

### **Minutes of Lead Nurses Group**

Tuesday 11 July 2023 10.00am – 12.30pm

### **Via Microsoft Teams**

### Present:

Linda Hunn (LH), Director/Lead Nurse, EMNODN (Chair) Judith Foxon (JF), Deputy Lead Nurse, EMNODN Cara Hobby (CH), Deputy Lead Nurse, EMNODN Wendy Copson (WC), Deputy Lead Nurse, EMNODN Rachel Wright (RW), Acting Matron, United Lincolnshire Hospitals Kelly Marriott (KM), Ward Manager, Northampton General Hospital Cheryl Griffiths (CG), Matron, Nottingham University Hospitals Sarah Bray (SB), Ward Manager, Queen's Medical Centre, Nottingham Davina Bhardwaj (DB), Matron, University Hospitals of Leicester Lynn Slade (LS), Matron, University Hospitals of Derby & Burton Louise Bakin (LB), Senior Sister, Queen's Hospital, Burton Zara Doubleday (ZD), Ward Manager, Nottingham City Hospital (Left at 10:47) Michelle Hardwick (MH), Matron, Northampton General Hospital Bec Lambdon (BL), Lead Educator, Northampton General Hospital Kevin Sylvester (KS), Ward Manager, Leicester Royal Infirmary (Left at 10:31) Rhian Cope (RC), Matron, King's Mill Hospital, Mansfield (Joined at 10:18) Rachel Giles (RG), Deputy Head of Nursing, Women's & Children's, King's Mill Hospital, Mansfield (Joined at 10:18 left at 10:58)

### In Attendance

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

	Subject	Attachment	Action
1.	Apologies for Absence		
	Jane Lafferty, Hilliary Killer, Julie Needham		
2.	Declarations of Interest		
	None.		
3.	Minutes from the Previous Meeting		
	The minutes from the previous meeting were accepted as an accurate record.	<u>A</u>	
4.	Matters Arising		
	4.1 Car Seat Update		
	LH attended an update meeting yesterday, which was made		
	up of representatives from various national groups. The audit		
	findings have been shared at an international meeting but		

	there was no agreement to make any amendments to the legislation. There was some discussion about repeating the data collection to increase the sample size, and LH will be discussing this with the National Managers Group. She will advise units if it is agreed that further data is to be collected. Members of the group will also be discussing the issue further with the DoT and Bliss	
5.	Group TOR The TOR have been reviewed and were previously circulated by email for comment. They will be presented at the CGG on the 12 July 2023 to be ratified.	
6.	Workforce 6.1 Nurse Staffing Audit A copy of the nurse staffing audit was circulated and discussed.	
	There are still significant shortfalls particularly in the NICUs in relation to QIS nurses. The new style charts demonstrate where the units are below the 70% QIS standard, but it can easily be demonstrated that the gap between QIS nurses on duty, and those that are required, is not huge in most of the units.	
	The charts also illustrate a small shortfall in the registered nurse numbers, particularly in the NICUs, which occurs quite frequently. The only other unit where a significant shortfall is demonstrated is at KGH.	
	Where there are persistent challenges, unit managers need to ensure that there is a plan in place to mitigate against the shortfall. JF is planning to meet with all the managers around the workforce data collection, and also to develop/review workforce development plans.	
	WC highlighted that nurse staffing is an NNAP measure for 22/23. Please see NNAP online where there is a guide entitled safe, sustainable and productive staffing. england.nhs.uk/wp-content/uploads/2021/04/safe-staffing-neonatal.pdf	
	The ODN is being asked to collect workforce data quarterly as the commissioners want to develop a better understanding of neonatal nurse staffing issues.	
	<b>6.2 Nursing Workforce Data Collection</b> Covered above.	
	6.3 Quality Roles Funding The allocations for quality roles have been announced and JF has contacted the units to provide the information. All units	

received funding for a band 7 governance lead and some units have also received funding for additional education hours. The unit teams updated against their progress in relation to recruitment to these posts: **NUH** – An 8 A Quality Risk & Safety Lead has been appointed and will be starting in September. The Trust added some funding to fund an 8A post. **UHDB** – A Band 7 0.8WTE is out to advert which closes on 12 July 2023. LS reported that there has been a great deal of interest. **UHL** – DB reported that she is waiting to have a conversation with Kerry Williams. The job description is written, and the post will be ready to go out very soon. RC - The governance role is on TRAC awaiting final trust approval. **ULHT** – RW reported that the post is going through Trust approval processes. **NGH** – Recruited into posts. Once recruitment processes have been completed, please send WC details of the individuals when they are in post. **ALL** JF/WC are happy to support the induction processes for these new staff if required. 6.4 Ockenden Posts JF thanked everyone for returning the Ockenden returns for this quarter. The only return outstanding is KGH. Please **KGH Team** could this be submitted ASAP. 6.5 Recruitment Days/Video Recordings The Education team will be supporting recruitment days in Lincoln and Nottingham. The Network Team are happy to attend and support any events. Please get in touch with JF **ALL** accordingly. A recruitment video is still on the agenda, but the ODN Team need to ensure that there is sufficient funding available within the ODN budget before proceeding.

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6.6 Neonatal Nurse Standard Framework

NHSE commissioned The University of East Anglia to lead on the standardisation of the QIS course across the country. There have been a number of workshops and some of the Network staff have been involved in these. Feedback has not been as positive as it could have been in terms of the organisation of the workshops and JF would echo the issues that were raised at the education group last week. The University of East Anglia aims to produce an outline standard programme for course content by October. They will then look to go through a process to determine how that programme is delivered and monitored to ensure that the standard is met and maintained.

### 6.7 Nursing Associate Role Outline

Some Trusts are looking at including IV drug administration within their local job descriptions for nursing associates. The purpose of the Network role outline is to provide an idea of what should be included in local job descriptions. Job descriptions will still need to go through job matching. It was noted that the addition of IV drug administration may lift the role banding beyond a band 4.

The Role outline will go to CGG tomorrow to be ratified and will hopefully then upload to the Network website.

## 7. Education & Practice Development Update 7.1 QIS Training

There were no updates, concerns, or comments around QIS training that anyone wished to raise.

JF reported that the Network Education & Practice Development Group recently discussed that the NTU are delivering QIS assessment process which includes OSCEs, and the DMU programme instead uses SIM sessions to support the nurses' practical skills. JF asked for views on this. MH felt that it is important to have consistency.

A number of students did not complete the QIS training at DMU. This was mainly because they were not accessing the support that was offered to them. Shaun Edwards will therefore be looking at making this a mandatory element in the future.

### 7.2 Foundation Programme Update

There are 23 students on the current cohort. This is made up of neonatal, maternity and TC staff. There is a mix of nurses who are new to neonates, HCSWs, and HCAs. The course is evaluating well. JF and Charlotte Dolby have been out to all the units to meet face to face with as many of the students as possible. There is a face-to-face day education day next week which will include training with the Network AHPs.

The assessment for the current foundations' cohort is that each Trust has been given a QI project, suggesting they look at one of the NNAP measures and where remedial work is

	required. It was noted that it would be helpful if any of the members of the unit teams can support them to deliver their QI projects.	
	JF reported that she is aware that the units have large numbers of new staff starting and that they cannot all be released at the same time to attend the course. Please review who would be best to attend, what their learning requirements are, and contact JF or Charlotte Dolby to discuss.	
	7.3 Education/Training Programme Future Events The Network Annual Conference will be held on 02 October 2023, with a theme around quality and safety. 'A Save the Date' flyer has been circulated. The Network Team are currently in the process of finalising the programme. If anyone has any topics that they would like to see included, please contact JF.	ALL
8.	Parents 8.1 Update on FIC Progress to Date An e-learning module has been created on the Moodle platform, which is called level 1 for FiCare. This has been amended based on feedback. It is almost ready to be circulated once a technical glitch with Moodle has been resolved.	
	Progress is being made with the Network FiCare guideline. Financial support is being sought from the LMNSs to enable a project with CardMedic to be progressed. If anyone wishes to find out more about CardMedic please visit their website; <a href="CardMedic">CardMedic</a>   Reduce Health Inequalities & Improve Patient <a href="Safety">Safety</a>	
	Haddie Bills is now on maternity leave. Interviews have been undertaken for maternity cover and the post has been offered. Standard HR checks are underway, and it is hoped that they will be able to start in the next 8-12 weeks.	
	<b>8.2 Parent Engagement/Neonatal Voices</b> There has been a great deal of engagement with families recently as part of the filming project, and some of these families expressed an interest in joining the PAG.	
	The next PAG meeting will be on 31 August, and in the meantime, CH will be asking parents whether they would like to see a rotation of meeting days, and for any thoughts/feedback on the current agenda and meeting format. Invitations will be going out shortly.	
	8.3 Parent Information Leaflets Nothing to update.	

## 8.4 Unit Slide Shows/Virtual Tours The Network Team have looked at whether the Network could support 360 tours of the units, however at the moment, this is paused due to a lack of funding. 8.5 FiCare Link Nurses The Network are unable to continue funding for these roles, and so this item will be removed from the agenda. UHDB, ULHT and NGH are continuing with the roles and funding them locally which is a very positive move. It is hoped that the other units will also see the value in continuing to fund these posts. 8.6 Parent Videos (AHSN Funding) CH reported that the filming for the 4 educational videos has now been completed. The team acquired a great deal of very good footage, and it is going to be a significant challenge to edit it down. The videos are likely to be ready in November, but it is hoped that some previews will be available before then. 8.7 Family Transfer Prompt Card/Risk Assessment This has evolved into a joint conversation with WMNODN to look at developing a Midlands wide framework. discussions have concentrated on how to get feedback from the families. This may involve some online listening events. **Bliss Update** 9. 9.1 Accreditation The new Bliss Baby Charter lead is Julia who is sending quarterly updates. Bliss are working through the backlog of audits, and feedback is awaited by LCH and RDH which Julia is aware of, and she will complete this as soon as possible. The Network has funded all units to get to gold accreditation. **KMH** - Sarah Roberts is the lead. The unit is at bronze status. and Bliss are awaiting submission of audit 4. **LGH** - Hazel Turrill is the lead. LGH have registered intent but there has been no recent contact from the unit. DB to clarify DB and get back to CH. LRI - Elsie Kumar is the lead. The unit has achieved bronze status, and Bliss awaiting submission of audit 4. **LCH** - Reo Danielle Roberts is the lead. The unit is at bronze status, audit 4 was submitted in April and Bliss need to provide feedback.

**PHB** - Hayley Gatens is the lead. They are working towards bronze status, however they need to clarify some elements

for audit 4. There has been a meeting and Bliss need to provide feedback.

**NGH** - Nicole Malazzab is the lead. They are working towards bronze status and are about to submit audit 3.

**NCH** - Julie Versteeg is the lead, currently at gold, although this status has expired.

**QMC** - Julie Versteeg lead. The unit is currently at gold status, although this status has expired. Progress towards Platinum status has been paused due to the building works.

**QHB** - Kayleigh Eaton is the Lead. The unit is at silver status and was assessed on 14 June for gold status. Feedback is awaited.

**RDH** - Becky Jerome is the Lead. The unit is at bronze status. They have submitted audit 5 and are awaiting Bliss team feedback.

If anyone is stuck or struggling with the Bliss requirements, CH reported that some support will be provided soon to see how further progress can be made.

### 10. UNICEF Update

### 10.1 Unit Assessments (Initial and Level 1)

The Network have funded for all units to have an initial implementation and planning visit, and stage 1 assessment.

**ULHT** – Registered intent March 21, and a certificate of commitment has been awarded.

**UHL** – No current information.

**NUH** – Registered intent June 22.

**KMH** – Stage 1 achieved July 22, and stage 2 assessment booked for October 2023.

**NGH** – Stage 1 assessment undertaken October.

**UHDB** – RDH stage 2 assessment achieved Oct 2020. LS updated that both units were assessed last week, and results are awaited.

CH reported that for those units who had achieved stage 1, the funding can be used for stage 2.

### 11. National Projects

# 11.1 Neonatal Critical Care Review Implementation & Oversight

NCCTR report was published in Dec 2019 with a requirement for the recommendations to be delivered by December 2024. LH reported that there is still a great deal of work to be completed with critical care capacity being the biggest issue. There is very positive work underway at NUH, which will provide 9 additional cots on the QMC site, it is hoped that this work will be completed by Dec 2024.

Work is ongoing with UHL with regards to funding for the Womens & Children's new Build. This will not be completed by 2024 so capacity will remain a significant issue.

Another recommendation was regarding appropriate staffing levels for nursing, AHP and psychology, and medical workforce. LH was recently asked by Specialised Commissioning to provide a gap analysis for all the Network units. Specialised Commissioning are trying to prioritise neonates this year and it is hoped that there will be some additional funding flowing down to all the units. Specialised Commissioning have confirmed that any additional funding will not flow down to the units until posts have been recruited to. LH will continue to keep the group updated.

FiCare progressing well and CH has already updated the group.

LH stressed the importance of engagement with the LMNSs and attendance at the various meetings to raise the profile of neonatal services. LH reported that, ultimately the LMNSs will be the ones who will be holding the budget for neonatal services, so it is of primary importance that the neonatal issues are shared at LMNS meetings. All to take away and discuss with own Governance leads.

### 11.2 Transformation Funding

Funding has been received from the National Team for nurse staffing, and Ockenden funding for AHPs, psychologists and Medical. All units received some allocation but not nearly enough to cover the gaps. Assurance that this funding has been spent appropriately is to be provided to the Regional and National Teams. Templates have been circulated for completion and LH emailed out last week requesting that these are returned ASAP, or the ODN will need to submit a nil return.

### 11.3 East Midlands Capacity Oversight Group

The meeting was set up by the Regional Team to discuss solutions to increase the critical capacity across the Network. The group was stood down in the autumn 2022 and the

LH

**ALL** 

	Commissioning Team are meeting with the two Tertiary Centres to review the current position before reinstating the meeting. There has been no further update on when the group will be reinstated. LH will discuss with the Regional Team.	LH
	<b>11.4 Optimisation</b> WC shared a presentation on the PERIPrem Perinatal Passport, and a copy will be shared by email.	
	Saving Babies Lives version 3 is out now. This details that units should have a neonatal consultant and nurse as part of their SBLV3 perinatal team.	
	11.5 CNST Year 5 CNST year 5 has been released which contains neonatal measures. All to familiarise themselves with the document as the trusts will be asking for evidence.	
12.	Quality & Governance 12.1 Shared Learning LS had shared at a previous meeting that UHDB have been working with manufacturers to change CPAP products due to a number of babies suffering septum damage. LS to ask Rachel Shepherd to present the findings.	
	LS at the moment staffing is the predominant theme for reported incidents.	
	DB reported issues with equipment items becoming obsolete. The team decided to have regular equipment meetings and found this to be beneficial.	
	Any quality or governance information for sharing please send to WC in order that it can be included in the Quality Counts newsletter.	
	12.2 Data WC reported that at the bottom of front page of NNAP online, there is a guideline to the measures, with good descriptions on where to put information onto BadgerNet, and it also explains the importance. This is a good document to share with staff. National Neonatal Audit Programme (NNAP) measures   RCPCH	
	WC stressed the importance of validating data. The BadgerNet data quality tab will show the missing data.	
	12.3 Identification of Trends in Sudden Deterioration Discussion was previously undertaken around the possibility of introducing a fresh eyes process to reviewing observation	

	charts. NGH were going to look at this as a pilot study and MH will revisit this.	МН
	LS doesn't recall receiving any information about the fresh eyes. LH to resend.	LH
13.	Transitional Care Implementation The Derby Team are doing some very good work. WC has a meeting on Monday at KGH who will be starting the process. TC will be part of CNST and will also be tracked through the LMNSs. LS reported that QHB are behind schedule on the new build which includes a TC area. They are now anticipating a handover from the builders in September.  UHDB are holding a recruitment day next Wednesday.	
	RDH are agreeing what TC will look like and they could potentially go up to 16 TC cots, when the criteria have been agreed. They are considering a hybrid model.	
	In UHL Lisa Carr has been appointed as TC Lead and conversations around the model are underway, DB to send WC contact details.	DB
14.	Homecare 14.1 Update No one present to provide an update.	
15.	Update from Units/CenTre NGH – Recruited into the quality role. Band 6 recruitment continues. A nurse will be commencing the ANNP training in September in Southampton. The Parent accommodation is nearly finished and will be handed over to the Clinical Team next week.	
	Just recruited into the HCA role, and it is positive to see there will be staff progression within the unit.	
	The PERIPrem passport is being launched today with Maternity.	
	The team have a new ROP camera and they are working with Oxford to train the staff to undertake ROP screening.	
	The Film Crew were on the unit last week filming for the Network/HEE education videos.	
	TC is now fully established for staffing and been very busy over the last couple of weeks.	
	The new Psychologist is due to start on 01 August 2023.	

**NUH** – There has been a very positive recruitment campaign, with a large cohort of band 5 nurses starting in September 2023.

Rachel Kruger the new OT has commenced in post.

The Maternity and Neonatal redesign is on track. 13 September 2023 is the potential decant date, although this is not yet confirmed.

A Learning and Organisation Development Lead has been assigned to help with the redesign work and culture within the service.

The service has been experiencing high ITU acuity over last few months, with consequent challenges for capacity and flow.

**UHDB** – The service has received massive investment through the maternity safety case. This will result in additional recruitment, as all AHPs and ANNPs posts are now funded. The Governance role is out to advert. There is also a TC lead role also out to advert to enable the project work to continue.

The service has successfully recruited into the consultant vacancies currently awaiting start dates.

The Trust are undertaking a workforce review.

**UHL** – The service has had a very successful band 4, 5 and 6 recruitment campaign. There has also been success in recruiting to the Band 6 clinical educators' team which in turn is having a positive impact on the unit. There are challenges as the infant feeding lead post is currently on hold and support is required within the CMG.

**KMH** – Kelly-Marie McMinn is in post as TC lead, there are some challenges with midwives being signed off as second checkers for IV antibiotics. RC and KMM will be in touch with WC for support.

There are plans to go out to advert in order to cover the maternity gaps.

Good progress is being made towards BFI accreditation and Kim Hastings has been working really hard on the project. She has successfully been recruited to a BFI role. The new Deputy Head of Nursing has a neonatal background. The service is currently struggling to recruit ANNPs, and RC has a meeting to discuss whether to consider appointing a trainee.

	<b>ULHT</b> – The band 5 vacancies have been fully recruited to. A Band 6 secondment is out to advert. There is a further trainee ANNP post out to advert. A new Data clerk has been appointed. The ANNPs are looking at the NNAP data and reporting quarterly for governance. A local charity is now funding a snack trolley. The BFI project is on hold as the service are awaiting LMNS approval for funding a lead post. The PDN and Governance post have to go through internal approval processes.	
	RW raised the issue that midwives should complete an NLS (Newborn Life Support) update every year as part of CNST and must be 90% compliant every month. LS is putting this on the Risk Register. JF confirmed that this has been discussed at the Education & Practice Development group, as there will be a need for more NLS places. JF is considering whether this needs to be raised with the resus council. JF will bring a response to the next meeting.	JF
16.	Network Update Charlotte Dolby is working with the education team until September 2023.	
	Work has increased phenomenally since the Covid-19 pandemic. LH is in the process of writing a case for the commissioners to request additional funding to increase the team.	
17.	AOB The Doctors industrial action commences on the 12 July 2023. The commissioners have asked for an OPEL status over the weekend; therefore it was requested that all present request that their teams complete the forms as early as possible on Saturday and Sunday. It is especially important to report any issues with medical staff availability.	ALL
	The jury from the Lucy Letby trial is out deliberating at the moment. LH has been informed there is a national task force to look at recommendations from the trial. It is expected that there will be a large workload particularly around assurance processes.	
	There was a national call on the 10 July 2023 with Ruth May, which JF and WC attended. The importance of communication was stressed, and the National Team will be preparing a statement once there is a verdict. It is anticipated that there will be additional scrutiny on neonatal service provision and outcomes. All present were encouraged to make sure that staff are aware that there is a freedom to speak up champion in each Trust.	ALL

	WC sent out email regarding consent and asked if these could be returned ASAP.	ALL
18.	Date/Time of Next Meeting Tuesday 26 September 2023, 10:00am – 1:00pm, St Johns Ambulance/MCCTS, Unit 10-12, Trent Lane Industrial Estate, Willow Road, Castle Donington, DE74 2NP	