



## Partners in Paediatrics

### MINUTES: ANAESTHETIC WORKING GROUP

23rd November 2007, Post Graduate Medical Centre, Stafford DGH

#### Present:

**Imogen Billingham (co-Chair)** Alder Hey Hospital, Liverpool  
**Dori Ann McCulloch ((co-Chair)** Stafford General Hospital  
**Alistair Cranston** BCH  
**Abigail Akita** Newcross Hospital, Wolverhampton  
**Manab Haldar** Burton Hospital  
**Tim Smith** Alexandra Hospital, Redditch  
**Richard Crombie** Consultant Anaesthetist – Heartlands & Solihull  
**Nuala Bywater** Hereford County Hospital  
**Sue Watkins** Good Hope Hospital  
**Julia Greensall** Partners in Paediatrics

#### Apologies

**Julian Berlet** Worcester Acute Hospital  
**Charlie Ralston**, BCH  
**Ian Bagueley** Consultant Anaesthetist – Royal Shrewsbury  
**Tim Long** Warwick Hospital  
**Sujatha Chari** UHCW Coventry  
**Alison Thwaites** Consultant Anaesthetist - City & Sandwell Hospitals  
**Rob Alcock** RJAH Hospital, Oswestry  
**David Freschini** UHNS  
**Bernhard Freitag** Walsall Hospital  
**Andrew George** Mid Cheshire Hospital, Crewe  
**Nicky Smith** Partners in Paediatrics

**NB:** Dr Randall Pearson (George Eliot) will attend in future, in place of Dr Miller who has retired.

This was the first meeting attended by the new co-chairs. This meeting was Chaired by Imogen Billingham.

#### **1 MINUTES OF THE LAST MEETING**

The minutes from the meeting held on Friday 13<sup>th</sup> July 2007 were accepted as a true record, with some minor amendments noted:

One typing amendment noted under 'Matters Arising' – the sentence should have read..."joint appointment between Stoke AND Alder Hey.

Noted: Redditch are retaining Maternity services.

There is an ongoing debate about neonatal services.

## 2 MATTERS ARISING

- **Tanner Report:** This is considered to be an important report. No one has reported any implementation problems, probably as a result of the work in the West Midlands around the Critically Ill Child and Peer Review process – and the work of the Anaesthetic Working Group (AWG). Nevertheless, it was felt that this should be kept under review, so that if there were failures or difficulty with implementation, members of the AWG could give a view.
- It was felt there is a need to discuss the role of anaesthesia and to discuss with paediatricians.

Some discussion about the Peer Review (PR) process itself. It is considered that one of the advantages of the PR process is that it brings people together and there is opportunity to develop protocols.

It is thought that there may be some 'selective' revisits to Trusts and some internal self-assessments undertaken. Most people have found the PR process helpful.

The APA are looking again at Peer Review; a document is currently being produced, specifically about Anaesthesia. The College of Anaesthetists are keen on the process as it could play a role in 'revalidation'. Alistair has liaised with the author, and asked for the situation to be dealt with 'sensitively'.

A Letter has been received from Jane Peutrell, regarding the APA Linkman scheme (this had been circulated by e-mail prior to the meeting. Jane is aware of the Anaesthetic Working Group.

**Action:** If an individual's name is not on the list - please forward names to Jane Peutrell directly.

**Agreed:** The Tanner Report appears not to have had a great impact, but because the Peer Review process is in place in the West Midlands, this is not something that the Group should be concerned about.

- **Training issues:** The work that has been started on training issues will be part of the Group's Action Plan for 2008.

## 3 PAIN GUIDELINES DOCUMENT

Tim had not received any feedback about this document, which is now ready for use.

The document has been developed so that it can be adapted for local use ( it has

been produced as a Word Document, so easy to adapt).

It was agreed that this was a useful document. There was some discussion about whether it should be included in the Paediatric Guidelines book and put onto the website.

**Action:** Alistair to mention the Document at the Linkman meeting on 30.11.07.

Tim is keen to be kept informed if departments are using the document.

Manab mentioned that in Burton they have developed an Information Leaflet for parents of children undergoing procedures to read. The Surgeons give out the Leaflet.

**Action:** Manab to send copy to Julia – to be circulated.

#### **4 UPDATE ON PAEDIATRIC SURGERY AUDIT**

Julia said that the second audit of standards has now been completed. Generally, an improvement in number of Standards now achieved has been seen (compared to the first audit undertaken in 2003).

There are some standards which have not been achieved and still need to be addressed, namely:

Rotas – no specific on call rotas in some areas.

Theatre – no separate area for children, few paediatric nurses in recovery / theatre;

Audit – few audits being undertaken.

Nursing – there is a lack of trained children's nurses.

It is hoped that following this workshop, a Surgery Project Group will be set up again, which can take forward those areas where there is still a need to improve standards of care. An anaesthetist would be willing to be a member of this Group.

**Action:** A workshop is being organised at which the results of this work will be feedback.

It is considered that this work 'complements' that of the Critically Ill Child. Julia will link in with Jane Eminson, to compare the results of the audits, with that of the Peer Reviews, before the workshop is held.

#### **5 REGISTRATION ON NHS NETWORKS**

Julia proposed registering the work of the Group onto the website NHS Networks; this website aims to identify all the networks which exist and share ideas between, as well as within, networks. The Rheumatology Network Group have registered their Group.

The website can be accessed at [www.networks.nhs](http://www.networks.nhs).

**Agreed:** The work of the Anaesthetic Group to be registered.

**Action:** Julia to put together the information to be included and circulate to members for their input.

## 6 REVISIT ANAESTHETIC STANDARDS

Alistair explained that these Standards were produced for the Peer Review process and were discussed at the last Steering Group of the Critically Ill Children (CCICSG). The notes from the workshop held in July were circulated and discussed.

There was considerable discussion about these standards. The main points made by the CCICSG and the Actions to be taken forward are noted here:

**Standard A5:** Protocols for resuscitation, stabilisation etc – this links with the Tanner Report.

The Demonstration of compliance is the written protocols for Standards 34-38 (re: the relationship between all parties concerned – the Anaesthetist, Paediatrician and the Intensive Care staff).

**Action:** Alistair to look at the protocol.

**Standard A6** – Can the Group be more specific about what is relevant CPD? Alistair explained that in some PR's, the information pertaining to CPD was not available, but the CCICSG felt it should be more available. How can compliance to this standard be demonstrated and assessed?

**Agreed:** The Group need to look at what the need for CPD is: the Standard could be at Departmental level, rather than at an individual level.

**Action:** To be considered further by Alistair, Imogen and Dori Ann.

**Standard A7** - Some people have questioned this Standard Re APLS and PALS. The Group felt that it was not reasonable to expect people to do the APLS training every 3 years.

**Action:** Alistair to recommend to the CCICSG the removal of reference to specific courses.

**Standards A8 and A9:** re ODAs and Training & experience. The CCICSG felt that better definition of what Training & Education is, was needed.

**Standard A10** – The CCICSG questioned whether this Standard should be removed.

**Agreed:** The Standard should be revised.

**Standard A15** – re Surgery – Should these be Trust core-wide Standards?

**Standard A16** – The Clinical Guidelines are being addressed.

**Action:** Alistair to forward amendments to Group members, for discussion at next meeting.

## 7 DATE AND AGENDA FOR ANAESTHETIC STUDY DAY - 2008

**Agreed:** Date to be April 18<sup>th</sup>; Venue: Stafford PGMC.

### **Draft Programme: AM - Presentations**

Presenters to be – Ray Clarke – ENT Surgeon – Paediatric Airway Challenges. Frank Potter also to be invited as a co-presenter with Ray Clarke.

Alistair Cranston – Peer Review

Analgesia Guidelines – Tim Smith

### **PM - Cases to be presented and discussed: Treat or Refer?**

#### **Actions:**

- Alistair and Dori Ann to contact proposed presenters
- Dori Ann to link with Nicky Smith to send out Flyer and organise CPD points for event
- Alistair to approach A & E person at BCH to be involved
- All to forward potential cases for presentation to Dori Ann

## 8 ACTION PLAN – priority areas for 2008

- Study Day: planned for Friday, April 18<sup>th</sup> 2008.

There was some discussion about whether the Group should endeavour to link in with other established Network groups – for example, the South West, UCL or Scottish Group. This issue needs further discussion.

- Training Initiative for Anaesthetic Assistants / Recovery Staff

Julian Berlet had been unable to attend the meeting, but the e-mail forwarded by him, outlining the potential options for progressing this, were discussed. It would appear that Julian prefers the third option – that of agreeing the competencies and detailed syllabus for a theory course, which could be delivered by each hospital in the region on an infrequent but regular basis.

Manab mentioned the 'Recovery Course' that is undertaken at Burton Hospital. A competency based course for ODPs is run by the Senior ODP, Dr Ayaz. The course is 5 days in total, with half a day for paediatrics. Lectures are given by a Consultant Anaesthetist and Senior ODP.

**Agreed:** The Competencies do need to be agreed. The options and way forward need further discussion.

**Action:** Julia to meet with Julian about the way forward and ascertain more information about the Course at Burton.

Manab to forward the information concerning the Burton Recovery Course to Julia (NB: this is attached).

## 9 AOB

Dori Ann had spoken to David Freschini at UHNS. UHNS do not do babies under 3 kg. They are also now bringing some work back to UHNS from Nottingham.

Julia mentioned the PiP Website is currently being updated. Some of the sections, including Anaesthetics are out of date. The Anaesthetic section to be updated prior to next meeting.

## 9 DATE AND TIME OF MEETINGS IN 2008

### ALL THE MEETINGS ARE BEING HELD AT THE PGMC, STAFFORD

Friday, 7<sup>TH</sup> MARCH - See note below

Friday, 4<sup>TH</sup> JULY - 10 am - 12 noon - Stafford PGMC

Friday, 3<sup>RD</sup> OCTOBER - 12 noon - Stafford PGMC

### POST-MEETING NOTES:

Agreed to change date of March meeting until 14<sup>th</sup> March as World Congress taking place in South Africa first week in March.

Meeting on March 14<sup>th</sup> will commence at 10.30 am at Stafford PGMC.

RE: Training initiative for Anaesthetic Assistants / Recovery Staff

Following the meeting, a bid was prepared and submitted to the West Midlands Deanery - to take forward training issues for recovery staff. This bid was successful. A small group will be meeting to progress this initiative and further information will be circulated in due course.

Minutes prepared by:

Julia Greensall  
Partners in Paediatrics  
January 2008