#### <u>North West & North Wales Paediatric Critical Care Operational Delivery Network:</u> <u>Nursing and AHP Sub-Group</u> <u>Meeting 10<sup>th</sup> October 2023 11am – 1pm via Teams</u>

#### Attendees

| Nicola Longden (NWTS/Co-Chair) | Sophie McNeilly (Blackburn)    |
|--------------------------------|--------------------------------|
| Lucy Alton (PCC ODN/ Co-Chair) | Sarah Salka (Ormskirk)         |
| Mica Davey (NWTS/Co-Chair)     | Sarah Ashworth (Oldham)        |
| Sophie Graves (NWTS)           | Michael Sheffield (Warrington) |
| Megan Gillick (Blackpool)      | Karla Swarbrick (Blackpool)    |
| Isabelle Cliffe (Warrington)   | Rhea Taylor (Wythenshawe)      |
| Naomi Harrison (NMGH)          | Vanessa Cook (Oldham)          |
| Leonie Hardman (Warrington)    | Nicola Silem (Ormskirk)        |
| Nicola Howard (Blackpool)      | Hannah (Fairfield)             |
| Angharad Pickle (Glan Clwyd)   | Emily Coup (Stepping Hill)     |
| Helen Gray (Whiston)           | Carrie Bowen (Wrexham)         |
| Katie Ceraldi (Blackburn)      |                                |

## Apologies:

- 1. Welcome (NL)
- 2. Introductions & Apologies (NL)

Apologies: Dianne Cook (NMGH), John Horley (Wigan), Frances Campion (SiC), Janice Fauset-Jones (LTV) Katie Higgins (NWTS)

3. Minutes shared from last meeting (NL)

Brain tumours oncology – LA fed back to cancer in children network. Aware of increased number in Leighton. Surgical network made aware of increase in post tonsillectomy bleeds. If anyone has further detail on tonsillectomy bleeds please let Lucy know and she will pass on.

NL shared conference information – successful day was had.

4. Update from the region

## 4a. Network – (LA)

| Update   | Actions |
|--|---------|
| Newly appointed staff now in post. Anna Parry network    |         |
| educator for PCC, SiC and LTV. Will be in touch with all |         |
| regional educators for training needs analysis.          |         |
| Appointed new lead nurse (part time) for SiC – Fran      |         |
| Campion. Lucy now lead nurse solely for PCC.             |         |

| New lead nurse for LTV – Janice replacing Elaine O'Brien.   |
|---|
| Hopefully will attend future meetings to introduce          |
| themselves when able.                                       |
| Ongoing audit work to be discussed.                         |
| Guideline ratification process now agreed. All guidelines   |
| awaiting ratification will begin the new process now. Will  |
| be out for comment soon and then out for region.            |
| Self assessment process ongoing. Hopefully finished by      |
| middle of next year.  |
| National call update – measles and concern this may be an   |
| issue in areas of low immunity. Outbreaks may be            |
| expected in London and some areas of North West. Will be    |
| resources available soon – Lucy will share when online.     |
| RSV numbers increasing across region.                       |
| Report of increase in national mortality in children across |
| all deaths but especially pre term, SUDIC, trauma.          |
| Tripling of type 2 diabetes incidence, increase of type 1   |
| diabetes in children.                                       |

# 4b. Update from NWTS – (NL)

| Update   | Actions |
|--|---------|
| Second team year round now. Moving lots of level 1 and 2       |         |
| patients for uplift of care to tertiary centres. Lots of       |         |
| difficult airways recently. 3 x patient with Pierre Robin in 1 |         |
| week.  |         |
| Stoke have seen 2 cases of meningococcal sepsis in last        |         |
| week (report from NWTS/Stoke consultant).                      |         |
| Hoping for third team in winter Monday Wednesday and           |         |
| Friday used for level 1/2/3 transfers and potentially back     |         |
| transfers of children and infants on high flow back to         |         |
| regional hospitals.  |         |
| Grand rounds continue - look out for invitations to teams      |         |
| meetings   |         |
| Book outreach for 2024 for your hospital – anaesthetic         |         |
| audit days work well usually.                                  |         |

# 4c. Update from Greater Manchester region (DGH perspective)

| Hospital / Name / Department / Update | Actions |
|---------------------------------------|---------|
| Bolton                                |         |
| Ward– No update provided              |         |

| A&E- No attendance   |                           |
|--|---------------------------|
| North Manchester   |                           |
| Ward- No update provided   |                           |
| ED – Naomi Harrison  |                           |
| Ramped up in ED – much busier now. Seeing 100-120 per                    |                           |
| day. A few poorly children requiring NWTS transfers.                     |                           |
| Seeing some complex presentations including difficult                    |                           |
| resuscitations. Seeing lots of CAMHS patients also.                      |                           |
| Oldham   |                           |
| Ward – Sarah Ashworth  |                           |
| No HDU patients at present. Quick step down of the                       |                           |
| patients that do need HDU care. Nothing specific to report.              |                           |
| ED – Vanessa Cook  |                           |
| Nothing specific to report   |                           |
| Salford  |                           |
| Panda- No update provided  |                           |
| Stepping Hill  |                           |
| Ward – Emily Coup  | Discuss with network      |
| Started getting busier. Complex adolescent case needing                  | educational opportunities |
| CPAP with AICU involvement and palliative care discussions               | for the future.           |
| with family. Impacting nursing staff – debrief being                     |                           |
| arranged. Lots of viral wheezy patients requiring                        |                           |
| aminophylline. 12 new starters – training for winter.                    |                           |
| ED- No update provided   |                           |
| Tameside   |                           |
| Ward- No update provided   |                           |
| ED- No update provided   |                           |
| Wigan  |                           |
| Ward – No update provided  |                           |
| ED- No update provided   |                           |
| Wythenshawe  |                           |
| Ward-  |                           |
| ED – Rhea Taylor   |                           |
| Busy last month or so, up 40% on same period last year.                  |                           |
| Lots of poorly children with gastro/D&V. Lots of newborns                |                           |
| in ED presenting 1 <sup>st</sup> week of life for reassurance. O&A fills |                           |
| quickly so ED getting full quickly.                                      |                           |
| Fairfield – Hannah   | LA will have conversation |
| Pathway issues with commissioned beds causing delays                     | regarding pathways and    |
| and sometimes multiple transfers between hospitals to                    | commissioned beds.        |
| stay within trust to see paediatrician. Lots of CAMHS                    |                           |

| patients who don't need seeing by paediatrician so can go | LA to discuss option to use |
|---|-----------------------------|
| out of trust for bed. Unable to use non-critical care     | non critical care ambulance |
| ambulance – not commissioned.                             | NL – advised used STOPP     |
|   | tool to assist in decision  |
|   | making                      |

| Hospital / Name / Department / Update                          | Actions                  |
|--|--------------------------|
| Arrowe Park  |                          |
| Ward- No update provided                                       |                          |
| ED- No update provided   |                          |
| Chester  |                          |
| Ward- No update provided                                       |                          |
| ED- No update provided   |                          |
| Leighton   |                          |
| Ward – No update provided                                      |                          |
| ED- No update provided   |                          |
| Ormskirk   | NL – recordings from     |
| Ward and ED Sarah Salka  | outreach will be online  |
| Up to 150 attendances this week in ED. Ward and assessment     | by the end of the year.  |
| unit both full and busy. Work started on escalation room –     | Can book outreach from   |
| turned into a waiting room for assessment unit ?staffed by     | April 2024.              |
| HCA but can evolve. Help with overflow in adult ED waiting     |                          |
| room. Not routinely swabbing patients for COVID. Apologies     |                          |
| for no outreach – will try and rearrange for early next year.  |                          |
| Macclesfield   |                          |
| Ward - No update provided                                      |                          |
| ED- No update provided   |                          |
| Warrington   |                          |
| Ward – Leonie Hardman  | LA and IC to liaise with |
| Busy, acuity getting higher. More patients needing high flow   | contact details for 2    |
| and CPAP. Lots of wheezy patients also. Lots of staff sickness | Wish to invite them to   |
| (COVID and longer term) impacting shifts.                      | oversight meeting and    |
| ED- Isabelle Cliffe  | spread the word.         |
| Busy – acuity more than numbers. Lots of new and known         |                          |
| wheezy patients needing high acuity management, mainly 1-3     |                          |
| years old. CAMHS 24/7 service now which has helped             |                          |
| discharge patients overnight instead of admitting. Quite a few |                          |
| SUDIC patients and a teenage death (ligature). Hard on the     |                          |
| staff. Management supporting staff well – accessing            |                          |
| counselling for staff using 2 wish charity.                    |                          |

#### 4d. Update from Cheshire & Mersey (DGH perspective)

| Whiston   |                          |
|---|--------------------------|
| ED – Helen Gray   | All – speak to Infection |
| Attendance and acuity busier. Losing 4 cubicles from one      | Control leads at         |
| ward, opening 4 bay beds on another. Wondering is everyone    | individual hospitals     |
| cohorting patients in bays? SS - yes. Swabbing all patients – | regarding cohorting      |
| most have COVID or RSV. Long waits in adult ED and for beds,  | patients.                |
| impacting paeds ED causing 9 hour wait for a child to have    |                          |
| medical review recently.                                      |                          |
| Ward – No update provided                                     |                          |

| Hospital / Name / Department / Update                         | Actions |
|---|---------|
| Barrow-In-Furness   |         |
| Ward – No update provided                                     |         |
| ED- No update provided  |         |
| Blackburn   |         |
| Ward and ED – Sophie McNeilly                                 |         |
| Last week seeing lots of HDU patients needing high flow       |         |
| and CPAP, also seeing septic sick patients.                   |         |
| 11 deaths in resus last 2 weeks, mix of causes. Tough in      |         |
| resus. Staff sickness COVID and stress impacting shifts.      |         |
| Staff great at supporting each other but counselling is       |         |
| available.  |         |
| Blackpool   |         |
| Ward- Karla and Emily   |         |
| Busy couple of months. Seeing RSV increase needing high       |         |
| flow. Some patients with NAI – poorly. Lots of complex        |         |
| patients. Some patients with tracheostomies transferred       |         |
| by NWTS high flow and invasive ventilation. AICU helped       |         |
| with patient with overdose. A teenage death (ligature)        |         |
| Struggling with bed availability – treat and transfer to      |         |
| other hospitals in ICS. Staffing – new starters soon. Lots of |         |
| wheezy patients also.   |         |
| ED- No update received  |         |
| Lancaster   |         |
| Ward – No update provided                                     |         |
| ED- No update provided  |         |
| Preston   |         |
| Ward – No update provided                                     |         |
| ED- No update provided  |         |

#### 4e. Update from Lancashire and South Cumbria (DGH perspective)

#### 4f. Update from North Wales (DGH perspective)

| Hospital / Name / Department / Update                      | Actions                      |
|--|------------------------------|
| Bangor   |                              |
| Ward- No update provided                                   |                              |
| ED- No update provided                                     |                              |
| Glan Clwyd   |                              |
| Ward and ED- Angharad Pickles                              | SS – send dates of safe      |
| Assessment unit busy. Current Paeds ED (unfunded)          | holding course to AP.        |
| relocating to PAE next week so assessment expecting to be  |                              |
| busier. PRUDIC 14 year old in ED. Complex CAMHS violence   |                              |
| and aggression causing some problems.                      |                              |
| Wrexham  |                              |
| Ward- Carrie Bowen   | AD/NL – ring NWTS for any    |
| Very busy but periods of having no patients at all. Within | of these transfers that you  |
| 48 hours had 22 patients in. Full every day last week but  | can't achieve locally – we   |
| steadier this week. Some issues with transferring patients | have funding for L1&2        |
| with no available ambulances for up to 18 hours. 1 case    | patient transfers now so we  |
| assessed using STOPP tool -not quite at threshold for      | can assess need for transfer |
| critical care transfer. LA queried escalation of the       | especially when scoring      |
| ambulances – cases go to "Make it Safe" meetings.          | highly on STOPP tool. Also   |
| Ambulances stuck with crews in ED.                         | consider ringing EMRTS for   |
| Direct streaming to ward overnight to help with flow.      | helicopter transfer.         |
| ED- no attendance  |                              |

## 5. PCCN network educator and plans for regional educators

Anna introduced herself to the team. Background 17 years PICU. First educator in network so big job at hand. Trying to ensure everyone receives same level of educational support. Will aim to do some online training eventually. Questionnaire to go to regional educators. If you are an educator, please let Anna know and she will send it to you. Anna will be involved in HDU days jointly with NWTS and ODN next year – hoping for bigger and better things in 2024.

Plan to employ 3 x band 6 educators for network regionally based in each ICS in England. North Wales funding different but will still be involved. Awaiting sign off before advert goes live. Visits across region to be scheduled.

#### 6. Nomination of deputy chairs X4 = one for each region.

Meetings will continue to be co-chaired by Nicola and Mica from NWTS and Lucy from ODN – no objections to this. Dianne and Ali have stepped down as deputies. Nominations of deputy chairs are Emily Coup (Stepping Hill) for Greater Manchester, Gina Haddock

(Warrington) for Cheshire and Mersey, Carrie Bowen (Wrexham) and Angharad Pickles (YCG) to nominate for North Wales and nomination needed for Lancs and South Cumbria. Please send expressions of interest to Nicola, Mica and Lucy.

Sub meetings to be arranged between Chairs and Deputy Chairs to ensure adequate representation.

## 7. Terms of reference

Lucy will continue to look at these and will share these once deputy chairs have been appointed.

## 8. PCC L1 & L2 data audit (LA)

Presentation on activity audit. Been running in Yorkshire and Humber since 2015. North East also complete it. Planning to start for North West and North Wales. Currently get data from NW sit reps and report in pressure gauge tool. Audit will show this data against PCCMDS interventions to clearly show L1 and L2 activity in region outside of PICU – what activity and where. Also demonstrates bed days.

Audit tool demonstrated and how to complete discussed. Completed as paper copy in Yorkshire and Humber. To be discussed how to be completed in region online/paper. ODN will collate data and send out site reports at the end of the reporting period. This should allow us to direct education in the relevant direction e.g. lots of children with arterial lines, Anna can arrange arterial line training sessions.

Want to make it as easy as possible for people to complete to get the most data possible. Will be looking for volunteers to help with roll out.

## 9. Education Section -Emily Coup – Stepping Hill.

Powerpoint will be sent with the minutes.

Discussing successful introduction of HDU course at Stepping Hill. Running 5 x study days between 7 and 9 staff per day. Emily is happy to come and facilitate sessions at other hospitals too.

Discussion application for AICU nurses using an abridged version.

## 10. Education update -APLS Seventh edition – (NL)

Nicola presented a quick update on the shock algorithm changes in latest APLS manual.

# 11. Future Meeting date & Education Plans

Dates for 2024: Wednesday 17th January (Virtual only) Thursday 18<sup>th</sup> April (Virtual only) Wednesday 17<sup>th</sup> July (Face to face only at Engine Rooms Warrington 10am – 4pm. Sub group meeting followed by lunch and an afternoon of education and networking for sub group members – save the date and book study leave now! The event will be free for sub group members as a thank you for your hard work and commitment to the group.) **Thursday 17<sup>th</sup> October** (Virtual only)

## 12. AOB

- TRIM training and counselling discussed in relation to difficult shifts and ways to support staff. SS mentioned CPI training – similar to TRIM so not necessary to do both. Funding from ODN for TRIM training can be used for CPI training – just let LA know.
- 2. L1 and L2 passport webinar has been recorded and will be available soon (SS)
- Instead of education segment in January's meeting we will discuss education planning for 2024. Initial plan to have an Introduction to Critical Care and an Advanced Critical Care study day and also a speciality study day – topic TBC. Suggestions welcome for any education aspects – let us know what your teams want to see.