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Steering Group Meeting Telemedicine Room, RHSC 19th June 2014

Present:

Janette Fraser (Chair Person)	Director of Regional Planning, West of
	Scotland
Paraic McGrogan	Lead Clinician, NHS GGC
Jan Chappel	Dietician, NHS Argyll and Bute
Caroline Delahunty (vc)	Consultant Paediatrician
Karen Sinclair	Clinical Nurse Educator, NHS GGC
Elaine Buchanan	Lead Dietitian for Gastroenterology, NHS
	GGC
Colette Fotheringham (vc)	Paediatric Nurse, Forth Valley
Maureen Kinney	Network Manager
Michelle Nolan (minutes)	MCN Administration Assistant

Apologies:

Helen Bauld	Nurse Manager, NHS Forth Valley
Lee Curtis	IBD Nurse Specialist, NHS GGC
Karen Fraser	Network Data Manager, NHS GGC
Andrew Eccleston	Consultant Paediatrician, NHS Dumfries &
	Galloway

	ACTIONS LIST	Responsible
1.	PMcG will contact the Clinical Directors from each Health Board	
	again with regards to the fact that there is no feedback given when	
	requesting access to Datix.	PMcG
2.	MN will contact HB with regards to forwarding PMcG a Safeguard	
	report.	MN
3.	It was agreed that the issue of care of sixteen year olds in District	
	General Hospitals would be raised at the next Transition group	
	meeting.	MK
4.	A paragraph highlighting the issues of the increase in workload for	
	the gastroenterology service, adolescent care and risk assessment	MK
	will be added to the exec summary in the annual report.	
5.	MN will add looking into providing information from a psychology	
	point of view for parents whose children are about to start the	
	transition process to the next Transition Group meeting agenda.	MN

6.	KS agreed to amend item 3.4's heading to NES from Managed	
	Knowledge Network	KS
7.	MN will be added as administrator for the WoSPGHaN MKN site. MK	
8.	MK and MN to co-ordinate this VC communication sessions for Vikki/Lee to discuss patients between IBD nurses and clinicians or	
	nurses in DGHs.	MK & MN
9.	MK will contact Jamie Redfern with regards to funding for the EN	
	Co-ordinator's post.	MK
10.	It was discussed that the Steering Group members will be contacted regarding their membership with the group and if they wish to stay a part of the Steering Group. They will be asked to nominate a representative from their area should they wish to no longer be a	
	part of the group.	MK

1.	Previous Minutes & matters arising	
	The group agreed that the minutes were an accurate record of the previous meeting.	
	PMcG will contact the Clinical Directors from each Health Board again with regards action number three from the previous minutes - <i>JF</i> suggested putting a paper together summarising and explaining the issues around the fact that there is no feedback given when requesting access to Datix. PMcG will write to the Clinical Directors of each Health Board in the West of Scotland with regards to this matter.	PMcG
	MN will contact HB with regards to action number five from the previous minutes - HB explained that in Forth Valley when an IR1 form is submitted via Safeguard a report will be produced automatically. HB will request a report and forward it to PMCG.	MN
2.	Annual Report 2013-2014	
	PMcG explained that KF will update the activities in the Annual Report.	
	PMcG highlighted the challenges that the network faces over the coming years with the move to the new hospital and how this may have an impact on the network. PMcG discussed the increase in the gastroenterology caseload in all areas of the region. It was highlighted that there will be a change to the referral process when the service moves to the new children's hospital in 2015. These issues will be added to the final draft of the annual report before submission to the Regional Planning Group in July. JF suggested raising these issues with NHS GGC and the Regional Child Health Planning Group, once there is clarity regarding the growth in demand and an understanding of the potential impact.	
	The group went onto discuss the issues they face with patients during	

the transition period. CD highlighted that she finds it difficult to admit children from the age of sixteen into the children's ward at Wishaw General due to age constraints. It was agreed that the group would raise the issue with Lee Curtis who is the chairperson of the network's Transition sub group with regards to the issue of care of sixteen year olds in District General Hospitals.

MK

PMcG discussed the issue of network risk due to illness/vacancies and discussed whether regional planning may be best placed to look into a risk strategy and developing a contingency plan as patient care is impacted when member of the network are absent or posts are not filled. It was agreed that a paragraph highlighting the issue of adolescent care and Risk Assessment will be added to the exec summary.

MK

CD informed the group that Morag Alexander will be taking up the post as lead CCN in Lanarkshire.

3. Sub-group updates

EN Group Update

The group looked over and discussed the attached EN Group update report attached.

EB informed the group that the EN Database will be piloted in GGC and that it will be the newly appointed dietetic assistant will be responsibility to input information on the database.

Transition Group update

The group looked over and approved the standardised letter for patients who are about to enter the transition period before moving to adult services.

The group discussed the outcome from the focus group sessions which showed that some parents were not ready for their children to start the transition phase and that it may be a good idea to write to the parents explaining what is involved in the transition process at the same time as their young person receives their letter informing them of the transition process. The group went onto discuss how the transition group could look into how to move things forward for teenagers who are about to go through transition.

EB informed the group that a Transition information card has been drafted for the teens to record the relevant information they required e.g. name of adult consultant, hospital

JC suggested including information from a psychological point of view

for parents of teenagers who are about to start the transition process. MN will add this to the next Transition Group meeting agenda.

MN

Education Group update

The group discussed the attached education sub group report.

The group looked over the Education Strategy document and KS agreed to amend item 3.4's heading to NES from Managed Knowledge Network.

KS

KS updated the group on the AHP education session which was held on the 17th June 14. KS informed the group that the evaluation forms highlighted that the attendees enjoyed having the opportunity to network with colleagues from other regions. CD queried whether staff could VC into the sessions. KS explained that the outcome from the AHP sessions questionnaire highlighted that people felt it was important to come along to the sessions in person.

KS informed the group that the PN workbook will be adapted to be uploaded onto Learnpro and this will include specific links within the module for people to refer to whilst working through the module.

The newsletter will be completed and ready for circulation by the end of June 2014.

The group discussed the NES Psychosocial modules' evaluation results. The report will be added to the annual report. PMcG proposed sending out a questionnaire to gauge whether the attendees have changed their practice as a result of attending the Psychosocial modules.

MK

CD raised the issue of the WoSPGHaN Managed Knowledge Network (MKN) site being difficult to navigate. The group discussed highlighting links to documents that are on the MKN page on the WoSPGHaN website. The group discussed adding the links to other intranet sites within the network's region and the issues of identifying a key person with each Board to update the sites as required. MN will be added as administrator for the WoSPGHaN MKN site.

MK

IBD

KS informed the group that the Infliximab Infusion training has been carried out in Dumfries and Galloway Royal Infirmary and Crosshouse Hospital and both are up and running. It was highlighted that there is an issue over the ages of patients at Wishaw General Hospital. The deadline for all training to be carried out is October 2014. There will be an audit carried out for all sites once all sites are up and running.

MK explained that Vikki Garrick is looking to standardise communications across the network with the use of VC rather than communicating via email to discuss patients between IBD nurses and

	clinicians or nurses in DGHs. MK explained to the group MN and herself	MK/MN
	will co-ordinate this.	IVIIC/ IVII V
	KS explained that the C-Diff screening audit is to be carried out for newly diagnosed patients. CD and KS went onto discuss the questions in the audit.	
	Endoscopy	
	PMcG explained that group had not met for a while. The home bowel prep audit results will be added to the Annual Report. JF suggested that the group could look at tying up anything that is outstanding via e-mail rather than meeting.	
4.	EN Co-ordinator	
	JF informed the group that she raised this agenda item with Kevin Hill at the last Regional Child Health Planning Group meeting and Kevin advised that this would be dealt with internally within GG&C MK explained that she has since contacted Jamie Redfern with regards to the funding for the EN co-ordinator but is yet to hear back from. MK	
	will follow this up with Jamie.	MK
5.	<u>Newsletter</u>	
	The group discussed whether the newsletter was useful. MK explained that she has reduced the amount of pages from five to three. The Newsletter will be distributed to the network members, Regional Planning and all DGHs.	
	The newsletter will be completed and ready for circulation by the end of June 2014.	
6.	Steering Group Tenure	
	It was discussed that the Steering Group members will be contacted regarding their membership with the group and if they wish to stay a part of the Steering Group. If they no longer wish to be a part of the Steering Group they will be asked to nominate a representative from	MIZ
	their area.	MK
9.	AOCB	
	JF explained that the job description for the Clinical Lead position for the network has been sent to Jamie Redfern. JF is currently awaiting a response from Jamie on this.	
	JC queried whether the Dr Iqbal at RAH will be the link clinician for Argyll and Bute. It was suggested that JC contacts Graham Stewart with regards asking if Dr Iqbal can be the link clinician.	

10.	Date & time of next meeting	
	The next meeting will be held on Thursday 30th October 2014 at 10am in the Telemed room, RHSC.	



Sub Group	Enteral Nutrition
Sub Group Lead	Elaine Buchanan
Date of Last Meeting	18.3.2014
Work Plan Attached:	No
Previous Minutes Attached:	No
Other Documents:	
Sub Group Progress	

Blood Monitoring

Michelle Brooks is presenting her systematic review on blood monitoring for home enterally fed patients at ESPGHAN and following this the plan is to do a retrospective view of patients on HEF.

Competency and Teaching Packs

Questionnaires have been completed for pts d/c home on enteral feeding with regards to their training. This will run until end of June before analysis.

Risk Assessment

A further meeting had been organised to complete this work and is being chaired by Sara Buchan.

Database

Karen Fraser will update

EN Education Day

A half day education event planned for 16/9/2014. Programme to be confirmed.

CCN meeting

Short term working group has been disbanded as the remit of group was to look at the best way to co ordinate home enteral feeding supplies and fund an EN co ordinator. This is still not resolved and was to be taken to the regional planning group by Janette Fraser.

Dietetic Home Enteral Feeding Care Pathway Work in progress and still to be completed.

Completed by:	Elaine Buchanan
Date:	11.6.2014



Sub Group	Education
Sub Group Lead	Karen Sinclair
Date of Last Meeting	01/05/14
Work Plan Attached:	No
Previous Minutes Attached:	Yes
Other Documents:	
Sub Group Progress	

Diathers meeting many items were diax (0.64) in relation to education and training for members of WoSPGHaN and actions were agreed by the group to take these forward. The main items are identified below.

- Terms of Reference for group and Education Strategy to go to next Steering Group to be ratified.
- Membership of this group to remain small however representatives from the DGH staff are required. Key staff to be invited to join next meeting.
- Education calendar to be produced every six months and details put onto MCN website. To include AHP Education sessions, GI education meetings and Annual events such as BAPEN, SSPGHAN.
- Liver guidelines and an information booklet are presently being developed and are on schedule to be finished by end of this year.
- EN documents have been revised in light of feedback from service providers and requests from neonatal departments. Version 2 is now ready for going to printers.
- Varicella guidelines will be uploaded onto WoSPGHaN website for easy access by all members.
- PN workbook, competency and checklist completed and ready for printing.
 Other methods of delivering this training, ie. Learn Pro to be explored.
- Flowcharts for the development of guidelines and leaflets were presented and adopted by the group for use by WoSPGHaN members.
- An attendee database is to be developed to record attendance at the education sessions and annual events.
- This group will be responsible for the development of the WoSPGHaN newsletters
- Feedback from delegates at the Psychosocial modules and IBD Education day to be discussed at next meeting.

Completed by. Karen Sincian	Completed by:	Karen Sinclair
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