PICS ATG Meeting
“Medicine” (Top of the Escalators Level 2)
New Victoria Wing.
Great North Children’s Hospital
Newcastle NE1 4LP
11.30hrs to 16.30hrs

Wednesday 1st October 2014

Present:-

Padmanabhan Ramnarayan – CATS (pm)  Eavan Crapnell - STRS
Kathryn Claydon Smith NWTS  Eithne Polke – Chair
Lynda Patilla – Newcastle (pm)  Mary Montgomery – KIDS
Mark Clement – CATS  Jackie Somerfield – KIDS
Lynn Scott – Newcastle  Steve Hancock – Embrace
Sarah Santo – NWTS  Andrew Nyman – STRS
Kate Parkins – NWTS  Clare Harness – Embrace
Jo Palmer – SORT  Abigail Hill – Nottingham

Item | Action
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1 | Apologies
1.1 | Mark Terris (Belfast)  Chris Walker (NWTS)
   | David Rowney (Scotland)  Shelley Riphagen (STRS)
   | Anne Mc Cabe (R of Ireland)  Ann Bowden (R of Ireland)
   | Lynn Shields (CATS)  Malcolm Gajraj (Cardiff)
   | Daniel Lutman (CATS)  Gareth Jones (SORT)
   | Raghu Ramaiah (Leicester)  Sandra Stark (Glasgow)
   | Dennis Kerr (Edinburgh)  Raghu Ramaiah (Leicester)
   | Iain Johnstone (Newcastle)
2.0 **Introductions & contact details**

2.1 Eithne Polke (chair) welcomed attendees to the meeting. Introductions were made. Contact details updated.

3.0 **Minutes of the last meeting**

3.1 The minutes of the meeting held on 4th July 2014 were agreed as true and accurate record.

3.2 **Matters arising**

Winter Pressures, all services have put bids in for additional funding; none agreed or signed off as yet. National teleconference to commence Monday 3 November. Jo Palmer reported that SORT are “top slicing” to support the setting up of an ODN in their region

Discussion on repatriation, who does it and who is funded for it. This may become part of the PIC Transport Service Specification in the future.

4.0 **Transport Competency Document**

4.1 Kate Perkins presented the final draft document to the group which once ratified will be our “version 1” to be taken to ICTPICM. Further detailed discussion and agreement reached with the following changes and additions:

4.2 **Changes agreed by the group:**

- Again use of retrieval to be removed from document and PCC transport to be used instead

**Discussion on:**

- Additional competencies which have been added (RESUS/Burns/Flight/communication/Human factors/safeguarding.
- Integration of a number of competencies agreed.
- Maintaining competency, agreed on how this can be measured by each service and outlined in the competency document.

Document to be amended to reflect the overall discussion of the group with a final draft to be collated by Kate et al and go to the ICTPICM. (attached)

5.0 **Trauma Network Presentation**

Dr Jackie Gregson (ED consultant at Wansbeck) Chair of the Trauma Networks Clinical Advisory Group for the North east.

Post presentation discussion on the challenges faced re secondary transfer if arrives in A&E not designated MTC.
6.0 Workstreams 1

Discussion on a possible section 28 (prevention of future deaths)
This is where the Coroner has a legal power and duty to write a report following an inquest if it appears there is a risk of other deaths occurring in similar circumstances.
Jayne was asked by the coroner to consider reviewing the standardisation of patient retrieval to PICU from other hospitals. The child was under a year old and it seems unlikely the retrieval issue directly caused the death. However the coroner was concerned about the circumstances of apparent breakdown of communication between the referring hospital and the receiving PICU.
There was suggestion that the ED department with the child made several calls to the PICU but the child was not prioritised for transfer.
As part of his investigation the coroner was sent a simple A4 document from one of the PICUs that he felt could be replicated country-wide to improve referral appropriateness, prioritisation and clinical handover, ‘rather like a discharge’.

From there she obviously wanted clinical views as to whether this was an issue for some, whether it had been tackled by others and whether a national discussion had been had.

Local referral pathways discussed
Commonalities discussed regarding referral information.

7.0 Feedback from

7.1 PICS Council
- Discussion around the Surge report and the data to support this.
- Intensive Care
- Transport Competency document
- Keen for benchmarking of services as a next step (to aid with securing funding and resourcing all services adequately) as well as sharing good practice.
- PICS standards up for review and will require input from the group.

Eithne to email Kevin Morris to inform him that ATG have a sub group set up to lead on the transport element of the standards.

Cardiac Safe and Sustainable
EP represented the ATG and briefly updated on developments so far
- Draft standards document written that encompasses the whole care pathway of those with congenital heart disease, “Cradle to Grave” are out for consultation
### Aeromedical Group update

Steve Hancock provided an update from the Paediatric and Perinatal Air Transport Group

- David Rowney would like to step down as chair of the aeromedical transport group. Steve Hancock will seek clarity from Peter Wilson on whether this sub group should continue and on replacing the chair.

*Our thanks to David for all his help over the last couple of years in guiding this group and attempting to take this piece of work forward.*

- CRG groups PIC and NIC have no appetite for taking on this element of service delivery as aspects of it are already covered within specialist commissioning. The challenge will be to engage the commissioners
- Revision and updating of the previous air transport standards is on the agenda and needs to be taken forward by the sub group
- Sharing critical incidents with the ATG (very important)
- Data collection dataset to be sent by Steve out to all the services and collated for the next ATG meeting in March 2015 (this data is owned by the group)

### PICANet

**Report Due to be published:** Ram/Kathryn

- New dataset has gone live changes will probably show from September 2014.
- A query regarding how to code the transport team has now been resolved with the new data set going live
- Referral/Refusal by PICU to start collecting data from January 2015 by PICU Transport teams.
- Referral to decision to retrieve clock will only start when accepted by PIC for transfer

### ICICTPICM (September 2014 meeting)

Kate Parkins updated the group;

The competency document was discussed again at the educational supervisors meeting in September.

There it had been agreed that it would be the basis for the RCPCH PICM curriculum transport section which we as a working group of PICS ATG would then review & update to match the agreed competency document.

The educational supervisors & ICICTPICM committee were eager that this was then used for the PICM grid trainees that started in August/September 2014 (as a pilot group) but it should only be released for use once the PICS ATG had ratified the document.

- Discussion on rotations through transport 6 weeks in not an acceptable learning block.
- Where these blocks of training occur has its challenges and it is important that there is consensus on when they rotate so that the experience is useful to them.
7.5 **Other updates from ICTPICM meeting**
New HDU specialist registrar training programme established

**National Tracheostomy Group Update**
The national algorithm is now out in circulation

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8.0 **Work Streams**
Sharing new/best practice in transport

8.1 **Discussion on use of optiflow in the transport environment**

*Embrace* have used it quite regularly transferred ~ 200 neonates on it so far with no concerns

*KIDS* have used it for cardiac failure and asthma cases

*NWTS* Are undertaking a pilot study on high flow in asthmatics

Challenges are gas flow and the requirement for air cylinders as well.

Longer distances journeys are definite challenge

Requires humidification tank fill only to 100mls

Must remain lower than the patient

Positives are that it seems to be well tolerated over CPAP

Discussion on the Brisbane paper.
Discussion on optiflow versus CPAP (no consensus)

Discussion on PICANet undertaking a national review of CPAP versus optiflow.
Questionnaire gone out to all the DGH’s

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9.0 **Future Work Streams**

PICS Transport Standards Revision

Have not yet had their first meeting/teleconference, this is to be taken forward as a priority.
This will be done in line with the proposed “benchmarking” work that we as a group wish to undertake.

Draft for discussion at next meeting in March

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*Standards Group*
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<tr>
<th>9.1</th>
<th>Nitric Oxide Systems for Transport to be moved to the next meeting as our equipment topic for discussion</th>
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<tbody>
<tr>
<td>10.0</td>
<td>ANY OTHER BUSINESS</td>
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| 10.1 | Incident forms  
Nothing to report across the services |
| 10.2 | New ATG Logo  
We live in hope! Aim for possible samples for next meeting EP to email ram and Will. |
| 10.3 | Operational Delivery Networks  
Still not established in all regions as are funded through “top slicing”  
Discussion on the successful collaboration that happens in the West Midlands which was established well over 15 years ago and delivers on key areas such as review of paediatric services in the wider DGH community etc.  
Suggestion that we should someone from the West Midlands to talk about the West Midlands Experience. EP to discuss with MM re who to invite as PICS is to be held in Birmingham next year |
| 10.4 | Repatriation Responsibility (SH)  
STRS funded for repatriation  
CATS PICU - PICU  
Embrace parent resides unit from a neonatal perspective  
KIDS PICU to PICU  
NWTS PICU-PICU |
| 10.5 | Tissue Viability (SS)  
What are people doing on transport  
And whether the scoring should start on transport (To be taken to next meeting) |
| 10.6 | **DATE AND TIME OF NEXT MEETING**  
Nottingham 12th March 2015 |