

Minutes of Lead Nurses Group

**Wednesday 09 December 2020
10.00am – 12.30pm**

Via Microsoft Teams

Present:

Linda Hunn (LH), Director/Lead Nurse, EMNODN (Chair)
 Judith Foxon (JF), Deputy Lead Nurse, EMNODN
 Zara Doubleday (ZD), Service Improvement Lead (FiCare) EMNODN
 Lorraine Collins (LC), Ward Manager, King’s Mill Hospital, Mansfield
 Caroline Nyawira (CN), Matron, Kettering General Hospital
 Susan Chisela (SC), Practice Development Nurse, Kettering General Hospital
 Carol Chapman (CW), Ward Manager, Pilgrim Hospital, Boston
 Carol Walker (CWA), Practice Development Nurse, University Hospitals of Leicester
 Claire Inglis (CI), Outreach Lead, University Hospitals of Leicester
 Sophie Stephenson (SS), Transport Educator, CenTre Neonatal Transport
 Lucy Panesar (LP), Lead Nurse for Neonatal Family Care and Homecare, Nottingham University Hospitals
 Karen Sampson (KS), Ward Manager, Derby Royal Hospital, University Hospitals of Derby
 Claire Gartland (CG), Neonatal Lead, Maternity Transformation, Better Births Lincolnshire
 Michelle Hardwick (MH), Ward Manager, Northampton General Hospital

In Attendance:

Linsay Hill (LSH), Office Manager, EMNODN (Minutes)

	Subject	Attachment	Action
1.	Apologies for Absence Margaret Pratt, Rachel Barker, Rachel Wright		
2.	Declarations of Interest None.		
3.	Minutes from the Previous Meeting The minutes from the previous meeting were accepted as an accurate record.	A	
4.	Matters Arising 4.1 Virtual Tours/Slide Shows Some photos remain outstanding and some need updating due to staff changes. LSH will email each of the Lead Nurses with further details.		LSH

	<p>4.2 TNA Spreadsheet Thanks were extended to those educators who returned their information. TNA is now completed and JF will circulate with minutes of the meeting. This will be included in a paper for HEEM so they are aware how much money is required for QIS training.</p>		
<p>5.</p>	<p>COVID-19 Issues 5.1 Parent Access LH asked for an update on parent access;</p> <p>KGH 24 hr access</p> <p>UHL 24 hr access</p> <p>QHB 24 hr access but on a rota system due to limited space. There have been no issues and the system seems to be working well</p> <p>RDH 24 hr access</p> <p>Centre Still not allowing parents to travel in ambulances unless for palliative care transfers, in which case, taking parents is considered on case by case basis.</p> <p>ULHT 24 hr access</p> <p>NUH 24 hr access</p> <p>5.2 Guidance Version 5 of the regional COVID-19 guidance is being finalised and will be circulated when available.</p>		
<p>6.</p>	<p>Nursing Issues 6.1 Nurse Staffing Audit A copy of the nurse staffing audit was circulated and discussed.</p> <p>CW reported that UHL have been experiencing nurse staffing shortages due to absence and those on maternity leave, who have been going off earlier than usual due to COVID advice.</p> <p>6.2 Nurse Staffing Tool Update Work has been ongoing to update the Dinning tool, a simplified version has been devised which all have seen. It was presented to the CRG in November who have identified an approval route it needs to go through.</p>		

	<p>Any staffing returns for CNST or GIRFT to use the Dinning tool for the time being.</p> <p>6.3 Recruitment Days/Video Recordings Discussed at previous meeting. Due to COVID19 and the move to utilise more online resources and video conferencing, the Network team felt it would be a good idea to put together a recruitment video which features different staff, who work within neonates to talk about and promote the service. Volunteers to take part have been requested. This has not progressed as quickly as we'd have liked however, it is still on the agenda and in the new year JF will be contacting volunteers to progress this.</p>		<p>ALL</p> <p>JF</p>
<p>7.</p>	<p>Projects 7.1 Outreach Specialised commissioning put in a bid for money to purchase Billi blankets to use in the community. Birmingham NCOT deliver home phototherapy and the Commissioners felt it should be rolled out across the Midlands region.</p> <p>CI has calculated the number required for the South Hub units, following the Birmingham model, and JF has done the calculations for the North Hub units. Money will come out to local Trusts for purchase of the equipment</p> <p>The Network have identified a number of issues; we do not currently offer this service across the EM, the funding does not cover staffing costs, and there would need to be a 7 day service to monitor SBR's. These issues have been discussed with the commissioners.</p> <p>NUH are not in a position to offer this now or in the near future. CI thought it would be sensible to run this out of the Lead Centres in the first instance.</p> <p>More discussions are required outside of this meeting between LH, JF, CI and LP. LP suggested it be sensible to have clinical representation at these meetings.</p> <p>CI reported a handful of cases in the South where babies in outreach had been readmitted to hospital with community acquired COVID-19. Both were ventilated but are now both well and been discharged home.</p> <p>LP reported that the North Outreach service is short staffed currently but coping due to only having a small number of babies. A tiered system has been in place for a month now and is working well.</p>		
<p>8.</p>	<p>Education & Practice Development Update 8.1 QIS Training Future student numbers have been identified at the Education Group. A couple of Trusts have reported issues with the</p>		

	<p>Sheffield course and problems with lack of teaching for the modules. JF will escalate to HEEM and will feedback.</p> <p>Any issues with the QIS providers in future which can't be resolved by contacting lecturers, please ensure that the Network team are informed who can in turn escalate them to HEEM if required.</p> <p>SR reported a student who has deferred because her experience with the Sheffield course has put her off.</p> <p>CWa reported that Leicester are happy to accommodate Level 3 placements. If placements are required, it is suggested that CW is contacted in the first instance.</p> <p>BL also mentioned ANNP course issues in Sheffield.</p> <p>8.2 HEE Foundation Programme Development Money awarded pre COVID-19 to be spent on developing a Network foundation program. The Network have appointed an Education Project Lead for a year, Susan Chisela, who started with the Network in November 2020.</p> <p>SC has been in touch with the PDN/Educators in each unit, a Network survey and a National survey have been devised, sent out and completed. SC reported good engagement and lots of work is underway to develop the course.</p> <p>8.3 Car Seat Audit Car seat audits have been sent out and all should now be collecting the required data.</p> <p>ND mentioned some virtual cardiac events which had evaluated really well. ND to ask that the link is sent on to JF for onward circulation</p>		<p>ALL</p> <p>ALL</p> <p>ND</p>
<p>9.</p>	<p>National Projects</p> <p>9.1 Transitional Care Implementation JF asked for update from each area;</p> <p>UHDB - KS reported that she was not sure what the progress in Derby/Burton is</p> <p>NUH – the model remains the same. There is a new guideline coming out and transitional care team days will be running early next year</p> <p>NGH – MH will provide an update on email</p> <p>UHL – Virtual TC model is being delivered on the post-natal ward, with is being led by one of the ANNP's</p> <p>ULHT – the service is fully implemented</p>		

	<p>KGH – There is a regular slot on maternity study days to update on TC.</p> <p>9.2 Neonatal Critical Care Transformation Review Implementation and Oversight</p> <p>The ODN are awaiting feedback for the East Midlands response from the Neonatal Implementation Board (NIB). Monitoring of delivery of CCR will be at a regional level through the Regional Perinatal Board, who will have oversight of performance against action plans and delivery.</p> <p>The Network will continue with unit 6 monthly follow up reviews.</p> <p>There is an expectation that the units will work with the L LMNSs to further develop and monitor the plans.</p> <p>9.3 GIRFT</p> <p>Network GIRFT event was held in March, and trust GIRFT visits have now commenced. The Network capacity issues, and associated mortality have been escalated to the national team by the GIRFT team.</p> <p>Kelly Harvey has been appointed as GIRFT Nursing Lead.</p> <p>The GIRFT presentation was included as a link on the agenda for information.</p> <p>9.4 HEE QIS Project</p> <p>There is a National group who are currently undertaking a project to review QIS courses and how they are developed on behalf of HEE. All should now have received a survey which was put together by the group. LH as chair of the Lead Nurse and Claire O'Mara chair of NNA had input into the survey.</p> <p>A Student survey will also be sent to those who have recently completed the course.</p> <p>There will be a dissemination event sometime in March 2021, date to be confirmed.</p>		
<p>10.</p>	<p>Parents</p> <p>10.1 Parent Engagement/Neonatal Voices</p> <p>PAG meetings have been held virtually and evaluate very well so it is anticipated that this will be an option in the future even when there are face to face meetings. In Lincolnshire there is a subgroup of the Maternity Voices Partnership (MVP) called Neonatal Voices Partnership (NVP). Lincolnshire were the first area in country to introduce NVPs and an article was published last week to explain how this was implemented. Some other LMNS are now looking to introduce similar groups and this will be one of the focuses of the care coordinators.</p>		

	<p>10.2 FIC Project</p> <p>Units across the country have had to adapt due to COVID-19 restrictions. The Network have provided guidance to units on how to support the parents. BAPM have produced guidance around unrestricted access to units.</p> <p>Link nurses still working hard. ULHT have developed submarine to discharge, KMH have developed the train to discharged, both based on the discharge caterpillar developed by Queen’s Hospital, Burton.</p> <p>There have been some reports that parents have been better supported during COVID-19.</p> <p>A Network FiCare orking Group is planned which will need to include parent voices and medical representation. BAPM guidance for FiCare is being produced</p> <p>ZD is working on developing education modules on FiCare, to help staff whilst visits to the units are not permitted.</p> <p>10.3 Care Coordinators</p> <p>Money has been received from the National team to appoint Network Care Coordinators. Job descriptions have been written for a Deputy Lead Nurse post (with a remit for FiCare and PPI) and Care Coordinators/s who would be able to visit units and be more visible. Job descriptions are in the process of being job matched, and it is hoped that these posts will go out to advert in January 2021.</p>		
11.	<p>Bliss Update</p> <p>11.1 Accreditation</p> <p>LH reported that a pricing structure will be applied to the Bliss Accreditation, this has been discussed at National Level, with some challenge however, it is very clear that Bliss are unable to offer support to units without this funding.</p> <p>Units will therefore be required to explore how the scheme can be funded from trust funds</p>		
12.	<p>Governance</p> <p>12.1 Shared Learning</p> <p>None</p>		
13.	<p>Update from Units/CenTre</p> <p>CenTre</p> <p>There are two new transport nurses in north base which will take the service up to full establishment.</p> <p>The last couple of weeks have been challenging to staff with an increase in staff isolating.</p> <p>The service has now taken delivery of 4 new transport trolleys. SS is currently busy retraining staff on the new</p>		

<p>equipment and it is hoped teaching will be rolled out in January 2021.</p> <p>Deadline for new system for acute transfers is March 2021.</p> <p>Risk assessment devised for NGH access routes sent to NB and WC.</p> <p>Transport link nurses to be identified for KMH and PHB. CG will feedback to Boston.</p> <p>ULHT No one present to give an update.</p> <p>KGH There are ongoing Band 5 and 6 vacancies, interviews were held yesterday for Band 5's. New roles have been introduced to help with staffing and support for parents. Band 3's joining early January 2021.</p> <p>Issues with backlog of basic life support and NLS training.</p> <p>NUH The unit had hoped to start a new junior chief nurse fellow in September, but this has had to be put back to March 2021.</p> <p>NGH The 4 QIS staff doing the Bedford are enjoying it. Hoping to send further staff onto the DMU course</p> <p>Fully recruited after recently appointing. 2 overseas nurses have started, with another coming from Australia. The 2 appointed last week will start in March.</p> <p>3 x QIS on MAT leave which creates staffing issues</p> <p>Parents happy with access and the addition of using FaceTime/Zoom and baby diaries. FFT starting back up on iPads</p> <p>A volunteer is on the unit for a few hours each day, helping with stocking up and chatting to parents. Helping with the FFT on the iPad.</p> <p>Waiting for plans to come through for new parent accommodation.</p> <p>UHDB RDH fully staffed from January 2021. QHB fully staffed from January 2021.</p>		<p>RB/CG</p>
---	--	---------------------

	<p>UHL Struggling with staffing, closed 2 special care cots room to ensure safety. Interviewing on Friday and some NQN starting. 2 new consultants coming into post.</p> <p>KMH No one present to give an update</p>		
14.	<p>Network Update No update.</p>		
15.	<p>LMNS Meetings 15.1 Neonatal Project Lead CG gave a presentation. CG contact details; claire.gartland3@nhs.net should anyone have any questions.</p>		
16.	<p>AOB None.</p>		
17.	<p>Date/Time of Next Meeting Tuesday 23 March 2021, 10:00am – 12:30pm, via Microsoft Teams</p>		