



**Minutes**  
**North West Surgery in Children ODN Oversight Group Meeting**  
**Friday 9<sup>th</sup> June 2023 10am – 12 noon via MS Teams**

<b>1.</b>	<p><b>Introductions and Apologies</b></p> <p>Joanna McBride, Network Director welcomed all to the meeting and thanked all for joining. Joanna added that the last meeting was held in December 2022, due to the requirement for the North West GIRFT Review meeting, which had replaced the scheduled March NW SiC ODN Oversight meeting.</p> <p>For attendance and apologies, please see appendix 1.</p>	<b>JM</b>
<b>2.</b>	<p><b>Review of previous minutes and actions – December 2022</b></p>  <p>Notes North West Surgery in Children</p> <p><b>Minutes agreed.</b></p> <p><b>Actions</b></p> <ol style="list-style-type: none"> <li>1. Paediatric Abdominal Pain Pathway link to be circulated with the minutes with a 2-week deadline for responses from when circulated. – Complete. Working Group have had an initial meeting, which Ian Clegg is leading on.</li> <li>2. GIRFT Surgical Deep Dive Review North West Surgery in Children ODN meeting. - Complete</li> </ol>	<b>JM</b>
<b>3.</b>	<p><b>Update from National and Regional Surgery in Children Meetings</b></p> <p><b>National Update</b></p>  <p>National and Regional Update.ppt:</p> <p>Su De, Co Clinical Lead, NW SiC ODN gave an overview of national news from the last couple of months, the headlines were:</p> <ul style="list-style-type: none"> <li>• The specialized surgery in children CRG is now active, Su De is Chair of the group. There is an ongoing work programme to develop new specifications and update existing specifications for provision of specialised surgery. One of the specifications being developed is the National ODN Service Specification, which will define the role of the ODN's, who they serve and where they fit within the new ICB structures and NHSE.</li> <li>• Su De informed the group that the gap between adults and CYP remains. The central team are launching the CYP Elective Recovery Campaign, which will run through June/July 2023.</li> </ul> <p>Please follow links below to register for campaign webinar and roundtables:</p> <ul style="list-style-type: none"> <li>○ <a href="#">Children and Young People's Elective Recovery National Campaign - Launch webinar   NHS England Events</a></li> <li>○ <a href="#">Children and Young People's Elective Recovery Roundtable Discussion - Dental   NHS England Events</a></li> </ul>	<b>SD/JM</b>

- [Children and Young People's Elective Recovery Roundtable Discussion - ENT | NHS England Events](#)
- [Children and Young People's Elective Recovery Roundtable Discussion - Evidence Based Interventions | NHS England Events](#)
- [Children and Young People's Elective Recovery Roundtable Discussion - Outpatients | NHS England Events](#)
- [Children and Young People's Elective Recovery Roundtable Discussion - Maximising theatre utilisation | NHS England Events](#)
- [Children and Young People's ER Roundtable Discussion - Waiting list validation and prioritisation | NHS England Events](#)
- [Children and Young People's Elective Recovery Roundtable Discussion - Data | NHS England Events](#)

NHS England have also produced a Children's and Young People's Elective Recovery Toolkit, which sets out actions that regions, systems and providers should take to accelerate children and young people (CYP) elective recovery and reduce the elective activity gap between CYP and adults, link below:

[NHS England » Children and young people's elective recovery toolkit](#)

### Regional Update

- **DMAS**

Joanna McBride started the regional updates by informing the group of DMAS (Digital Mutual Aid System) which was highlighted at the North West Elective Recovery Group meeting. The platform was introduced in April 2023, with an aim to offer meaningful choice at point of referral and at subsequent points in the pathway and use alternative providers for patients who have been waiting a long time.

- **North West Elective Recovery**

Su De informed the group that nationally, elective recovery was slow, however the North West's recovery was particularly poor in comparison to adults. It is hoped that the Children and Young People's Elective Recovery Toolkit will aid waiting list reductions and recovery.

- **Spaed-IT Tool**

The Spaed-IT tool is a paediatric indicator table, which provides information on key paediatric subspecialties, identifying capacity, demand, workforce, and theatre productivity. Providers can use as a tool to determine where improvements can be made, increasing efficiency.

- **CHART Prioritisation Tool**

The tool was designed by the Children's Health Alliance and presented nationally, with increased detail on P1 – P4 prioritisation for listing. It has been piloted in Newcastle but is yet to be rolled out fully. Its use is aimed at all providers of children's surgery. The purpose of the tool is to ensure that children who can't wait for reasons that effect their mental or physical wellbeing or development, do not have to wait as long and are re-prioritised.

- **ICB Elective Recovery Map**

The map showed that Lancs and South Cumbria have recovered brilliantly, at only 0.33% lower than in March 2019. Greater Manchester and Cheshire and Mersey have not made to same level of elective recovery; however, this may provide an opportunity for mutual aid across ICB's.

- **Inpatient and Outpatient Waiting lists Data**

Su De gave an overview of both inpatient and outpatient numbers for each subspecialty, highlighting that the main areas of concern remain, as follows: ENT, dentistry, paediatric surgery, urology, and oral surgery.

Inpatient - 15.97% waiting over 52 weeks.

Outpatient – 8.09 waiting over 52 weeks.

- **Clinically-Led Speciality Outpatient Guidance – GIRFT**

Su De informed the group of the new Clinically Led Speciality Outpatient Guidance, which outlines actions for providers, to tackle the escalating demand for outpatient

appointments. The guide covers different specialities, detailing how to validate outpatient waiting lists and improve outpatient efficiency. Link to guidance via QR code below.



Su De gave an example of a system used at Alder Hey Children's NHS FT to validate waiting lists. Letters are sent to patients and their families who have waited more than 12 months, giving 4 weeks to respond and confirm treatment is still required. If no contact was made, another letter would be sent giving another 4 weeks and if no response, the patient would be removed from the waiting list. Of the 200 letters that were sent only half responded to opt into treatment. Su added that this is a reasonable approach as many childhood conditions resolve, given enough time. There are other methods suggested in the GIRFT guide.

4.

#### ODN Update

##### GIRFT Deep Dive

Joanna McBride informed that group that the North West GIRFT Deep Dive meeting was held in March 2023, drawing attention to:

- The high population of the North West and highest admission rate for deliberate unintentional injuries
- Highest regional rates for child obesity & tooth decay in 5-year-olds
- 2<sup>nd</sup> highest infant mortality rates
- 3<sup>rd</sup> lowest performance – early years vaccinations

Joanna McBride added that both the high mortality rate and low uptake of vaccinations was likely linked to deprivation. The Deep Dive also identified that the NW elective recovery is 37% behind 2019 (Dec 2022 data).

Joanna McBride gave details of good practice from the region noted in the meeting:

- Second highest rates for excellent tonsillectomy
- Regional Adenotonsillectomy Pathway/ Best Practice Guidance
- Good examples of daycase at Blackpool (one day a week for paediatric surgery)
- The Walk In Walk Out model from GM
- Strong neonatal service
- Low length of stay for fractured neck of femur

The full report is available on the [FurureNHS](#) platform



GIRFT Deep  
Dive.pptx

##### Workplan (Quarter 4)

Joanna McBride shared the ODN Workplan (Quarter 4), giving detail on incomplete strands. Joanna McBride clarified that ODN workforce limitations, vacancies and sickness had been a contributor to these incomplete strands. The ODN have recently recruited a new Lead Nurse for Surgery in Children, who will commence in post soon, supporting workplan progress. The top risks and key objectives were also shared, which can be seen on the document below. Sudipta Banerjee, Lancashire Teaching Hospital raised a query regarding support from the ODN to fund critical care beds. Joanna McBride clarified that the Service Development Monies was provided for paediatric critical care, noting the link between surgery and critical care. The vision of standalone L2 centres would benefit the tertiary centres in reducing overload and maintaining competence and confidence in the non-tertiary centres. Nationally monies have been allocated to each region. NHSE North West working closely with the ODN working on models to determine where those L2

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centres will be. Andrea Doherty, Specialised Commissioning (NHSE), added, work is underway to investigate where pilot sites will be located in Lancashire & South Cumbria, as well as completion of self-assessment quality standards documentation for critical care. Andrea informed the group that she is working with the ODN, Vicky Webster and Vanessa Wilson from the ICB, to develop a paper for presentation to the SLT by the 26<sup>th</sup> June 2023, approving work to go ahead. Joanna McBride also noted that the Service Specification for L1 & L2 Critical Care, is in draft and has been circulated for review/comment and are awaiting the finite paper.



Workpla, Risks &  
Key Objectives.pptx

### **ODN Website**

Joanna McBride gave a brief overview of the new North West PCC SiC LTV ODN website, which has lots of information available on the 3 arms of the ODN. The feedback has been positive so far but welcomed further feedback and suggestions of useful content.



PCC, SiC, LTV, ODN  
Website.pptx

The North West Children's ODN Hub can be accessed [here](#).

### **North West Guideline Ratification Process**

Joanna McBride informed the group that the ODN had developed a ratification process, working from a regional perspective. The ODN will aim to update and review guidelines, when necessary, in line with national and local policy, with stakeholder involvement. Guidelines will then be shared for sign off at the relevant oversight meetings. Joanna added that the VTE Draft Guideline was circulated with the agenda for today's meeting for review and comment.



Guidelines  
Presentation.pptx

## **5. NHSE Case for Change Update – Specialised Commissioning**

Andrea Doherty informed the group that the Women's and Children's Case for Change had been developed with the relevant ODN's, covering Surgery in Children, Paediatric Critical Care, Neonates and CYP Cancer. There had been 2 reviews by the Northern England Clinical Senate, where no red or amber flags were raised. The Case for Change went to Gateway 1 of NHSE's Assurance Framework in April, who agreed it, with no risks raised. Although the formal report is not yet complete, the Gateway Office have given instruction to start preparation for Gateway 2, with the aim to reach this stage by the end of this financial year. There will be continuation of the work already started by the ODN's, developing several focus groups, to include 1 for Surgery in Children, 1 for Paediatric Critical Care, 1 for CYP Cancer and 3 for Neonates. There will also be a Patients Reference Group and a patient microsite, which will link into the ODN's websites, to provide information on transformation, focus groups, questionnaires for completion and an invitation to contact and provide feedback on patient experience for those who do not want to complete a questionnaire or join a focus group.

There is also an Equality Impact Assessment in progress, looking at how patient experience is gained and ensuring that legal framework is met. Andrea added that the Specialised Commissioning team, although small, are always happy to be contacted for information and queries, [andrea.doherty@nhs.net](mailto:andrea.doherty@nhs.net)

<p>6.</p>	<p><b>Updates from Region - Activity, Recovery and Exception Reporting</b> <b>L&amp;SC</b></p> <ul style="list-style-type: none"> <li>- <b>Lancashire Teaching Hospital</b> Sudipta Banerjee updated that Chorley had now completed their first paediatric surgery list, the first in 15 – 20 years, with a formal start date of the 29<sup>th</sup> June 2023. This will be based on the Blackpool model of 2 ENT lists, special case dentistry, plastics and orthopaedics and will run twice a month. Sunday ENT lists have been running since January 2023 and Saturday paediatric lists have continued also, which has reduced the tonsil pathway from 140 weeks to 60 weeks, the plan is to continue the Sunday lists until the end of the year. These extra lists are being funded by the Trust as paid overtime. Outpatient lists for ENT are currently a 3 – 4 month wait, however our outpatient to theatre time remains an issue. Su De commented regarding the impact on PICU due to low numbers of patients being seen for follow up appointments, as the emphasis had been firmly on new referrals. Su also noted that there is a definite difference in Trusts in L&amp;SC, who seem to be more willing to pay their clinicians to cover extra lists. Adam Hebden suggested the ODN carryout a mapping exercise to highlight where additional lists are being run and funded by Trusts to draw attention to the resulting low waiting lists in these areas. Joanna McBride agreed that this should be noted as an action to be taken forward.</li> </ul> <p>Sudipta raised the adenotonsillectomy pathway, stating that here had been 1 referral that met criteria from Morecambe Bay and 6 in one week from patients in the GM region, which had been rejected to DGH's, as did not fall within the L&amp;SC footprint. Joanna McBride and Su De both agreed that the process should be discussed with the ICB leads.</p> <p><b>Blackpool Teaching Hospital</b> Ileana Anderco updated that Blackpool are currently running a paediatric list 1 day a week and highlighted the low numbers of post tonsillectomy bleeding. Waiting lists are at 4 – 6 months. Some Saturday lists for paediatrics are taking place but not every week.</p> <p><b>C&amp;M</b> <b>Warrington and Halton Teaching Hospital</b> Andrea Davies informed the group that in Warrington, the waiting list was down to 8 weeks.</p> <p><b>GM</b> Adam Hebden informed that group of the GM CYP Elective Recovery Summit, which will be held on 14<sup>th</sup> July 2023. The agenda will be created working with GIRFT, the ODN and NHS Improvements. There will be representatives from all Trusts in Greater Manchester and will involve showcasing best practise, discussion groups (using the CYP recovery toolkit), identifying areas for improvement. Funding has been secured for 1 PA Clinical Lead time in the top 5 areas, with the longest waits, also secured is funding for a PMO for data and project support. Adam extended the invite to the group. Anyone interested in attending can contact Adam directly and the invite could be shared.</p>	<p>All</p>
<p>7.</p>	<p><b>Any other Business</b></p> <p><b>VTE Guidance</b> Joanna McBride informed the group that the guidance had been developed by NWTS. The ODN had reviewed and commented, following this the guidance was circulated with the agenda for this meeting. Joanna McBride confirmed that no comments had been received, therefore the guidance would be signed off as complete.</p> <p><b>ToR</b> Joanna McBride confirmed that the Terms of Reference had been reviewed. The governance structure for the different workstreams, which will change as the ODN develops. These will also now be signed off as complete.</p>	

	<p><b>Outpatient Waiting Times</b></p> <p>Sudipta Banerjee informed the group that around 40% of clinics can be patients with reoccurring acute otitis media, although evidence shows that treatment is medical rather than surgical. These patients could therefore be managed with advice rather than in clinic. Sudipta added that she had approached the ICB regarding a standard advice letter to these patients, the ICB had responded positively. Sudipta suggested that a draft pathway be developed for this to mitigate risk and asked if this is something that could be managed by the ODN. Su De commented that this is in line with the GIRFT guidance, to provide primary care with information, reducing the number of inappropriate referrals or identify at the point of referral receipt, patients who do not need to be seen in clinic. Su added that she would be interested in forming a small working group to develop a regional pathway.</p> <p><b>Comments from Meeting Chat</b></p> <p>Phil Nee, Whiston Hospital, commented that they are running clinics 7 days a week, as there is pressure to reduce adult waiting times significantly. The paediatric list however is not as long, therefore any potential extra capacity is being given to adults. As theatre staff are doing so much extra already it is very difficult to find staff willing to do more to facilitate any extra paediatric lists.</p> <p>Natalie Garforth, Wigan Hospital, commented to offer additional capacity for paediatric inhalation sedation lists (maxfax), adding that anyone interested can contact her directly and funding arrangements can be investigated. <a href="mailto:natalie.garforth@wwl.nhs.uk">natalie.garforth@wwl.nhs.uk</a></p> <p>Annette Cooper, Wirral University Teaching Hospital, updated that it now looks likely that surgery will continue throughout the building work taking place at Wirral. Annette also added that there are discussions taking place around increasing dental capacity by making changes to the paediatric elective surgery process.</p>	
8.	<p><b>Actions</b></p> <p>1. The ODN to carry out regional mapping of additional/weekend lists, to highlight the results on waiting lists – Joanna McBride/ODN</p>	
9.	<p><b>Date of Next Meeting</b></p> <p>8<sup>th</sup> September 2023</p>	

## APPENDIX 1

### Attendees

#### Network

Joanna McBride, Network Director, NW PCC SiC LTV ODN  
Su De, Co Clinical Lead, NW Surgery in Children ODN  
Jo Birkmyre Project Support Officer NW Paediatric Networks

#### Alder Hey Children's NHS FT

Abby Prendergast, Associate Director of Strategy and Partnerships, Alder Hey Children's NHS FT

#### Royal Manchester Children's Hospital

Adam Hebden, Associate Director of Strategy, Royal Manchester Children's Hospital  
Nicola Dempsey, General Manager – Surgery, Royal Manchester Children's Hospital

### Cheshire and Mersey

Andrea Davies, Deputy Ward Manager/Team Leader, Warrington & Halton Teaching Hospital  
Debra Adams, Deputy Divisional Director, Mid Cheshire Hospitals NHS FT (deputising)  
Melanie Fry, Matron Paeds and Neonates, Mid Cheshire Hospitals NHS FT  
Annette Cooper, Consultant Anaesthetist/Paediatric Lead, Wirral University Teaching Hospital NHS FT

### Lancs & South Cumbria

Stephanie Holmes, Practice Development Sister, Blackpool Teaching Hospital NHS Trust  
Ileana Anderco, ENT Consultant, Blackpool Teaching Hospital NHS Trust  
Angela Mason, Clinical Lead, Blackpool Teaching Hospital NHS Trust  
Isabel Spencer, Child Health Matron, Blackpool Teaching Hospital NHS Trust  
Mark Children, Consultant Anaesthetist, Blackpool Teaching Hospital NHS Trust  
Lorraine Sanderson, Paediatric Ambulatory Care Sister, Blackpool Teaching Hospital NHS Trust  
Laura Norton, Matron, Morecambe Bay NHS FT  
Paul Hans, Blackpool Teaching Hospital NHS Trust  
Sudipta Banerjee, ENT Surgeon, Lancashire Teaching Hospital

### Greater Manchester

Sarah Ashworth - Paediatric Ambulatory Care Manager, Royal Oldham Hospital, NCA Trust  
Ricky Barber - Ward Manager, Royal Oldham Hospital, NCA Trust  
Ann Carey, Matron Child Health, Wrightington, Wigan and Leigh NHS FT  
Natalie Garforth, Deputy Directorate Manager, Wrightington, Wigan and Leigh NHS FT  
Paula Garlick, Paediatric Matron, Tameside Hospital  
Phil Nee, Stockport Foundation Trust  
Nnamdi Okolie, Directorate Manager, General Surgery, Stockport NHS FT  
Matthew Boken, Clinical Practice Lead anaesthetics, Stockport Foundation Trust

### NHS England/Commissioning/Other

Andrea Doherty, Head of W & C Transformation, NHSE North West Specialised Commissioning  
Mandy Foster, Senior Implementation Manager, GIRFT National Team  
Donna Dodd, GIRFT Implementation Manager, C&M GIRFT

### **Apologies:**

Helen Blakesley, Network Manager, NW PCC SiC LTV MT ODN  
Cath Doherty, Co Clinical Lead, NW Surgery in Children ODN  
Ian Clegg, Co Clinical Lead, NW Surgery in Children ODN  
Lucy Allton, Lead Nurse, NW PCC/SiC ODN  
Phil Rigby, Specialised Commissioning, NHSE  
Mike Marsden, Surgeon, Stockport NHS FT