

**Minutes of Governance Lead Nurse Group**

**Thursday 26 September 2024**  
**2:00pm – 3:00pm**

**Via Microsoft Teams**

**Present:**

Wendy Copson (WC), Deputy Lead Nurse (Quality & Service Improvement) EMNODN (Chair)  
 Charlotte Dolby (CD), Education & Clinical Effectiveness Nurse, EMNODN  
 Rachel Salloway (RS), Data Analyst, EMNODN  
 Christina Pembleton (CP), Governance Lead Nurse for Neonates & Paediatrics, King’s Mill Hospital  
 Charlotte Baylem (CB), Neonatal Clinical Governance Matron, Nottingham University Hospitals  
 Lisa Kelly (LK), Neonatal Clinical Governance Nurse, University Hospitals of Derby & Burton  
 Hayley Gatens (HG), Neonatal Clinical Governance Nurse, United Lincolnshire Hospitals  
 Maureen Westphal (MW), Neonatal Clinical Governance Nurse, Kettering General Hospital  
 Rebecca Scorer (RS2), Neonatal Quality Sister, Nottingham University Hospitals  
 Nicole Malazzab (NM), Neonatal Clinical Governance Nurse, Northampton General Hospital  
 Rina Chauhan (RC), Neonatal Clinical Governance Matron, University Hospitals of Leicester

Item	Subject	Attachment	Action
1.	<b>Welcome &amp; Apologies</b> WC welcomed MW from KGH, HG from ULHT, and RC from UHL.  Apologies were received from Jane Lafferty (KGH and Rachel Wright (ULHT).		
2.	<b>Declarations of Interest</b> None		
3.	<b>Minutes from the Previous Meeting</b> <b>CB</b> to be added to the previous minutes.  Minutes discussed and agreed.	<a href="#"><u>A</u></a>	<b>WC</b>
4.	<b>Matters Arising</b> None		
5.	<b>Quarterly Proforma</b> <b>WC</b> explained that there are gaps in information for quality assurance from some services and that we would like to have a greater overview of trends and actions across the Network.  Proforma to be trialled for quarterly reporting to be fed back to group prior to the next CGG. <b>All</b> to comment on proforma by October meeting and start to complete Q3 data for feedback at the December meeting.	<a href="#"><u>B</u></a>	<b>ALL</b>

	<b>All</b> to continue to escalate any serious incidents or PSIs to RS for tracking.		<b>ALL</b>
<b>6.</b>	<b>Regional PQSG</b> <b>WC</b> explained what the Perinatal Quality and Safety Group is and how concerns are escalated regionally for each Trust.		
<b>7.</b>	<b>44+/40 Cohort</b> <b>WC</b> discussed the increase in 44+/40 activity and the implications on capacity, funding, IUTs, out of Network transfers etc. <b>RC</b> updated all that the EMNODN have started to include this data on the quality reports. This data will be shared with the Paediatric Network for capacity planning. The EMNODN Clinical Leads will also be meeting with the Paediatric Network, Surgical Network and Commissioners to highlight the impact on neonatal services.		
<b>8.</b>	<b>Mortality</b> <b>WC</b> gave update about the Mortality Oversight Group (MOG) and invited <b>all</b> to request attendance as a guest. Presentation given at MOG with a report to be shared with the group.  <b>WC</b> to share mortality report once available.		<b>ALL</b>  <b>WC</b>
<b>9.</b>	<b>PERIPrem</b> <b>WC</b> gave an update on the regional work being undertaken to reinvigorate PERIPrem. £10,000 will be given to each Trust to implement a PERIPrem initiative. Trusts have already applied, and funding agreed.  The Network PERIPrem passport and parent information leaflet are still being reviewed and will be shared once a decision is made as to whether there should be 9 elements or 11 elements.		
<b>10.</b>	<b>Transitional Care Update</b> All requested to bring update for next meeting.		<b>ALL</b>
<b>11.</b>	<b>Data</b> <b>RS</b> shared parental consultation data for the whole Network and explained that compliance has declined over the last year. It would appear that it is often completed retrospectively which may be causing issues. <b>RS</b> offered to provide individual data with Badger IDs where requested. <b>RS</b> explained that where it states 'missing data' this may be 'incorrect data'. <b>CP</b> suggested that staff locally felt that this was a repeat of the 'Parents on ward round' metric and so were tending to use that time and date. <b>RS</b> explained that the input for the two metrics were inputted in different areas and therefore wouldn't pull though. <b>WC</b> discussed the differences between the metrics. <b>NM</b> suggested that the medical staff should have responsibility for completing the BadgerNet once they have spoken to parents.		

	<p><b>All</b> to request any data 'spotlight' theme ahead of the meeting if required. Please send any request a week prior to the following meeting to enable the data download.</p> <p><b>RS</b> reminded all to try and get Restricted Access to the NNAP dashboards (RAD).</p>		<b>ALL</b>
<b>12.</b>	<p><b>BadgerNet Resource Update</b></p> <p><b>CD</b> gave an update on the flash card resources developed for staff across the Network. KMH and UHDB have been chosen as pilot sites. <b>CD</b> to develop a feedback mechanism prior to the final copies being disseminated across the Network.</p> <p>NUH are creating training videos with access via QR codes.</p>		<b>CD</b>
<b>13.</b>	<p><b>Local QI Projects</b></p> <p>Update requested for next meeting.</p>		<b>ALL</b>
<b>14.</b>	<p><b>AOB</b></p> <p>All discussed how they feel about an assurance proforma and generally felt it would be positive and will give insight into what projects are being undertaken in other units.</p> <p><b>CP</b> explained that CenTre had visited KMH to have M&amp;M discussions around some of their cases and that it had been good shared learning for staff.</p>		
<b>15.</b>	<p><b>Date &amp; Time of Next Meeting</b></p> <p>Thursday 24 October 2024, 2:00pm – 3:00pm, via Microsoft Teams</p>		