

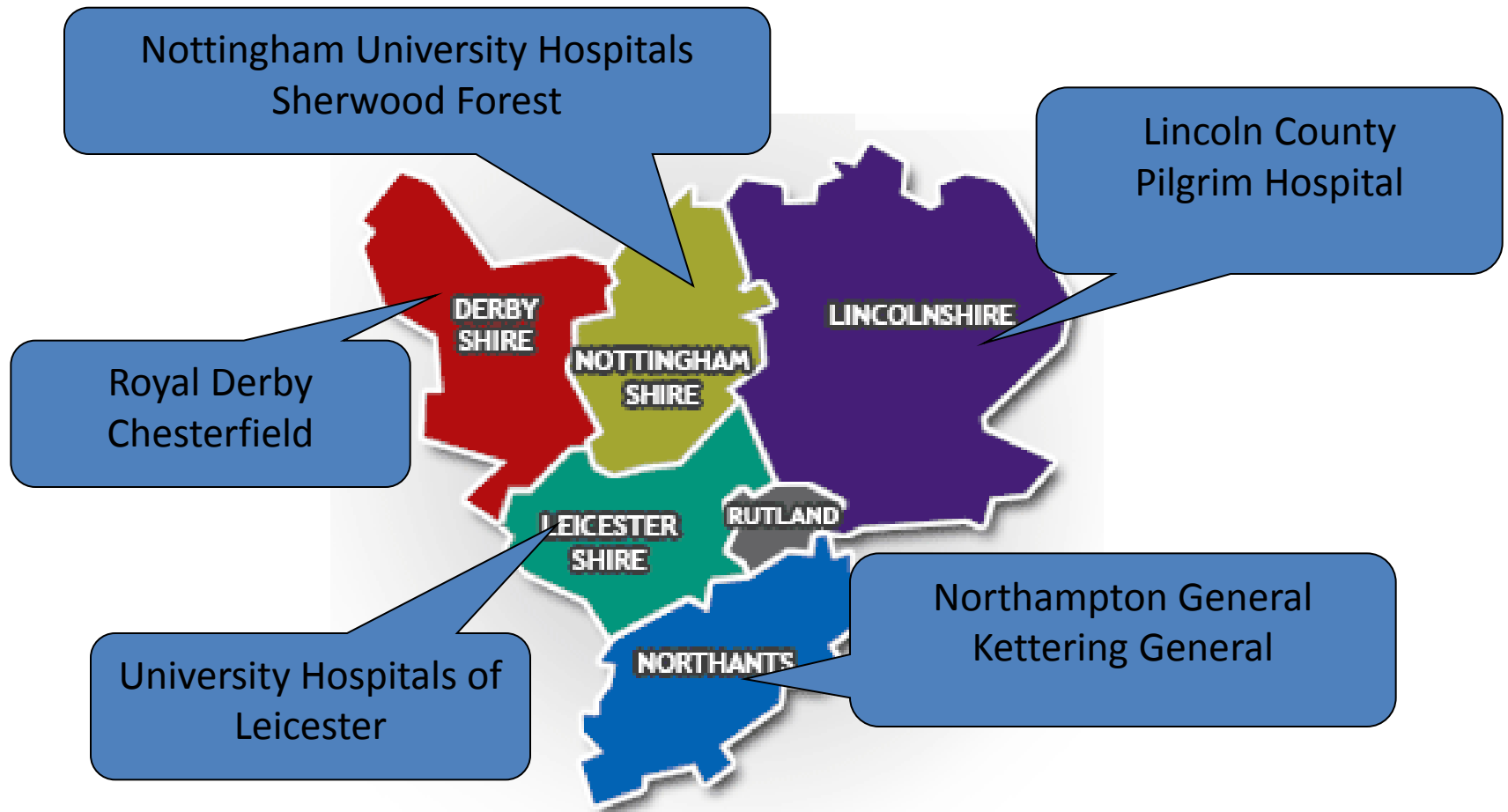
# Network Development and Impact

## The East Midlands Experience

Mr Richard Stewart  
Consultant Paediatric Surgeon

RCS Council Member  
Deputy Chair CSF





# Current service provision

- Increasing Specialism
- Deskillling in DGH,s
- Withdrawal of local services
- Reduction in training opportunities





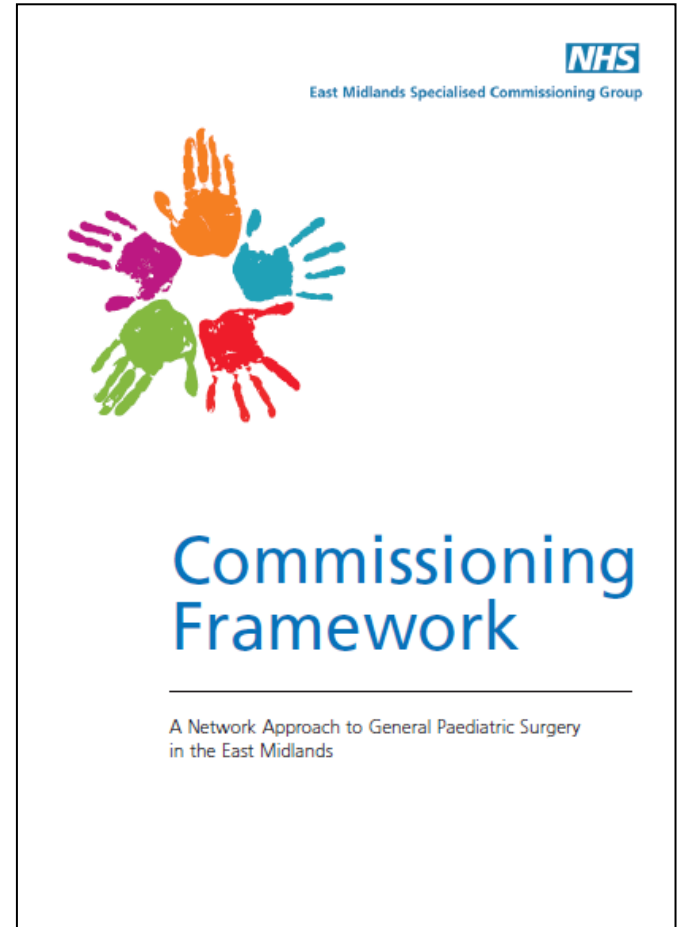


# WHAT IS GPS?

| General Paediatric Surgery   |   |
|--|---|
| Elective Day Case Surgery  | Emergency   |
| Inguinal hernia/hydrocele<br>Umbilical hernia<br>Circumcision<br>Undescended testis<br>Minor soft tissue lumps<br>Other simple procedures e.g. endoscopy | Abdominal pain/appendicitis<br>Acute scrotum/torsion of the testis<br>Minor injury<br>Abscesses (subcutaneous)<br>Irreducible inguinal hernia<br>Lifesaving surgery |

# The Beginning 2010-12

- All children will be treated by **appropriately trained** professionals – i.e. staff with the right education, training, knowledge and skills to provide high quality care in an environment suitable for their needs which is genuinely child centred
- All surgical specialties involved with children will be organised effectively to ensure that routine services are **available locally**
- All units contribute to a **clinically managed network** with regional MDT meetings and regional audit programme
- All units will be measured against regional quality/performance standards to ensure the same standard of service is achieved in all units





| Generic Standards              |   |  |
|--------------------------------|---|--|
| Ref                            | Standard  | Demonstrated by  |
| <b>Paediatric Life Support</b> |   |  |
| 1                              | Registered nurses (RNs and RN-Cs) who work in elective day case and emergency settings must have achieved competency in basic paediatric life support training on an annual basis e.g. basic life support or PLS          | Copies of Trust training records                                     |
| 2                              | All anaesthetists/surgeons must ensure that they have appropriate annual training in paediatric life support/resuscitation  | Copies of Trust training records                                     |
| <b>Pain Management</b>         |   |  |
| 3                              | All units must have a properly staffed acute pain service which covers the needs of children, with a clear policy for advice about management of pain at home, and the provision of take home analgesia where appropriate | Copy of Policy   |
| 4                              | All children must have an appropriate pain management assessment and management plan  | Evidence of pain assessment and management plan in the patient notes |
| 5                              | All registered nurses (RNs and RN-Cs) must have received formal training in the use of paediatric pain assessment tools   | Copies of Trust training records                                     |
| 6                              | All analgesia for children must be prescribed and administered by registered and appropriately trained personnel  | Copies of Trust training records                                     |
| <b>Child Protection</b>        |   |  |
| 7                              | All clinical staff involved in the care GPS patients must have level 2 safeguarding training (as per the intercollegiate standards) and ideally be working towards level 3. Training must be updated annually             | Copies of Trust training records                                     |
| <b>Nursing</b>                 |   |  |
| 8                              | Trained nursing to patient ratio's must be:<br>1:3 for children under two years<br>1:4 for children two years and over<br>1:5 at night  | Copies of rotas  |
| 9                              | There must be a minimum ratio of 1:1 nurses experienced in the post anaesthetic care of children in every area where children are being recovered from anaesthesia  | Copies of rotas  |



## Emergency Care Standards

| Ref                            | Standard  | Demonstrated by   |
|--------------------------------|---|---|
| <b>Training and Competency</b> |   |   |
| 1                              | Surgery must be provided locally wherever possible  | Audit of transfer of patients   |
| 2                              | Surgeons and anaesthetists taking part in an emergency on call rota which provides cover for emergencies in children must ensure that they have appropriate training and competence to handle the emergency surgical care of children who cannot be transferred, or who cannot wait until a designated surgeon is available | Copies of Trust training records                                      |
| 3                              | All Trusts with an Emergency Department must have staff available at all times who are trained in paediatric airway management and venous access  | Copies of Trust training records                                      |
| 4                              | All lifesaving procedures will be carried out at the point of admission with telephone support, if required, from the specialist paediatric surgical on call team at the tertiary centre  | Trust policies and audit of transfer of cases to the tertiary centres |

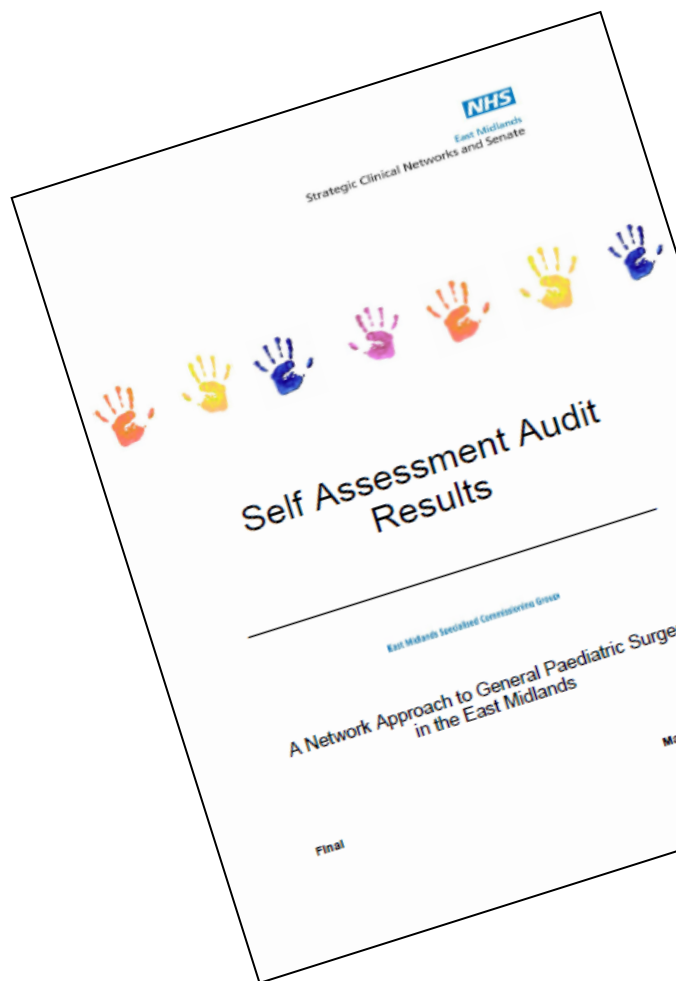
# STANDARDS FOR CHILDREN'S SURGERY

Children's Surgical Forum



2013

# 2012 Self Assessment

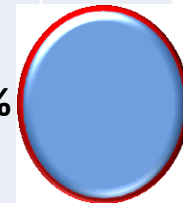


**Table 2**  
RAG rated responses to each standard by trust.

| Standards | Chesterfield | Derby | Leicester | Boston | Lincoln | Kettering | Northampton | Nottingham |
|-----------|--------------|-------|-----------|--------|---------|-----------|-------------|------------|
| A1        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| A2        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| A3        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| A4        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| A5        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| A6        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| A7        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| A8        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B1        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B2        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B3        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B4        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B5        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B6        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B7        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B8        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B9        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B10       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B11       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B12       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B13       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B14       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B15       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B16       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B17       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B18       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B19       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B20       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B21       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| B22       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| C1        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| C2        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| C3        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| C4        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| C5        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| C6        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| C7        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D1        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D2        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D3        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D4        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D5        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D6        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D7        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D8        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D9        | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D10       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D11       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D12       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |
| D13       | Green        | Green | Green     | Green  | Green   | Grey      | Green       | Green      |

# 2012 - Self Assessment

| RAG                    | CRH | DRH | UHL | PHB | LCH | KGH | NGH | SFH | NUH | TOTAL |
|------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------|
| Amber                  | 7   | 17  | 4   | 12  | 6   |     | 9   | 13  | 7   | 75    |
| Red                    | 3   | 7   | 2   | 1   | 8   |     | 3   | 1   | 2   | 36    |
| Total not met          | 10  | 24  | 6   | 13  | 14  |     | 12  | 14  | 9   | 111   |
| As % of total standard | 21% | 50% | 13% | 27% | 29% |     | 25% | 29% | 19% |       |





## ***PAEDIATRIC SURGERY CLINICAL NETWORK – LAUNCH EVENT***

- Introduction to new network
- Understanding the self assessment audit
- Next steps/work plan



***Friday 5 July 2013***

***9.30 – 12.30***

(lunch provided)



IGEM HOUSE  
High Street  
Kegworth  
Derby DE74 2EA



For further information and  
to book a place contact –  
Jayne Chapple  
[jayne.chapple@nhs.net](mailto:jayne.chapple@nhs.net)  
0116 295 7268

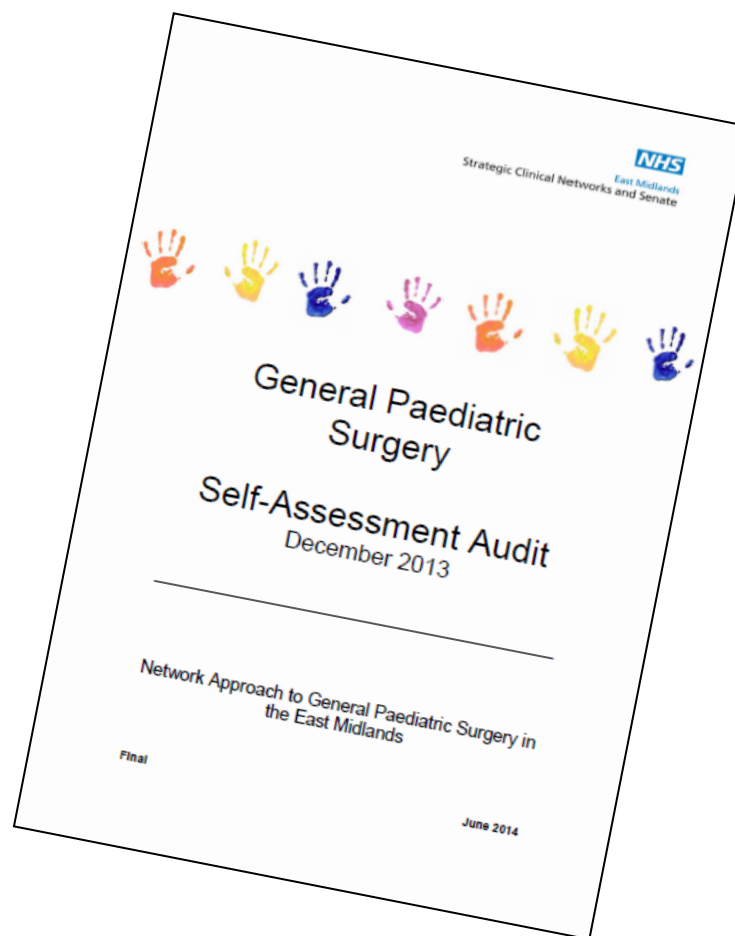
# 2013 Self Assessment

## 3.2 Results

Table 2 Summary Self-Assessment Audit Results for December 2013

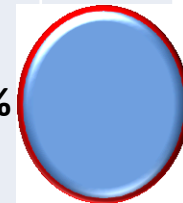
| Standard | CRH | DRH | UHL | PHB | LCH | KGH | NGH | SFH | NUH |
|----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| A1       |     |     |     |     |     |     |     |     |     |
| A2       |     |     |     |     |     |     |     |     |     |
| A3       |     |     |     |     |     |     |     |     |     |
| A4       |     |     |     |     |     |     |     |     |     |
| A5       |     |     |     |     |     |     |     |     |     |
| A6       |     |     |     |     |     |     |     |     |     |
| A7       |     |     |     |     |     |     |     |     |     |
| A8*      |     |     |     |     |     |     |     |     |     |
| B1       |     |     |     |     |     |     |     |     |     |
| B2       |     |     |     |     |     |     |     |     |     |
| B3       |     |     |     |     |     |     |     |     |     |
| B4       |     |     |     |     |     |     |     |     |     |
| B5       |     |     |     |     |     |     |     |     |     |
| B6       |     |     |     |     |     |     |     |     |     |
| B7       |     |     |     |     |     |     |     |     |     |
| B8       |     |     |     |     |     |     |     |     |     |
| B9       |     |     |     |     |     |     |     |     |     |
| B10      |     |     |     |     |     |     |     |     |     |
| B11      |     |     |     |     |     |     |     |     |     |
| B12      |     |     |     |     |     |     |     |     |     |
| B13      |     |     |     |     |     |     |     |     |     |
| B14      |     |     |     |     |     |     |     |     |     |
| B15      |     |     |     |     |     |     |     |     |     |
| B16      |     |     |     |     |     |     |     |     |     |
| B17      |     |     |     |     |     |     |     |     |     |
| B18      |     |     |     |     |     |     |     |     |     |
| B19      |     |     |     |     |     |     |     |     |     |
| B20      |     |     |     |     |     |     |     |     |     |
| B21      |     |     |     |     |     |     |     |     |     |
| B22      |     |     |     |     |     |     |     |     |     |
| C1       |     |     |     |     |     |     |     |     |     |
| C2       |     |     |     |     |     |     |     |     |     |
| C3       |     |     |     |     |     |     |     |     |     |
| C4       |     |     |     |     |     |     |     |     |     |
| C5       |     |     |     |     |     |     |     |     |     |
| C6       |     |     |     |     |     |     |     |     |     |
| C7       |     |     |     |     |     |     |     |     |     |
| D1       |     |     |     |     |     |     |     |     |     |
| D2       |     |     |     |     |     |     |     |     |     |
| D3       |     |     |     |     |     |     |     |     |     |
| D4       |     |     |     |     |     |     |     |     |     |
| D5       |     |     |     |     |     |     |     |     |     |
| D6       |     |     |     |     |     |     |     |     |     |
| D7*      |     |     |     |     |     |     |     |     |     |
| D8       |     |     |     |     |     |     |     |     |     |
| D9       |     |     |     |     |     |     |     |     |     |
| D10      |     |     |     |     |     |     |     |     |     |
| D11      |     |     |     |     |     |     |     |     |     |
| D12      |     |     |     |     |     |     |     |     |     |
| D13      |     |     |     |     |     |     |     |     |     |

\*A8 and D7 relates to participating in a network and have been removed from the analysis



# 2013 - Self Assessment

| RAG                    | CRH | DRH | UHL | PHB | LCH | KGH | NGH | SFH | NUH | TOTAL |
|------------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------|
| Amber                  | 7   | 7   | 4   | 6   | 13  | 9   | 10  | 4   | 6   | 66    |
| Red                    | 4   | 0   | 0   | 3   | 1   | 0   | 0   | 1   | 0   | 9     |
| Total not met          | 11  | 7   | 4   | 9   | 14  | 9   | 10  | 5   | 6   | 75    |
| As % of total standard | 23% | 15% | 8%  | 19% | 29% | 19% | 20% | 10% | 13% |       |







East Midlands  
Strategic Clinical Networks and Senate

## GENERAL PAEDIATRIC SURGERY NETWORK TRAINING EVENT

Friday 14 March, 2014  
IGEM House, High Street, Kegworth, Derbyshire DE74 2DA  
09.30 am to 4.00 pm

### PROGRAMME

|       |   |
|-------|---|
| 09:30 | REGISTRATION & REFRESHMENTS   |
| 10:00 | Welcome & Introduction – Clinical Director East Midlands Children's Strategic Clinical Network  |
| 10:10 | Network Update – Richard Stewart, Clinical Lead, EMSCN GPS Network  |
| 10:20 | Stabilisation Prior to Transfer – John Emery, Paediatric Anaesthetist, NUH  |
| 11:00 | REFRESHMENTS  |
| 11:15 | Accredited Safeguarding Training – Alun Elias-Jones, Consultant Paediatrician & Named Doctor for Safeguarding, LPT  |
| 12:45 | LUNCH & NETWORKING  |
| 13:00 | Pain Management – Liz Taylor, Pain Nurse Specialist/Anaesthetist, DHFT  |
| 13:45 | Clinical Update: <ul style="list-style-type: none"><li>• Pathway Development – Nitin Patwardhan/Richard Stewart</li><li>• General Surgery update – Bala Eraldi, Consultant Surgeon, UHL</li><li>• Fluid Management NICE Guidance – Polly Davies, Paediatric Anaesthetist, NGH</li></ul> |
| 14:30 | REFRESHMENTS  |
| 14:45 | Four Local Case Presentations including Learning Points   |
| 16:00 | CLOSE   |

Registration via Eventbrite:

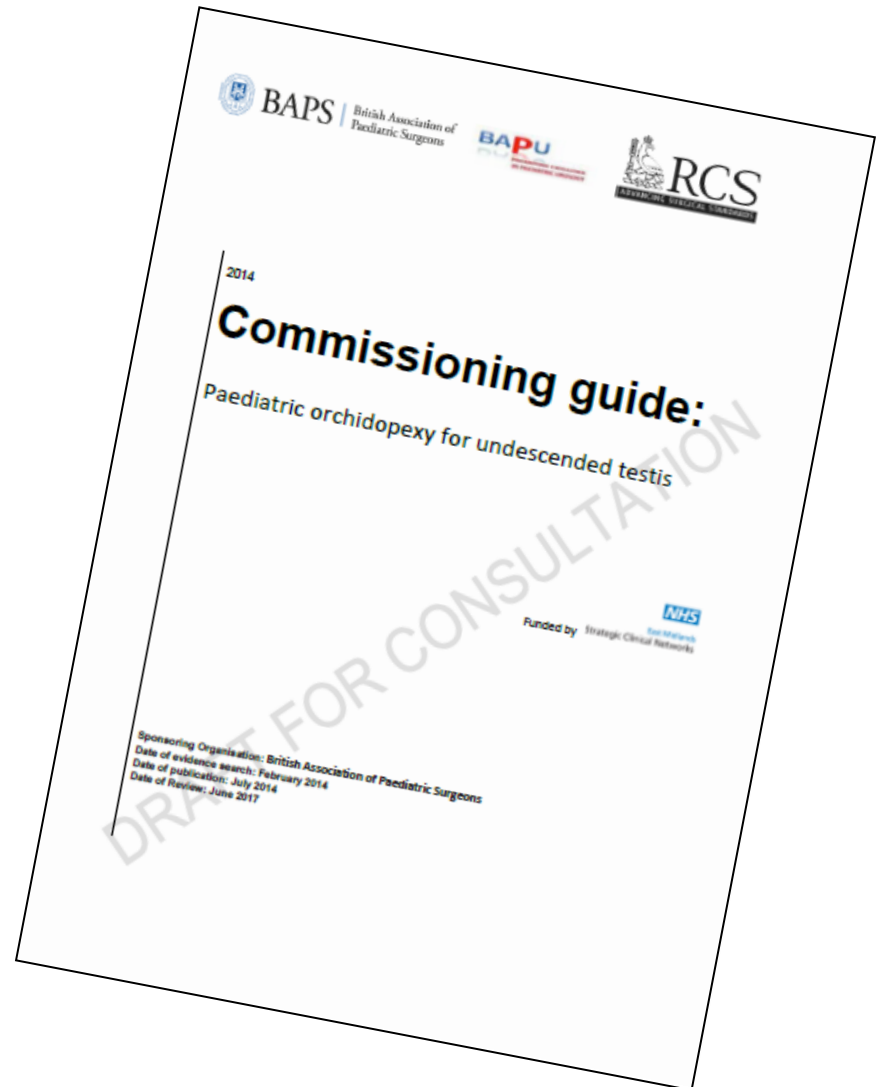
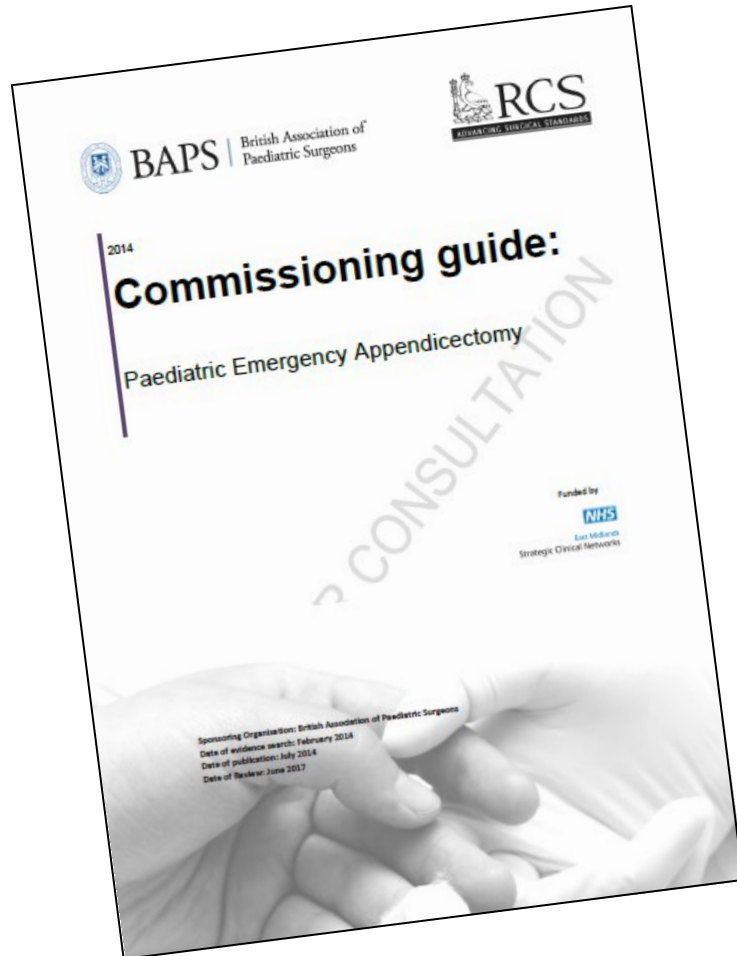
<http://emgpstrainingday.eventbrite.co.uk>

Queries to: Ailsa Morrison, Network Admin Support Officer, East Midlands Strategic Clinical Network  
Email: [ailsa.morrison1@nhs.net](mailto:ailsa.morrison1@nhs.net) | Telephone: 0116 295 0930

# Feedback

- Good to meet with colleagues from other hospitals
- Very useful
- 'Best meeting I have attended in years – local multidisciplinary, fascinating'
- A great forum for case discussion
- Both local case presentations told the reality
- Very well organised
- Very informative
- Good to meet various experts in GPS
- Safeguarding talk was outstanding

# Pathway Work



[Home](#) > [Healthcare Bodies](#)

## Healthcare Bodies

| Healthcare Bodies                                      |
|--|
| <a href="#">National Surgical Commissioning Centre</a> |
| <a href="#">Clinical Policy</a>                        |
| <a href="#">Support Services</a>                       |

We recognise the vital roles played by commissioners and providers in ensuring that patients receive the best standard of care.

To support your work we have developed a range of information, advice and practical tools which are outlined below.

- [Commissioning guide topics](#)
- [Background information](#) on the commissioning guides, including their development process
- [Data tools](#): There are two types of data tool (Quality Dashboards and Procedures Explorer) which enable commissioners and providers to examine and compare performance in key surgical areas
- [Information and support](#) on how to use the data tools
- [Supporting resources](#) including audit tools and NICE guidance
- Information on the [Invited Review Mechanism](#) and other [support services](#) that the RCS offers

[www.rcseng.ac.uk/healthcare-bodies/nscc/commissioning-guides/guide-topics](http://www.rcseng.ac.uk/healthcare-bodies/nscc/commissioning-guides/guide-topics)

# Peer Support & Service Review

- Sept – Dec 2014
- Half day visit
- Multi-professional review team
- Use of results of self assessment
- Feedback report
- Best practice
- Areas of support

**NHS**  
East Midlands  
Strategic Clinical Networks and Senate

XXXXXX Trust  
General Paediatric Surgery Network  
Peer Support and Service Review  
Time: 9.30 to 12.30am or 1.30 to 4.30pm  
Date

**AGENDA**

Review Team:  
GPS Network Clinical Lead  
Anaesthetic Representative  
Nurse Representative  
SCN Network Representative

External Consultant Paediatric Surgeon(s)  
Parent Representative  
Local CCG Commissioner(s)

| Time  | ITEM  | Responsibility/Lead by           |
|-------|---|----------------------------------|
| 9.30  | Introduction & Review Aims and Process - focus on Emergency Care  | Review Team                      |
| 9.45  | Walk the patient pathway which may include:<br>A&E<br>Admissions Unit<br>Ward<br>Theatre and Recovery Area<br>Discharge arrangements  | Trust Service Team               |
| 11.15 | Coffee  | Trust Service Team & Review Team |
| 11.30 | <ul style="list-style-type: none"> <li>Review evidence of self-assessment, activity data</li> <li>General discussion of achievements, issues and areas for development/support</li> <li>Plans for improvement and support required where appropriate</li> </ul> | Review Team                      |
| 12.20 | Next Steps  |                                  |

Confirmation of attendance and apologies to:  
Jayna Chaplin, Network Assistant, East Midlands Strategic Clinical Network  
Email: [jayna.chaplin@nhs.net](mailto:jayna.chaplin@nhs.net) | Telephone: 0116 295 7288

## Aim of the service assessment

- Provide assurance on the regional wide provision of general paediatric surgery
- Recognise and acknowledge progress in meeting the standards
- Identify current service delivery issues and challenges
- Identify any requirements for regional and Network support

## Service assessment process

- Overarching standards
- Emergency department standards
- Ward and in-patient area standards
- Theatre and recovery area standards
- Pain management



# Peer Support & Service Reviews..

- All centres welcoming and committed time for visits
- Staff open and enthusiastic
- Proud of work being done

## Lessons learnt....

- Takes time to organise
- Two visits a day very ambitious
- Evidence review
- Data not available
- End of visit round up
- Time to gather and review all visit information





| Issue   | Recommendation  | Action                     |
|---|---|----------------------------|
| 1. Lack of continuous, safe and sustainable 24/7 radiologist cover for children within the tertiary centres at the time of the reviews. | A local solution for the delivery of safe, sustainable 24/7 paediatric radiology should be considered as a matter of urgency which may include a networked arrangement. Consideration given to DGH transfer pathways depending on radiology provision and availability, so that transfers only occur where the essential support is available.  | Trusts and commissioners   |
| 2. HDU Transfer   | Consider a review of the paediatric HDU transfer arrangements across the East Midlands to ensure robust and timely pathways are in place.   | Commissioners              |
| 3. Maintaining sustainable elective care close to home  | Support the promotion of shared consultant appointments between the DGH's and the tertiary centres to enable local services to maintain care close to home.   | Trusts & commissioners     |
| 4. Variable evidence of mandatory training/CPD for medical staff  | Support for the development of training and CPD opportunities for existing surgeons and anaesthetists from across the area to work alongside paediatric surgeons and anaesthetists in the tertiary centres, by addressing barriers to governance arrangements with the use of the 'NHS Certificate of Fitness for Honorary Practice'. The process and recoding of the review of evidence for this competence and experience in the appraisal process could be strengthened and made more transparent.             | Trusts & GPS network       |
| 5. Challenges of recruiting and retaining paediatric nursing staff  | <ul style="list-style-type: none"> <li>• Develop a strategy to meet national nurse staffing recommendations</li> <li>• Working through the Children's Nurse Leaders group consider how the network can support the development and increased use of acuity and dependency tools to provide an evidence base for the provision of appropriate nurse staffing ratios.</li> <li>• Consider wider local implementation of the ANP role to enhance both service provision and the nursing career structure.</li> </ul> | HEEM, Trusts & GPS network |

| Issue  | Recommendation  | Action               |
|--|---|----------------------|
| 6. Non-medical staff training  | Employ a network approach to the development of training in specialist children's nursing and to the development and use of competency assessment documents for other staff who do not have child health training.  | GPS Network          |
| 7. Variable access to play specialist services   | Review play specialist services to ensure standards are met including supporting daytime emergencies  | Trusts               |
| 8. Use of different versions of PEWS tools   | Consider opportunities to harmonise PEWS (Paediatric Early Warning) tools currently in use, prior to the development and roll out of a national PEWS tool in order to support consistency of assessment particularly where transfer may be required.                    | GPS network          |
| 9. Variation in format quality and availability of information leaflets for parents and patients | Utilise the network to develop and agree standardised information leaflets for key procedures.  | GPS network          |
| 10. Local data quality and access  | Trusts should consider improvement in their ability to access, identified and agreed local data to allow monitoring of local activity volume, profiles and outcomes to support quality improvement via benchmarking, audit, clinical practice and consultant appraisal. | Trusts               |
| 11. Variable Child friendliness of theatre environments  | Action to improve receiving/recovery areas in theatres  | Trusts               |
| 12. Admission to non-paediatric wards  | Trusts consider local audits to ensure effective policies   | Trusts               |
| 13. Thresholds for emergency appendicectomy management of under5's                               | Agree a network policy around the emergency management of children under 5 years old, to provide a consistent approach across the geography to support sustainability of local services.  | Trusts & GPS network |



| Issue                              | Recommendation  | Action               |
|------------------------------------|---|----------------------|
| 14. Variable rates of circumcision | Review of the elective pathways to better understand local clinical practice and Identify rational for significant variation. | Trusts & GPS network |
| 15. Regional audit                 | Establish a regional audit programme through the GPS network to consider patient outcomes and experience                      | Trusts & GPS network |

## Next Steps

- Feedback from review visits
- Complete & publish commissioning guidance documents
- Review/revise existing standards
- Website with parent information
- Training Day 2016

