spoke about work being undertaken by the Network Senior Nurse Forum. The Facial Burn leaflet has been revised and this needs sign-off today. NL is looking into the images used on the leaflet and there were a number of comments about the draft and these will be followed-up after the meeting. It is intended that the final version will be approved electronically, in the next couple of weeks.

4   Burn Service Update - Issues related to activity, performance and staffing

4.1   <u>Chelsea & Westminster</u>
- JAt spoke for C&W; ICU Bed activity fluctuating and occasionally very busy on the adult wards
- Staffing is ok at the moment, and managing junior docs industrial action well.
- NL noted that nurse staffing is good at the moment, with applications for posts coming in.

4.2   <u>St Andrews</u>
- DB spoke for StA's; Activity at ward level has been very busy for some time. The adult ward has a number of outlier patients in plastic surgery wards. It would be good to have support for repatriating patients to other services, at the earliest opportunity, and when the patient is well enough to transfer.

4.3   <u>Stoke Mandeville and Oxford</u>
- AM spoke for SMH; Staffing levels improving and best they have been for many years.
- Recruitment into psychology posts.
- Good patient fundraising; £20k available for equipment.
- Data capture remains an issue. A lot of records are on paper and getting data into IBID is a challenge. This causes the quarterly SSQD reports to look concerning, but it is related to data not submitted, rather than poor clinical performance.
- Access to psychiatry has been difficult but there is a proposal for shared agreement with the spinal injuries centre, and with the Trust Psychiatric Liaison team.
- Oxford IBID remains an issue outstanding. Patient data is currently being recorded in a "burns" section of the electronic patient record system, so hopefully, once a postholder is in place, retrieving the data should be relatively straight forward.

4.4   <u>Queen Victoria Hospital</u>
- PD spoke for QVH.
- A new burns manager has been appointed and this has improved senior nurse leadership.
- Activity remains steady and manageable.
- Issues related to ICU capability has improved with increased staffing and this means that the service has more flexibility to take patient's with burns larger than the 20% TBSA threshold discussed at previous meetings. This potentially returns the two ICU beds into the network ICU bed pool.
- A new CEO has been appointed, and PD spoke about a new Trust strategy, involving a new formal provider collaborative, with more formal arrangements for partnerships with surrounding NHS Trusts.
- PD confirmed that discussions related to closer working relationships with the major trauma centre have ended. Brighton will be one of the main partners in the provider collaborative.
- DB responded to say that the proposal is very positive and it would be good to have the formal agreement for the revised thresholds. As discussed previously, this needs to be signed-off by the Trust and commissioners.
- PS asked about engagement with the local regional commissioners and PD said that they aware of the proposal, but this is would be being dealt with at CEO/Med Director level.
- PD also confirmed that although there are plans to improve paediatrician involvement in burns, there are no plans to re-provide children's in-patient burn care.

4.5   <u>Other</u> issues:

PS raised the issue of service standards self-assessment. This had been discussed at the previous meeting, but no timetable was agreed for completion.

- ❖ **Action:**
  - *PS will re-circulate the s/sheet toolkit.*
  - *Services will review compliance and return the completed paperwork by Friday 8th March 2024.*

5   LSEBN Performance (Quarter 3 2023-2024)

PS introduced the standing performance and finance reports.

5.1   **Issues Log** / Network Risk Register
PS reported that the topic related to derogation for St Andrews and PICU has been removed from the register. This was agreed at the previous meetings. With regards to the outstanding issues, the following was noted:
- Burns facility in East London: DB reported that there had been some progress but no firm action for a full adult facility. St Andrews are looking to review all outreach services, including a nurse-led outreach service at Royal London Hospital. Progress will be reported at the next meeting. With likely progress with an outreach service from St Andrews, the establishment of a full *designated* burns facility at RLH is not being pursued. This topic can be removed from the Issues Log.
- Strategic Review. No progress but part of the network specification, so this issue can remain on the Log. The mention of QVH and Brighton can be removed.
- Network and Service self-assessment. This should remain for the time being, as the network is moving forwards with this on the work plan (see 4.5 above). Once the self-assessment is undertaken, these topics will need to be revisited and re-described, to account for actions necessary, following the self-assessment review.

5.2   **SSQD** Quality Dashboard
PS presented the Q2 SSQD report, representing the figures collected through IBID. The following was noted:
- Figures include a number of "zero records", suggesting that data has not been properly submitted to the system, or that the system is misinterpreting the data submitted. This is particularly noticeable for metrics resulting in a percentage figure.
- With regard to metrics that require audit follow-up, there was only one case recorded as an unexpected survivor (adult).
- The situation with data input at Stoke Mandeville was noted as a significant factor in the figures showing in the SSQD report.
- KB noted that it was important to distinguish between low % performance caused by poor data quality and "real" performance concerns.
- There is a new NHSE PowerBI dashboard available for commissioners that provides a view of the SSQD reports and KB screen-shared this with the meeting. PS asked if it is possible for services and the network to have access to the report and KB agreed to make enquiries with the national quality team.
- This issue led to a discussion about data management and the opportunities to create a network post, to coordinate a consistency for data submissions to IBID.

5.3   **Refusals** / Referrals turned away
The network report for patient refusals was presented. The case details are provided by each burn centre/unit and aggregated to this network report. The report analyses cases split by age-group, with details of the referring hospital and the alternative destination for the patient.

5.5   **Pathways DOS Sit-Rep** Bed Availability, OPEL Status and Occupancy
The network activity report was presented. The figures are drawn from the new National Commissioning Data Repository (NCDR) system and provides an overview of bed availability and occupancy, presented through the Pathways DOS system.

6   Network Team Budget Quarterly Report and Forecast Outturn
PS presented a report on the network budget and the estimated outturn for the year-end. It is expected that the team budget will underspend (non-recurring) by around £60k. The report asks the network to consider how this 2023-24 underspend will be utilised, either with a service improvement scheme (capital or revenue) or a simple "fair-share" between each of the services. The following issues were discussed:
- KT noted that it was a commissioner priority to ensure that the allocation for the burns network is utilised appropriately to service priorities.

- KT said that there was a meeting planned with ICB colleagues and this is expected to lead to agreement on a common approach for determining how networks move forwards with underspends at year end. This is likely to mean that monies can be carried forward, for agreed schemes or projects.
- It was concluded that there should be a special "network "finance" meeting to discuss how the £62k will be used, wither by allocation in this financial year, or by carry-forward to 2024-2025. This will be held on Tuesday 30th January 2024.
- This meeting should also look at the long-term staffing for the network team, including proposals for new posts, including the network data analyst.

❖ **Action:**
- ***PS will send a calendar invite for the finance meeting 30th January.***
- ***An agenda and papers will be circulated before the meeting.***

8   Network Manager and Organisational Governance
These issues were not discussed in detail. Some progress is expected at the "finance" meeting to be held at the end of the month, and an update provided at the next network board meeting.

7   TRIPS Tele-referral System
PD gave an update on the QVH-hosted TRIPS tele-referral system. PD noted the following:
- The QVH Trust have approved funding for a proposal to invest in a redesign of the TRIPS system, to ensure that there is a sustainable platform moving forward.
- This will be an improvement on the existing system and will be a cloud-based system, including access through a mobile phone application and integration with MS Teams.
- Contracts with the technical developer are being agreed and signed and the timescales expected to be around 6 months.
- NL asked about potential links into IBID or the hospital patient record and PD said that this was an important issue and it was a project priority for this level of integration.
- Progress will be reported at the next meeting.

Items of business for information

8   Commissioning Issues
Due to the late running of the meeting, no additional issues were raised.

Date of next Network Board meeting(s)

Confirmed dates

Wednesday 27th March 2024 *(In-person meetings – Hosted by St Andrews, Venue TBC)*
- *LSEBN Network Board 10:00 to 12.30*
- *LSEBN M&M Audit 13:00 to 16.30*