

Senior Clinicians Meeting
Monday 29th June
The Longhouse
Countess of Chester Hospital

Present:

Dr Ravi Jayaram
Dr Liz Newby
Anne Murphy
Eirian Lloyd-Powell
Habeeb Braimo
Dr Murthy Saladi
Dr John Gibbs

I had emailed around the final documents relating to the GP Access to Hospital at Home service and I would like comments back by 03.07.2015. It is proposed that this will start on 13.07.2015. I start as Paediatrician of the Week that day and can supervise things. It also gives me a time to brief the Registrars and for local GP's to be informed of the service.

John Bethell is laying on extra PLS courses as there are issues with theatre staff needing to be trained up. From next year, the course is going to switch to the ALSG Paediatric Life Support Course, which is valid for four years. John will email around asking for volunteers to be medical directors for these courses. Anne raised an issue that there are several paediatric nursing staff who are waiting for places on this course and I will contact John to ask whether they can also have places on these courses as well. The clinical summit to discuss neonatal and paediatric services in the region and the way forward takes place next week on 06.07.2015. Anne Murphy and Eirian Lloyd-Powell are going, as well as myself and Steve Brearey. Mark Brandreth and Habeeb Braimo are also going.

Habeeb informed us that the Business Case for Paediatric Consultants is currently with Lorraine Burnett, but she wanted to await the outcome of the Clinical Summit before progressing it. The Clinical Summit is unlikely to change things in the short term and the need for consultant expansion is more pressing and he will feed this back to Lorraine. Habeeb also told us that Planned Care have been told that Doretta Lokko's services will be withdrawn. There was an issue that two PA's worth of Jane Dalzell's money should come back to us but this has been kept by Planned Care. There has been no response yet from the Planned Care Division. Murthy reminded us that from the end of July we will be 1.5 whole time equivalent Registrars short as Sarah Rylance is leaving soon and Andrew Brunton is leaving at the end of the month. I have asked Tina Purcell if we can advertise for a Locum Registrar for one month in August but it is likely that we will probably end up needing to get an Agency Locum. Liz also told us there are problems with organising SHO cover for the 11th July shift.

John discussed the fact that the NICE infection control guidelines says different things for treatment of neonates and age 0-5. It was agreed that the way forwards would be to standardise things between the neonatal unit and the children's unit and if sepsis is suspected in the first three days of life then penicillin and gentamycin should be used but from days 3-28, Cefotaxime should be used first line.

Eirian told us that she and Steve had met with Jane Evans to discuss the response to the Barrow-in-Furness Report and a business case is being put in place to increase the nursing staff numbers and change the skill mix on the neonatal unit. A discussion was had around the fact that there is an ANNP course that starts in September. Everyone was supportive that R started to be trained as in the future it is likely that we will rely on ANNP's instead of junior doctors, given the gaps that are coming in. There was a discussion on how this should be funded. Clearly, if ANNP's are going to sit on the medical rota, then the money for that needs to come from the medical budget, but for training this should come from the hospital's training budget.

Eirian also raised an issue that the neonatal staff felt that parents were not getting updates regularly enough from consultant staff. There was a bit of a debate around this. Generally, the Paed of the Week is available and if parents need to be updated the nurses should be able to ask the consultants to come down. The consultant may not be free at a particular time but clearly if there is a sick child, it is anticipated that the parents would be updated anyway. I have asked Eirian to get the nurses to document specific examples where this is happening as the consultants at the meeting were slightly unclear as to exactly what the issue was.

There was also an issue raised around the fact that with the three recent neonatal deaths, the Registrars had been quite worried and feel that nothing is being done. Behind the scenes reviews are going on but it was felt that formal debriefs should probably take place, rather than any specific meeting to discuss all three.

Anne Murphy asked where the CCG were up to with the bid for Vanguard money. I said that our comments had been fed back to Laura Marsh, the senior commissioner but then there had been no contact from Laura Marsh. Anne has a vision for community paediatric nursing, particularly as the staff are doing a lot of work that would traditionally have been done by District Nurses. Anne is going to feed this to Faye Quinlan.

Anne also mentioned that there had been an issue with having a member of staff enter Appraisal and Training data for the neonatal unit. Under the old W+C Division, there had been a clerk whose job it was to do this for both obstetrics and neonates but following the reorganisation, the role simply went to Planned Care and there has not been an equivalent for neonates. Habeeb has asked for any email trails regarding this to be sent to him and he will take this further.

End of Meeting