

Tue. 30. June. 2016.

Tc. DM. Dave S. Julie F. Jo Daries. Ren. IH. Jim McC.
Steve B. M. Blodi. Lynn T. Ak. LB. Sue H. SPc. Sara Bright

Outlines from Tc. USHA. RAJ.

Unexplained increase in deaths.

In-depth med. reviews failed to highlight them.

Commissioned compreh. review - ~~where~~

Close to admissions - defined level of care

- model of care to be agreed

Implications:-

Spoke to CQC. - agreed to our actions.

↳ actions proportionate - fair + balance of.

↳ asked Q's. decision making,
staffing, environmental.

IH. Review - medical + nursing.

Timing - urgent. Had to be in 2 wks?

Review can be done in August '16

2 Neonatologists

2 Nurses.

1 Law.

↳ Immediate feedback.

Full report 2/3 wks.

College draft → proposal this PM.

IH. to draft TOR, visits + IUs.

↳ pulling data to feed into review.

Tc keen to go on but qualitv → Proportionate.

Reasonable

↳ Level of care -

Assumed not safe. at present.

Steve B. Went back a step.

Does not matter what level with concerns

about a member of staff!

Can reduce cot. Hour. gestation.

But still not safe bc of staffing.

Ravi. Starting point, what is safe?

Reduce service BUT staff member not addressed

Discussed going to Police & uck. impact of an
Review timing delay (AUG) investigation

Tc. Clear set of standards of level 1 - consequences?

Steve B. Only thing as an issue is gestation:

March held from 32 weeks

Take everything above 34 wks.

Lo D. Difficulty - when time unknown

Tc. You need to explain. We need to explain to public.

Nationally there are level 1's.

Jrah. High risk pregnancies!

Jim Mc. Suspicious in last 18 mths.

Member of staff - astound.

Spc. Challenge!

Jim Mc. 2 months before report/renew.

Not raised with the member of staff.

Positive/negative result → back to same position.

o/s. spectrum norm for Gunters.

Tc. Level 1 units.

Work out plan & how we comm's out

to get medical units.

USHA. Plan it carefully

Jim Mc. We cannot provide a plan now.

Decision making can only happen w/ a 24hr period.

Tc. Recognition not easy.

Set of protocols needed Backbone.

Numbers - Network.

Inevitable consequence of when we are.

Jim Mc. V. Easy to do

Steve B. Transport.

Tc. When can we be in a position to firm up.

Steve. By lunch-time tomorrow. - Neo-nates
- Reasonable - obstet.

Jim M.C.

None less than 27 wks.

Increase to 34 wks.

Ravi. it's about reducing the risk.

Tc. By lunchtime know - Protocol / Plan

✓ Recognising exceptions.

Must be able to describe our new model & care
& risk.

Steve B. neo-nates. } for know

Usha. - obstets.

Ravi. Do we need to engage our partners now.

Tc. It's what we can offer & then tell partners

Timescale - managing consequences:

Not know. BUT when?

Look at volume consequence which will

trigger conversations.

Tc. Workforce - one Nurse!

Behaviour on unit - visits PT's staff. Visitors.

Security, swipe cards.

Nurse - 2 wks A. from today.

forensic drill down re: Nurse.

Any substance re: Nurse. & then action if approp.

Exclusion / Police.

Request for nurse to be removed from unit.

2 wk. period to review.

David S. Assurance re: what's happening after 2 wks.

Tc. Open mind Police, Exclusion.

SB. Challenge re: practice of clinicians.

David S. Assurance in 2 wks.

Steve B. Case is not perfect. Common theme

of this Nurse. Doesn't take away concern

re: this individual.

Not change my opinion.

Intro in Man to AK & IH. re: concerns.

Present on deaths.

Deaths this yr

3 sets of twins.

Collapses bet. 12 mid & 4 am.

2 triplets.

Days now - no collapses.

Not a station. Chances minute.

Karen T. - needed more detail
Sdad. Why review now & not before?

Jim M. forensic she is on A.

Take stock.

Looked with hair bath comb.

Steve B. know unit

Karen T.

Roni. Concern potentially member of staff
causing harm. Recurring theme.

Sarah These babies shd never hv. died.

Tc. If Nurse removed - wd death shop.

Steve B. Risk wd be reduce d.

Tc. Review. proportionately reasonable.

Concern re Nurse.

Test out hypothesis with her being off.

Then exclude or inconclusive - Police.

Open to all.

Sdad. 'You are looking at us.' That's what it is.

Using 2 different words. Security review.

Roni. T. or R. hv. u talked about Nurse concern

It. Collage of Mott. as is RCM

If to point of involving Police - will defer review.

Jim Mc. Do they know about Nurse concern.

It. Issues highlighted in d. Nurse issue.

Jim Mc. I don't think its fair to ask College

to do forensic | Nurse issue.

Team will come in - maybe minor issues. - that's

Police - hv. better investigation.

what I think.

Difficult

SPC. Outline of Police action.

Tc. All agree cannot ans. legit Q's.

Not ignore anything

Test hypothesis. YES: no. → Police?

Potentially mit chunt.

Not suggesting not up for it.

Unintended consequences.

Jim M^c. Women around country not stupid.

Choice → Police / No police - big impact.

ACTIONS. Review.

Murke - deep dive.

Explaining new model.

Action in new model → Planning team.

Comms plan.

Press releases. TV.

↓ downgrade & exclude - might
or well miss Police now.

Is everyone comfortable?

Denise. Yes - definite decision. M. Murke.

Jo. Denise:

by 2wks.

Julie. F.

Usha.

Karoch.

Steve B. I made my views clear.

Nagging after last night.

↳ we will take on observations.

↳ felt obs made by mky.

DATIX. → problems with governance

Mc Culture & behaviour.

r raising concern.

Steve B. Challenge Struggled

completely.

↳ left m: job plan

& dissatisfaction.

(2nd.)

(3rd) fish out of water.