

**Royal College of Nursing
Paediatric Intensive Care Society
Nurses Managers Community**

**Notes of the Paediatric Intensive Care Nurse Managers meeting on 1st and 2nd October 2015
Great Ormond Street Hospital, London**

Present		
Members	Job Title	Trust
Louise Dewsbury (Chair)	Matron	Evelina London
Carolyn Webster (Deputy Chair)	Matron	Royal Brompton Hospital
Katie McCall	Modern Matron	RMCH
Clare Ryan	Modern Matron	RMCH
Eithne Polke	Retrieval Coordinator	CATS
Mark Clements	ANP	GOSH/CATS
Barbara Childs	Lead Nurse	GOSH
Sarah Santo	Lead Nurse	NWTS
Scott O'Brien	Modern Matron	St Mary's Hospital
Anita D'Sousa	Matron	St George's Hospital
William Booth	Matron	PICU Bristol Children's
Linda Kitchen	Sister	Oxford
Yvonne Heward	Lead Nurse	Birmingham Children's
Kim Tait	Nurse Manager	Birmingham Children's
Sharon Quigg	Band 7	Birmingham Children's
Sharron Frost	Lead Nurse	Leeds Children's
Heather Wardle	Matron	Leeds Children's
Angela Hughes	Lead Nurse	Sheffield Children's
Claire Harness	Clinical Service Manager	Sheffield Children's
Carol Purcell	Matron	Southampton General
Karen Starkie	Retrieval Coordinator	Evelina London / STRS
Mike Wise	Lead Nurse	GOSH
Suzanne Palmer	Lead Nurse	Embrace
Karen Perring	Lead Nurse	Yorks and Humber Network
Alison Greene	Lead Nurse	Royal London
Apologies		
Gillian Campbell	Sue Tickle	Claire Riddell
Angie Johnson	Suzanne Davies	Tina Freeman
Carmel Hunt	Diane Sanderson	Carol Stafford

Day 1		
No.	Item	Action
1	Apologies Apologies were received from the above members of the group.	
2	Minutes from last meeting The minutes of the previous meeting held on 16 th and 17 th April 2015 at the Great North Children's Hospital, Newcastle upon Tyne were accepted and approved as a true and accurate record. Many thanks to CR for looking after us all so well.	
3	Position of Deputy Chair offered to the group and CW welcomed as new Deputy Chair.	
4	Professional Development 1. Mind the Gap – YH Presented the Mind the Gap Study – Exploring the needs of early career nurses	

	<p>and midwives in the workplace by Health Education England and Birmingham and Solihull Local Education and Training Council. The report is part of the 'Every Student Counts' project in response to regional concerns about the recruitment and retention of nurses and midwives, and in particular concerns over a high turnover rate for band 5 nurses. The report identifies the four generational differences amongst healthcare professionals. One difference is the change from staff being career motivated and company loyal to the younger generation being career motivated only. It highlights that employers need to think about how to engage and work them to ensure that newly qualified staff (of any age) are supported and retained.</p> <p>WB asked if a copy of the report could be obtained and circulated to the group.</p> <p>2. Medical Ethics – Dr David Inwald</p> <p>Presented a very interesting and useful session on 'Ethics and Law in Paediatrics' which included the key issues of non-linear growth in mental capacity; dilemmas and decision making processes and consent.</p>	<p>LD to obtain link to presentation and circulate to group</p>
5	<p>PICS Standards</p> <p>YH updated the group that the first draft standards was circulated in July and had received a considerable amount of feedback. Work reviewing the draft and feedback would commence on 2nd October and expect them to be published early next year.</p> <p>Nurse establishment figures were discussed and agreed a small group was required to review the 2010 section for calculating nursing establishments.</p> <p>YH informed the group that as there is little evidence to support our rationale for 7.01FTE per bed. Through PICS, Kevin Morris, Kerry Jones and YH hope to lead a pilot time and motion study focusing on all nursing activities provided across the different levels of care.</p> <p>Critical Care Nursing Alliance are also starting a similar study which highlights a need for an awareness of what everyone is doing and that the group can offer support for any other work or projects being considered or undertaken.</p>	<p>WB/CP/BC to review and circulate to group by end Nov 15</p>
Day 2		
6	<p>Terms of Reference - LD</p> <p>The group's draft Terms of Reference were discussed and amendments agreed. It was agreed that they will be reviewed two yearly.</p>	<p>LD to amend and circulate for further comment.</p>
7	<p>Group Historical Affiliations – WB</p> <p>The group was set up approximately 20 years ago by WB as Bristol was rapidly expanding</p>	

	<p>and wanted to profile themselves to a similar unit. Identified they were facing similar issues so invited people from other PICUs to join and benefit from sharing experiences, peer support and networking. For professional credibility the group joined the RCN with Fiona Smith welcoming them to the Paed/NICU group. Benefits from joining with the RCN include RCN Nurse advisor link group, use of their facilities, access to funding and secretarial support.</p> <p>Approximately 4 years ago the group became affiliated to PICS who are still keen to have input from the group.</p> <p>It was recognised that the group had achieved a lot over the years including contributing to key documents e.g. Framework for the Future, PICS standards, Advanced Nurse Practitioner</p> <p>Discussed the RCN affiliation and decided it would be timely for LD and CW to meet with them.</p> <p>SO'B explained that himself and CP had recently attended a HRG meeting exploring linking HRG to PICANet. SO'B asked if possible to link in more with Commissioners. SS sits on CRG together with an RCN representative. SS suggested it would be beneficial if the rationale for the inclusion of an RCN representative be clarified.</p>	<p>LD to contact the RCN</p> <p>SO'B to send Commissioner details to LD. LD to contact Kevin Morris. CP to send minutes to LD.</p>
8	<p>PICS Website – LD</p> <p>LD fed back that she had met with PICS and discussed how to optimise working together. They reaffirmed that a Nurse Manager position on the Committee would have to be attained through a member of the group being elected into one of the 'Nurse' positions. Group agreed with LD that we nominate and support a group member's application at the next election.</p> <p>PICS ask us to encourage nursing membership through promoting the Society and its benefits to our teams.</p> <p>Discussion took place regarding developing our subgroup web page on PICS' site. Agreed that page should contain Chair and Deputy Chair contact details, Terms of Reference, Minutes, PIC unit profiles, Recruitment contact details, any workstreams and research.</p> <p>MC asked if anyone heavily involved with ESPNIC. Joe Brierly is Chair so would be good opportunity to become more involved and raise our profile.</p>	<p>MW to develop and circulate template, to capture details of unit profiles for website</p> <p>SO'B to investigate</p>
9	<p>Invasive Monitoring</p> <p>SS referred to an anaesthetic paper re: Standards for fluids storage which followed an incident where dextrose was infused via an arterial line. SS asked if anyone was writing guidelines or protocols for management of arterial line infusions. WB had written a protocol for arterial line management which will be audited. Discussion of specific competencies for this and questioned whether the RCN will be publishing any guidance.</p>	<p>MC to contact David Quail, RCN and feedback.</p>

	LD also reported a significant reduction in errors when making up IV infusions by introducing an additional double check of the pump settings which is countersigned on the prescription chart.	
10	<p>Winter Pressures Money</p> <p>1. Outreach CP delivered a presentation re: utilisation of winter pressures money to expand their outreach team to provide 12hr cover six days a week and purchase new equipment. Activities undertaken by the team had more than doubled and received positive feedback, including CQC recognition as 'well done'. Plan had been to re-recruit previously seconded nurses this winter if funding available.</p> <p>2. Discharge Co-ordinator HW discussed how they created a Discharge Co-ordinator role and spoke about the scope of the role. Whilst the role had brought about the desired improved patient flow, difficulties had been experienced due to pre-existing teams needing to gain clarity about the role and how it compliments existing roles.</p> <p>Generated discussion of repatriation processes and SO'B informed the group that there is currently a Pan London review as to how to co-ordinate discharges from PICU to local hospitals. HW advised that they had entered into agreements with their local hospitals.</p> <p>LD reflected on both presentations and suggested the meeting should have a set Agenda item where new roles could be discussed/ presented. Agreed that Family Care Sister role and Managing parental expectations (including behavioural contracts) will be presented/ discussed at next meeting.</p>	<p>HW to send SO'B agreement templates.</p> <p>AH and KT to present at next meeting</p>
11	<p>Updates</p> <p>LD provided the group with an update regarding NMC revalidation, including criteria needing to be fulfilled to enable nurses to revalidate. LD advised the following steps were key to success:-</p> <ul style="list-style-type: none"> - Start getting people ready early - Encourage staff to register online with the NMC - Be mindful of the risk of clinical hours to those who have two periods of maternity leave or multiple extended absences within one three year revalidation period <p>Discussion concerning myths which had arisen about revalidation. MC is attending Revalidation Summit in November which will include clarifying the signing off process for nurses without an RN manager.</p> <p>LD also reminded the group that as of November 1st the anyone whose NMC registration lapses will no longer have a 'grace period' to renew. They will have to apply to re-join the register which can take 6-8 weeks.</p> <p>CQC</p> <p>A number of Trusts have now had their inspections and the group shared their experiences. Areas which were closely inspected and/or advised to improve on</p>	

	<p>included:-</p> <ul style="list-style-type: none"> - Being able to evidence pregnancy tests in menstruating girls prior to radiological exams - Teenage facilities - PEWS escalation - Equipment – ensuring enough relevant for paediatrics - Facilities fit for purpose - Medical notes - Risk management - Culture - Advanced roles - Fridge audits - End of Life Care <p>Suggested ideas to prepare for visits include:</p> <ul style="list-style-type: none"> - Undertaking mock CQC visits - Compiling and collating evidence into a folder so readily accessible on the day/during interviews - Encourage the team that it is a positive experience and the inspectors are quite amenable. - PICS are keen to encourage Peer reviews of each other's services - Raising awareness in teams of processes undertaken and how outcomes are fed back to the teams e.g. clinical incidents <p>Draft HDU Standards/Guidelines</p> <p>SO'B enquired if the group had seen the draft HDU Standards/Guidelines. Copies were circulated with some discussion and a request to look at and provide feedback to SO'B</p>	<p>All to feedback to SO'B. KT to email LD work conducted in West Midlands</p>
12	<p>PICANET Feedback – CW</p> <p>Fed back that we had received a warm welcome from PICANet Steering Group and that the next meeting was on 28th January 2016. Request from group to learn more about the family satisfaction survey and mechanisms for feedback.</p> <p>The next Annual PICANet Meeting is on 4th November at RCN Headquarters, London.</p>	<p>CW to raise at next Steering Group Meeting</p>
13	<p>AOB</p> <ul style="list-style-type: none"> • KMc was thanked for her very active participation on this group, and wished well in her new role • CH agreed to present work from Sheffield re parent feedback at next meeting • Thanks were expressed to LD for facilitating an interesting and informative meeting. 	<p>CH to present in April</p>
14	<p>EP and CB were thanked for hosting the group in London, and for the work they had undertaken at short notice to ensure that the meeting was effective and enjoyable.</p>	
15	<p>Dates and venue of next meeting: 21st and 22nd April 2016, venue TBC</p>	<p>SS to ask Liverpool.</p>

Hosts for recent meetings:

	Spring	Autumn
2012	Sheffield	GOSH
2013	Birmingham	Evelina
2014	Leeds	Oxford
2015	Newcastle	GOSH
2016	Liverpool	Bristol