

EXECUTIVE AND PAEDIATRIC CONSULTANT MEETING

MINUTES OF THE MEETING HELD ON THURSDAY,
26TH JANUARY 2017 at 12.30PM
BOARDROOM
SPC/CER final version

		Attendance	
Chief Executive	Mr T Chambers	<input checked="" type="checkbox"/>	
Medical Director	Mr I Harvey	<input checked="" type="checkbox"/>	
Director of Nursing & Quality	Mrs A Kelly	<input checked="" type="checkbox"/>	
Director of People and Organisational Development	Mrs S Hodkinson	<input checked="" type="checkbox"/>	
Director of Corporate & Legal Services	Mr S P Cross	<input checked="" type="checkbox"/>	
Non Executive Director	Mrs R Hopwood	<input checked="" type="checkbox"/>	
Consultant	Dr R Jayaram	<input checked="" type="checkbox"/>	
Consultant	Dr S Brearey	<input checked="" type="checkbox"/>	
Consultant	Dr Murthy Saladi	<input checked="" type="checkbox"/>	
Consultant	Doctor V	<input checked="" type="checkbox"/>	
Consultant	Dr M McGuigan	<input checked="" type="checkbox"/>	
Consultant	Dr J Gibbs	<input checked="" type="checkbox"/>	
Consultant	Mr S Tighe	<input checked="" type="checkbox"/>	
Head of Nursing, Urgent Care	Mrs K Rees	<input checked="" type="checkbox"/>	

1. Mr Chambers outlined the reason for the meeting.

Mr Harvey gave details of the Royal College of Paediatric and Child Health (RCPCH) review and the reason why this had been commissioned. He also detailed the second review in to the deaths, case review and the pathology review.

Mr Harvey reported that running in parallel to the above reviews was the HR process relating to the grievance.

Mr Harvey highlighted the recommendations from the report, plus the recommendations from the case reviews which provided the element of triangulation.

Mr Chambers stated that the report will be published week commencing 6th February 2017 and the communications plan will include families, staff, neonatal

network, doctors, politicians and the press.

Mr Chambers stated that the Speak Out Safely process had been professionally managed. He noted that emotions were running high at the time. Things have been said and done that were below the values and standards of the Trust. He added that an action plan will be developed from the outcome of the grievance. The grievance had indicated that there had been victimisation of the nurse.

Mr Chambers has met the nurse and her family and discussed the redeployment of the nurse.

Mrs Rees read out Lucy's statement to the meeting. There were no comments made.

Mr Chambers said we need to remind ourselves how we got into this position. The Trust encourages staff to 'speak out' and the only reason we went where we did was because of the consultants comments.

Mr Harvey added that it was not about raising concerns, as that is fine, but the review by a high powered team does not call out a criminal act but does raise other issues. There is a need to draw a line under the 'Lucy issue'.

Mr Chambers stated that following an extra ordinary Board of Directors meeting on 10th January 2017 where the Board had received a copy of the report, the Board had accepted the recommendations from the report. The Board had noted that an apology would be requested from the consultants. Lucy felt that it was unfair to move her from the unit however the Board are content that it was in Lucy's best interests to move her from the unit. An apology has been given to Lucy and her family. He added that there is a need for an apology from the consultants and this will be followed by mediation. He said lets be clear that we need to draw a line on the past and is about how we go forward in the future.

Mr Chambers stated that the final recommendation was around the unit being a level 1 or 2 and this was contingent on the network review.

Mr Chambers re-iterated the Board's recommendation and asked the consultants for their support.

Dr Jayaram thanked Mr Chambers and said that they looked forward to working together and there is a need to understand each others position. We have not been as good at that as we could have been. We need to group together and discuss what we have heard. Dr Jayaram asked if it would be possible to have the report earlier.

Mr Harvey stated that the report would be released to everyone at the same time however some time could potentially be put aside for the consultants to consider the report.

Dr Jayaram stated that consideration would have to be given to any poor consultant performance.

Mr Chambers said that doctors, nursing and managers must work together. He has some concerns as there is a theme of difficult relationships between doctors and nurses. Bringing Lucy back to the unit will be tough, we cannot let emotions get in the way. This needs to be successful and there is a need to develop an action plan for this be achieved.

Dr Brearey stated that the consultants need time to reflect on what had been said. It is hard to have conversations between clinics. We need evidence of what has been said verbally.

Mr Harvey replied that there is no substantial difference as to what Dr Brearey and Dr Jayaram have already read in the draft report.

The meeting closed at 1.07pm.