

LSEBN Network Board: Wednesday 27th March 2024

Attendance:

David Barnes – St Andrews (Chair and Clinical Lead)

Joanne Lloyd – Network Advisor

Vicky Dudman – Network Lead Therapies

Alexandra Murray – Stoke Mandeville

Sara Atkins – John Radcliffe Hospital

Gail Murray – NHSE East of England

Lisa Williams – Network Lead Psychosocial Care

Nicole Lee – Network Lead Nurse

Joanne Atkins – Chelsea & Westminster

Paul Drake – Queen Victoria Hospital

Pete Siggers – Network Manager

NOTES

1 Chair's introduction and apologies: DB welcomed everyone to the meeting. This is the first network Board meeting to be held in-person since before the Covid pandemic. PD joined remotely on Teams. Apologies have been received from:

- *Lorraine Sime – NHSE South East*
- *Victoria Osborne-Smith – NHSE London*
- *Konstantinos Tsormpatzidis – NHSE London*
- *Osian Powell – Host Trust Manager C&W*
- *Joanne Pope – NHSE East of England*
- *Sadaf Dhalabhoj – NHSE South East*
- *Kathy Brennan – NHSE London*

2 Notes of the previous meeting

- The notes of the Network Board meeting held in January 2024 were circulated. PS spoke briefly about topics included in the notes, saying that a number of issues were included in today's agenda. A number of matters arising were to be discussed.

3 Any matters arising

- Annual Report 2022-23; PS noted that the final elements of the previous year's annual report has now been completed. JA and NL agreed that the C&W section was ready for publication. PS agreed to publish the document on the LSEBN website at the earliest opportunity.
- Peer Review; PS explained that as an action from the previous meeting, a letter had been sent to all burn service Trust CE's and Medical Directors, describing the concerns expressed at the network meetings about the Quality Assurance peer review final reports. PS said that this action draws a line under the 2022 Review and with the Network Self-Assessment process and expected national agreement on Peer Review, the network and services should think positively about the future arrangements.
- QVH Thresholds; PD spoke about an improvement in staffing and access to the ICU at Queen Victoria. As a result, the service can now return to an upper threshold limit of 40%TBSA. As before, this excludes patients with complex comorbidities, including the need for renal support. DB asked if this had commissioner approval, and PD said that he was not aware of any formal contact with the NHSE SE commissioning team.
- Update for TRIPS; PD noted that the proposed upgrading of the TRIPS system has now received formal approval by the Trust and the project has started. It was noted that other systems are available and that it might be necessary to conduct a formal tender process, at some point in the future.

4 Burn Service Update Issues related to activity, performance and staffing:

- 4.1 Stoke Mandeville: AM gave a short briefing on issues for SMH, noting problems with the thermo-regulated rooms on the burns unit. This is now on the Trust risk-register and sits alongside the planned upgrade of the hospital theatre block and the potential impact on activity, particularly for patients with large burns.

- 4.2 Chelsea & Westminster: JA noted that the work on the thermos regulated rooms was now complete and was working well. Staffing at the moment is ok. The service continues to be constrained by the “footprint” at C&W with capacity issues caused by space in the ICU/HDU.t C&W with capacity issues caused by space in the ICU/HDU.NL spoke about the ongoing clinical problems around safety in defibrillation with use of PADs and paddles.
- 4.3 St Andrews: DB noted that bed capacity for ICU and HDU is ok at the moment. The service is experiencing pressure on ward bed capacity and recently had 8 patients as outliers from the main burns ward. The main issue raised for St Andrews is the planned maintenance work on the burns ICU. DB said that the planned work is likely to have a longer time frame than initially expected and that the St Andrews Burns ICU would be closed for around 10 weeks, beginning around July 2024. The completed works will make the service more sustainable for the future, particularly for the management of MDROs in burns. It was agreed that further discussions should be conducted, to make plans for as many adult patients to be retained within the network. This might include M&SE burns staff working in other locations, if this would help keep patients within network. Children with large and complex injuries will have to be transferred out of network, whilst the St Andrews ICU is closed.
- 4.4 QVH: In addition to the issues raised earlier in the meeting, PD noted that a new burns Matron has been appointed at QVH (Elouise Lucas) and Simon Booth had also returned to the Trust in a clinical capacity.

5 **LSEBN Performance (Quarter 3 2023-2024)**

PS spoke briefly about each of the following reports.

- 5.1 Issues Log / Network Risk Register: This report provides a record of issues noted as “risk” by the Burns Network. The actual risk lies with the burns provider Trust but consequences fall into the wider network. PS noted that a number of issues have been removed this year, and the topics remaining are scored low or moderate. Two issues will be part of the network work plan for 2024-2025.
- 5.2 Quality Dashboard: This report is taken from the analysis provided by IBID and constitutes the commissioner report on outcomes (SSQD). Service leads have previously expressed concerns about the quality of the data reports and this was again a theme of the discussion today. PS noted that this quarter looks particularly odd, with a number of new anomalies. PS also reported that a review of the SSQD metrics was expected during 2024-25, as part of the national work plan. This work should include a review of the way metrics are calculated by IBID. It was also noted that the SSQD figures are part of a new commissioner dashboard, although this is not yet available for networks and services to access.
- 5.3 Refusals / Referrals turned away: This report provides analysis of adult and paediatric patients “refused” due to bed or staffing availability. The report shows that the vast majority of adult patients refused are transferred to a burn service within the network.
- 5.4 Pathways DOS Sit-Rep Bed Availability & Occupancy: PS explained that this report is derived from figures provided by burn services in the DOS Pathways system, and uploaded to the new National Commissioning Data Repository (NCDR). PS reported that the figures are provided as a “download” file at the end of each month, but the NCDR team have said that this will cease at the end of March 2024. Future reports for the network will need to utilise the on-line NCDR system. It was agreed that the appointment of a network data analyst was a key issue for the network team in 2024.

❖ **Actions:**

PS to contact the NCDR team and ask for the download report to continue to be made available in 2024-2025.

6 Network Team Budget

- 6.1 Quarterly Report and Forecast Outturn: PS provided a short report indicating the projected outturn for the burn network team budget. The projection remains as an underspend on the annual budget of around £28k. In addition, the annual budget excludes amounts carried forward from previous years, equating to a further £34k and a total underspend of circa £62k.
- 6.2 Proposals for utilisation of monies carried forward into 2024: Due to the projected underspend, the January 2024 Network Board had agreed in principle, to utilise the underspend on two large non-recurring projects. These were discussed at a special “finance” meeting later in January and short “business cases” have been produced for NHSE London. The two projects are:
- Burns Outreach Bus, providing a flexible mobile burn service that can outreach closer to people’s homes and provide a clean and safe environment for patients and staff.
 - Major Incident Exercise, using an immersive SIM style of training.

Both projects were welcomed by the Board and unanimously approved. The proposed projects will now need to go to NHSE London, for final approval.

- ❖ **Action:**
PS to send the proforma documents, outlining the proposals, to KT at NHSE London.

7 Quality Assurance Self-Assessment 2024

PS noted that all services had provided a submission for the self-assessment against the new (2023) BBA Standards. It was agreed that these should be seen as a “first draft” and further work was necessary on ensuring that the assessments were correct and had evidence to indicate compliance. It was noted that the summary report allowed services to see everyone’s results and this should enable to services who are compliant in any particular area, to assist colleagues who are non-compliant in that particular area. This issue should return to the Board agenda, at the next meeting in June 2024.

- ❖ **Action:**
PS to follow-up the summary report, with a communication to services and commissioners about a “second” version of the self-assessment documents.

8 LSEBN Work Programme:

PS had provided two reports for the meeting, related to progress on the 2023-2024 work plan and the proposed Work Plan for 2024-2025. The proposed work plan for the coming year was agreed in principle, with a focus on standards & outcomes, and a comprehensive review of all network clinical guidelines.

Date of next ODN Board meeting(s)

Confirmed dates

- ❖ **Thursday 27 June 2024, 10.00 to 12.30 (MS Teams)**