



PICS ATG Meeting
PICS Conference - Southampton
Media Centre
Botley Road,
Southampton,
Hampshire
SO30 3XH

10.00hrs to 16.00hrs

Monday 3 October 2016

Item		Action
1.0	Welcome & Coffee	
2.0	Attendance/apologies (recorded see attached)	Gareth Jones
2.1	Minutes of last meeting in at STRS ratified and items carried forward.	& Mark Clement
3.0	PICS Air Transport Standards Now uploaded onto PICS ATG web-page as standalone standard	
4.0	PICANET Update	
4.1	CQIN (PIC 14) – The CRG have been requested by EP, to review definition - outstanding	Ram
4.2	Extra fields to be added to PICANET data to include LMA and High Flow Nasal Oxygen Therapy – will need formal submission to PICANET by ATG.	
4.3	It is felt that the PICANET submission does not accurately reflect planned/unplanned transports - currently taken from PIMS Data. Discussion amongst group agreed that transports should be classified as UNPLANNED or PLANNED	All

4.4	Request for High Flow Nasal Oxygen to be added to PIMS	
4.5	<p>DEPICT Study</p> <p>Update from Ram on proposal – looking to include dataset from 2014 & 2015. From England and Wales.</p> <p>Paper to be written on behalf of ATG</p> <p>Volunteers for a writing committee requested</p>	Ram
4.6	Discussion regarding what to submit on PICANET when a call is received where the child is in cardiopulmonary arrest. General agreement that this should be ‘advice’ if discussion/support of local team about withdrawal of support etc. and not ‘died before team arrived’	All
4.7	<p>GAMUT</p> <p>PICANET keen to collaborate if data can be extrapolated from PICANET set. PICANET can be requested by individual transport services, to supply a GAMUT report and it is up to the individual teams as to whether they choose to submit to GAMUT. PICANET would require a collective agreement from the transport teams.</p> <p>Action:</p> <p>4.2 Ram to draft a document requesting changes and circulate to group for approval</p> <p>4.5 Volunteers please...</p> <p>4.7 Ram to check matching of PICANET and GAMUT data sets and report to group before collective agreement sent from ATG</p>	<p>Ram & Steve Hancock</p> <p>Ram</p> <p>ALL</p> <p>Ram</p>
5.0	<p>PICS ATG Aeromedical Tasking Criteria</p> <p>Steve has sent initial draft to Shelley before wider circulation to group for comments.</p> <p>Initial discussions amongst group identified the need for a robust feedback mechanism among transport groups for the ‘actual time</p>	Steve Hancock

	<p>saving’ on aeromedical transfers – some suggestion that this could form part of feedback to the ATG as well as within the M&M/Risk structure of individual teams.</p> <p>Consensus and further discussion required for ‘hospital at least 1 hour away but urgency justifies use of lights and sirens’</p> <p>Discussion among group about identifying hospitals in their region that would be considered for flight transfers to include timing, landing facilities etc.</p> <p>Action:</p> <p>5.0 Draft criteria to be circulated to ATG for comment and added to agenda for next meeting.</p>	<p>Steve Hancock</p>
<p>6.0</p>	<p>TCAA Update</p> <p>Annual Review Meeting held on 16th September 2016</p> <p>Planned replacement of aircraft with Augusta 169’s. Current schedule is for 1st aircraft to be delivered to Coventry by February 2017. The 2nd aircraft by July 2017.</p> <p>Once both aircraft available they will be positioned one in the ‘North’ and one in the ‘South’. Exact locations still being worked up.</p> <p>Second neonatal team now working with TCAA.</p> <p>Education group to be established</p> <p>Planned for longer flying hours and 7 days a week operation.</p>	<p>Steve Hancock</p>
<p>7.0</p>	<p>Current Fixed Wing Providers</p> <p>There was an agreement among the group that representatives would feed back their review of the main fixed wing providers in England. This was to review fleet, governance and standards compliance – it was also stressed that each clinical transport group would need to establish their own ‘relationship’ with the air provider to ensure understanding, service provision and process.</p>	<p>Mark Clement & Ian Braithwaite</p>

<p>7.1</p> <p>7.2</p>	<p>IAS Medical: (Steve Hancock) (Original notes – not minutes)</p> <p>IAS Medical are based at Durham Tees Valley Airport with a satellite operating base at East Midlands</p> <p>Two KingAir 200 aircraft with a Lifeport medical configuration and 3/4 seats</p> <p>AOC no.GB 2392</p> <p>Operate medical flights with two type rated pilots</p> <p>One aircraft has a satellite telephone</p> <p>IAS Medical is willing to provide Air Ambulance aircraft to any NHS transport team but would require evidence that the proposed NHS team members had received appropriate training in aeromedical clinical considerations together with training in the fixed wing environment and familiarisation in the use of Lifeport equipment and loading systems. IAS Medical are willing to provide both initial and refresher training to any team upon request.</p> <p>As part of a duty of care to the patient, medical team and any passenger carried in the event that a NHS paediatric team did not have the appropriately medically trained staff, IAS Medical would encourage those teams to seek support from Embrace or NECTAR to facilitate any paediatric transfer either nationally or internationally.</p> <p>Any equipment taken on board the aircraft must have been approved by IAS in advance to ensure regulatory compliance</p> <p>IAS Medical have a selection of medical equipment available, however in the event that a NHS clinician is not trained in the use of this specific equipment an IAS clinician must accompany the flight</p>	<p>Steve Hancock</p>
<p>7.3</p>	<p>Capital Air Ambulance: (Mark Clement)</p> <p>Part of the Rigby Group which allows growth of service but</p>	<p>Mark Clement</p>

<p>7.4</p>	<p>function independently. Fleet include Beechcraft, KingAir and Lear Jets Terry Martin is Medical Lead Main base at Exeter Airport and now additional aircraft at Coventry Airport Will provide multi crew pilots if requested but do not have this as a standard. Integrated Air Safety/Safety Deficiency Reporting System with evidence of incidences investigated. EURAMI accredited and PICS Air Standards Compliant Will offer environmental training on aircraft for transport teams – insist on Capital nurse escort for familiarisation, if the transport team have not undergone training with them. Medical/nursing training and clinical equipment compliance not reviewed as transport teams likely to use their own</p> <p>Air Alliance Medflight: (Anneke Gyles) Meetings have been held between KIDS and air alliance – based at Birmingham Airport. Reported to be ready to undertake paediatric transfers. More clarity needed regarding single/multi-crew pilots, standards compliance and governance.</p>	<p>Anneke Gyles</p>
<p>8.0</p>	<p>Learning from Each Other Excellent case presentation by Gareth Jones regarding pathway for children requiring respiratory ECMO. Discussion regarding whether children should be transferred to Lead/Cardiac ECMO centres for assessment and if required cannulated prior transferring? Some confusion regarding which centres are commissioned as respiratory ECMO centres and which are ‘surge’ centres. Need to review the respiratory ECMO referral/transport pathway. Action: Steve Hancock who attends the ECMO meeting with forward</p>	<p>Gareth Jones</p>

	<p>request from ATG to review referral/transport pathway and feed back to the group</p>	<p>Steve Hancock</p>
<p>8.0</p>	<p>PCC Transport Passport</p> <p>Please see attached presentation</p> <p>Survey Monkey sent to nurses, consultants, registrars and fellows requesting feedback on the passport – usefulness, challenges & suggestions for change.</p> <p>4 broad themes from the survey were discussed in the group:</p> <ul style="list-style-type: none"> - Need for an electronic version or App - PICM ISAC keen to embed the competencies within their own but do not have capacity to assist with making electronic or linking into current competencies. - Should there be a different passport for nurses and doctors? - Should there be a shorten version for non-PIC trainee’s as seen onerous if only a short time with the service. - PIC trainees are focused on completing their PICM ISAC competencies <p>Action:</p> <p>Working party to be re-established to represent a wider user group; ANP’s, trainee ANP’s, retrieval nurses and both PIC and non-PIC medical trainees.</p> <p>New volunteers so far:</p> <p>Aravind Kashyap</p> <p>Rochelle Gully</p> <p>Caroline Hobden</p> <p>Emma Bull</p>	<p>Kate Parkin</p> <p>All</p> <p>Kate Parkins</p>

<p>9.0</p>	<p>Transport Conference</p> <p>Update from Will Marriage</p> <p>Figures indicate that would need approx. 80 people to make it financially viable.</p> <p>Example timetable presented which was a combination of short talks, debates and keynote speeches</p> <p>All keen to support and link in with mid-year ATG meeting (WATCH)</p> <p>Action:</p> <p>Will to look at dates outside of school holidays and ESPNIC and forward to group</p> <p>Organisers as previously agreed (Will Marriage, Eithne Polke, Anneke Gyles, Steve Hancock, Sanjay Revanna, Gareth Jones & Lynn Scott. Dusan Raffaj to be added.</p>	<p>Will Marriage</p> <p>Will Marriage</p>
<p>10.0</p>	<p>Any Other Business</p> <p>Aravind raised an issue about the poor condition of a child transported (internationally) by a private transfer teams and what you can do about it?</p> <p>Difficult to influence how insurance companies choose their teams but PICU's, as the accepting destination, should be encouraged to raise any issues with the insurance company/referrer and as transport teams we should be promoting safe standards.</p>	<p>All</p>
<p>11.0</p>	<p>Items for Next Meeting</p> <ol style="list-style-type: none"> 1) Transport Passport – update 2) NECTAR presentation 3) Fixed Wing flight data – each team 4) Review of Tasking Document 5) Case Presentation – TBA 6) Feedback from ECMO meeting re respiratory patient pathway 	<p>All</p>

	<p>7) Case review of the SORT flight (problems with identifying wheels down) – governance/review between flight provider and service user.</p>	
	<p>Thank you to SORT for hosting the day – great views and catering raised to the next level with multiple cakes and a very impressive ‘Ambulance Cake’</p> <p>Over to you Nectar.....</p>	
	<p>Next Meeting Nectar</p> <p>Date to be confirmed (March 2017)</p>	<p>Eithne Polke</p>