



Annual Report

April 2019- March 2020

NWTS provide a single point of contact for advice, bed location, and a paediatric intensive care transport team for critically ill children.



Foreword

The senior team at NWTS is pleased to present the 2019-2020 annual report

This is an important way to ensure all stakeholders in **NWTS** are updated with our progress and activity during the last financial year.

We are heading towards 10 years of service to the region in November 2020 and are very proud of the relationships we have established and gained.

NWTS remain a single Paediatric Intensive Care team (PIC) with the ability to flex to additional twilight teams during the winter months. During this winter we have additionally ran a nurse led back transfer service to aim to move the recovering child back to local care and be nearer their family. This service operated Monday to Friday during November, December, Jan, February and safely moved over 30 children back to a hospital closer to home. This also improved PICU capacity in the tertiary PICU's.

The close relationships with the regional PIC and DGH teams continue to be strengthened through open and honest communication, feedback and lessons learned.



- ◆ The establishment of a fully funded Paediatric Critical Care Operational Delivery Network (PCC ODN) will develop stronger links between NWTS, regional DGH's and tertiary Paediatric Critical Care .
- ◆ The team would also like to continue to recognise how the relationship with Royal Stoke University Hospitals Paediatric Intensive Care Unit has developed over the past few years. The teams at Stoke have always been accommodating and helpful when a bed is requested for a baby or child from our region.

Mission Statement

NWTS aims to provide the highest quality paediatric intensive care for children and their families from the first point of contact to the final unit of destination.

The NWTS service:

- ◆ Provides easy access and service co-ordination for referring children's units via a dedicated telephone line.
- ◆ Facilitates improvements in transport provision for critically ill children.
- ◆ Co-ordinates all available regional resources to aim to meet fluctuating demands of the region.
- ◆ Provides telephone advice and triaging facilities for all referrals.
- ◆ Facilitates the delivery of the most appropriate care, in the most appropriate place, for any infant or child requiring Intensive Care in the North West/North Wales Region
- ◆ To provide annual education and outreach for the District General Hospitals.
- ◆ Audit and research forms an important part of the service provision.

Highlights of 2019-2020

- ◆ During the summer of 2019 there was a change of NWTS lead Consultant. This annual report recognises the dedication of Dr. Kate Parkins who has given so much time and experience to set up and move the service forward.
- ◆ Dr. Suzy Emsden took up the lead position in July 2019 and has been able to lead the service into the future.

Establishment of the NWTS Governance Pavement

- Enhancing the roles and input from all of the NWTS team in contributing to continuous service improvement. Quarterly meetings enable effective feedback, identifying areas for improvement.

External Training and Development

- ◆ A Trauma Risk Management Course (TRiM) was organised by Suzy and this had representation by members from NWTS, Comet, and PICU's at AHCH, RMCH, Stoke, and a Consultant anaesthetist from both AHCH and RMCH.
- ◆ Daniel McGrath (Admin Manager) began his Chartered Management degree in Health and Social Care .

Appointments

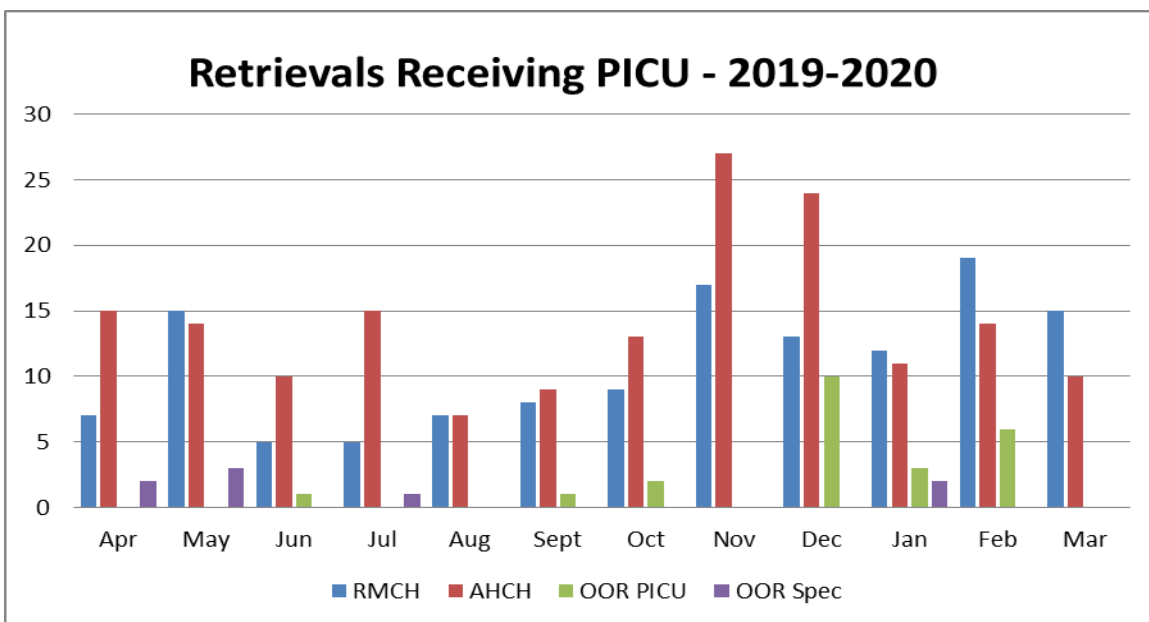
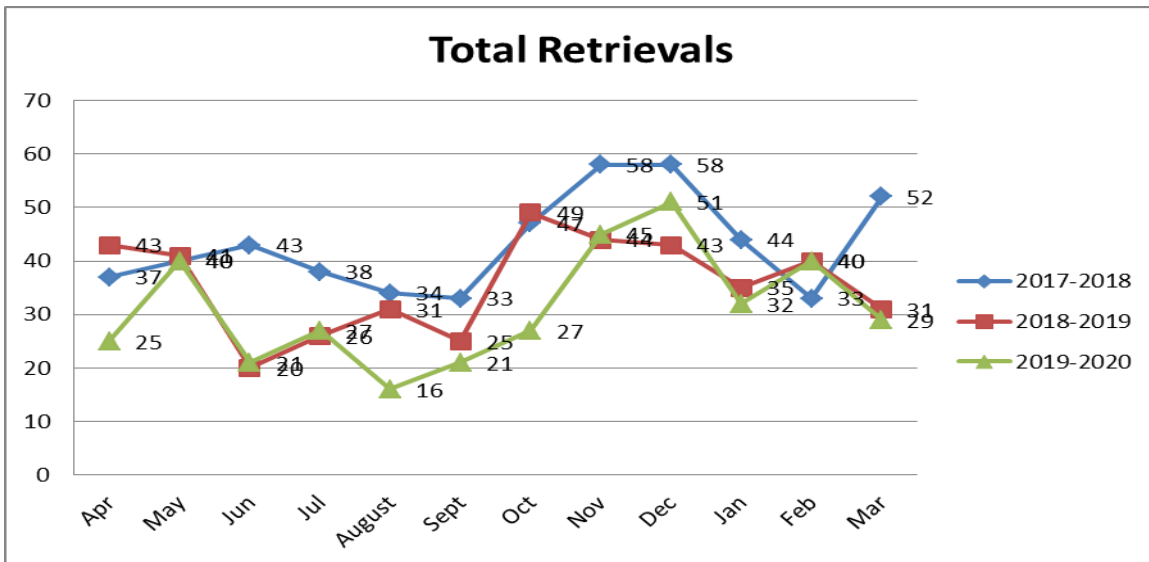
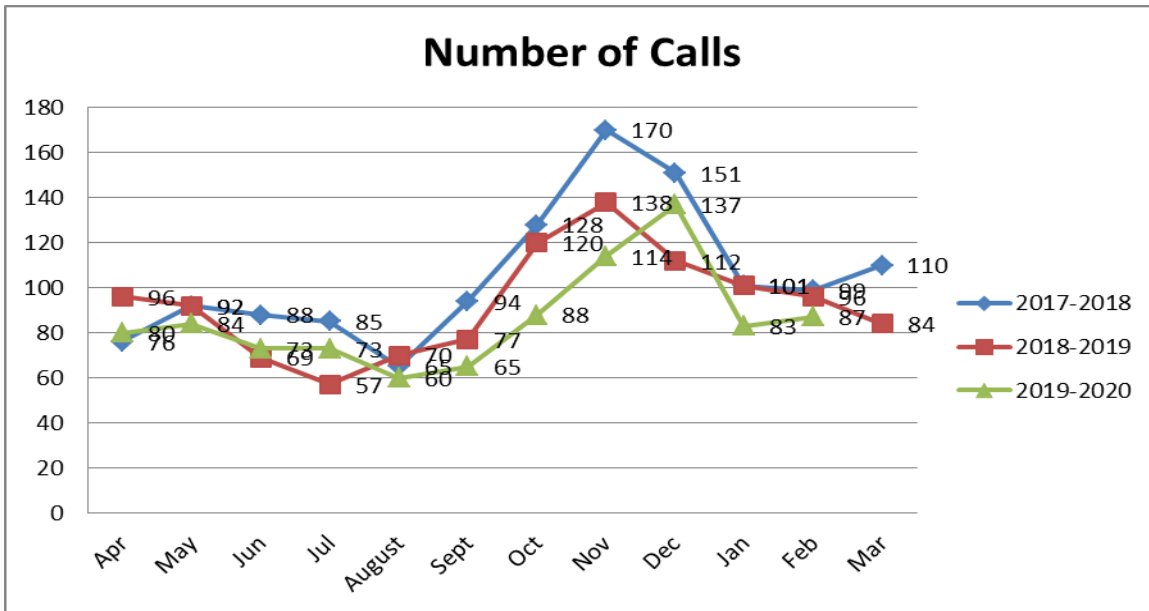
- ◆ Katie Higgins gained the position as one of our Clinical Nurse Specialists and Emma Roach as a permanent band 6 transport sister.
- ◆ During July 2019 we were proud to appointed Helen Stewart (Sheffield Children's ED) and Andrew MacTavish (Royal Bolton – Consultant Anaesthetist) as regular transport doctors providing 7 PA's per month to the rota.
- ◆ During October we were pleased to welcome Erin and Alys. They are twin girls born to proud parents to Lisa Pritchard (NWTS Consultant) and Mike (ex NWTS Administrator).



Annual Objectives

- **95%** Attendance at NWTS Staff In-House Training Day (Objective 100%)
- ◆ **75%** compliance in use of national transport passports (Objective 100%)
- ◆ **73%** (CQUiN) achieved the 30 minute mobilisation times. This includes when team already mobilised (Objective 100%).
- ◆ **95%** (CQUiN) NWTS team to child's bedside within 180 minutes of transport agreed (Objective 100%)
- ◆ **5%** out of region transfers for primary PICU care (Objective 0%)
(23 out of region transfers for primary PICU 19 to Royal Stoke and 10 to other PICU units).
- ◆ PIC 13 — Transport Refusals (within remit)
2 out of 382 Retrievals refused within remit
After support and guidance from the duty NWTS Consultants local teams decided to perform the transfer of a child to the tertiary PICU. This was because the NWTS team were already committed to a critical care transfer and the local team were in a position to move the child rather than wait for the team to be come available.
- ◆ **100%** All incidents and excellence reports were reviewed within 7-14 days.
- ◆ **100%** Incident feedback to team every month— NWTSletter including 'Lessons Learnt' produced and circulated to all staff.
- ◆ **100%** - Death Summaries to be completed within 2 weeks and all to be reviewed within 3 months. Find an appropriate way to feed back learning points/outcomes to the people involved in the cases if things went really well or there was an issue. Therefore those not involved in the meeting can still learn from the findings.

Clinical Activity at NWTS Referral Comparisons



Research at NWTS

- **DEPICT Study— (Differences in access to Emergency Paediatric Intensive Care and Care during Transport) is a national research study of emergency intensive care transport services for sick children in England and Wales.**
www.depict-study.org.uk

NWTS Audits 2019-2020

NWTS continues to ensure an active audit programme exists to examine, shape, direct and improve care/service delivery at NWTS.

Examples of this year's audit have included

- ◆ Management of Status Epilepticus in the District General Hospital
- ◆ Adherence to the Major Trauma Pathway and Signs and Symptoms of Non Accidental Injury (NAI)
- ◆ Use of rotary wing flight as a method of transport by the North West and North Wales Paediatric Transport Service (NWTS)
- ◆ Temperature Management in <5kg Patients transported by NWTS (Comparison of the effect of storing the babypod transport device inside or outside on post-transport temperature in patients transported in the babypod)
- ◆ Complications from using induction agents during intubation for critically unwell paediatric patients in the DGH

Audit work continues to direct NWTs care delivery, examining our current service delivery and model. New audits explore the impact of change as well as measure our delivery and current practice against identified standards thus influencing changes in practice. Re-audit work continues to monitor the ongoing impact of past changes and the 3rd audit examining management of status epilepticus is such an example.

In addition to new and fixed period audit work, a number of continual audit programmes measure our practice against set standards. These included

- ◆ Blue light usage
- ◆ Mobilisation times
- ◆ Families travelling in the ambulances
- ◆ Outreach & education activity
- ◆ Adverse incident & excellence reporting
- ◆ Morbidity & Mortality

Looking forward to 2020 - 2021 the service will continue to build on the previous work establishing a more robust system of recording, supporting and supervising audit work proposed and submitted. The established database can support more closely the direction of future audit work. The governance work of NWTs will integrate and align further with future audit work. This will ensure audit work is aligned with NWTs forward plans in both education and direct care delivery.

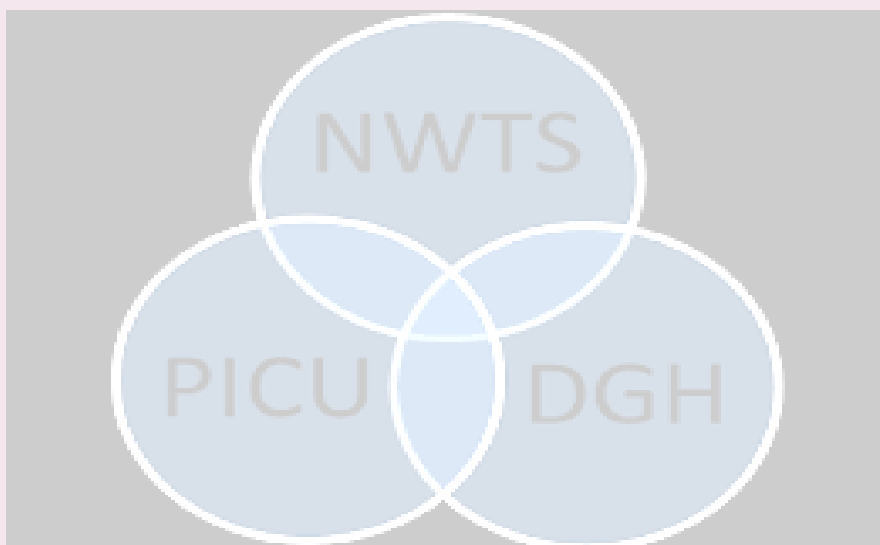


Quality and Safety at NWTS

Quality indicators (CQUiN's) are continuously monitored at NWTS and reported to both tertiary centres each month.

The standards for the national paediatric intensive care transport teams are:

- ◆ Mobilisation of the transport team — less than 30 minutes from time of acceptance (team at base)
- ◆ Time of arrival of the transport team at the bedside of the child in less than 180 minutes from acceptance (team at base)
- ◆ The number of refusals when the transport team is unable to transfer the child requiring paediatric intensive care transport
- ◆ How many times a baby or child has been transferred out of the region for PICU care
- ◆ Recording and review of incidents, clinical and non-clinical. Actions and outcomes are also recorded





The aim of this monthly **NWTSLetter** is to keep the staff at the service up to date with the Service. Lessons Learnt will highlight procedural issues affecting the day to day




NWTS Pavement

| | | | | |
|---|----------------------|---|---|-----------------------------|
| Families Charities | Database/PICANet | Major Incident Planning | Education (In-House) | Appraisal & Revalidation |
| Trauma Network | PICUS | Specialist Commissioning Targets and Productivity | Future-Proofing Workforce Planning Rota | Audit/Research |
| DGHs | Education (Outreach) | Clinical Lead team | Cardiac Network | Guidelines |
| Governance Incidents Risk Health and Safety | PICS ATG | PCCN | Neonatal Network | Accommodation Equipment |
| Excellence Reporting | Mortality | Ambulance | Flight | Resilience Staff well-being |

Education at NWTS

- 2 Conferences (Annual & Nursing) 
 - 4 Paediatric Critical Care Network Nursing Subgroup Meetings 
 - 4 PHDU Teaching Days 
 - 4 PCCN Nursing sub-group meetings 
 - 6 TCAA training sessions facilitated 
 - 21 Outreach sessions delivered to the region 
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Excellence at NWTS

-  Whole team did an amazing job – ensured all drugs/treatment given in a timely manner. Kept family updated throughout stabilisation.
-  Excellent management of difficult case, whole team worked together to quickly diagnose and manage the case, very smooth and rapid transfer. Great demonstration of how the trauma pathway should work.
-  OOHA following fall. Referred to NWTs and trauma team leader conferenced into call, advised rapid transfer to RMCH. Team were able to rapidly stabilise the child and prepare for transfer, with the child arriving in RMCH less than 2 hours after the initial referral to NWTS. Great demonstration of how the trauma pathway should work.

Continued . . .



His early recognition and prompt clinical management of this patient ensured that the child did not need PICU admission.









Multiple transfers and debrief, I always feel reassured when you're on. Your guidance and support have helped me through many a tough time and you go out of your way to make sure everyone is okay.



The skills and experience of our ambulance teams are very valuable particularly when managing unstable patients

Administration Team Projects

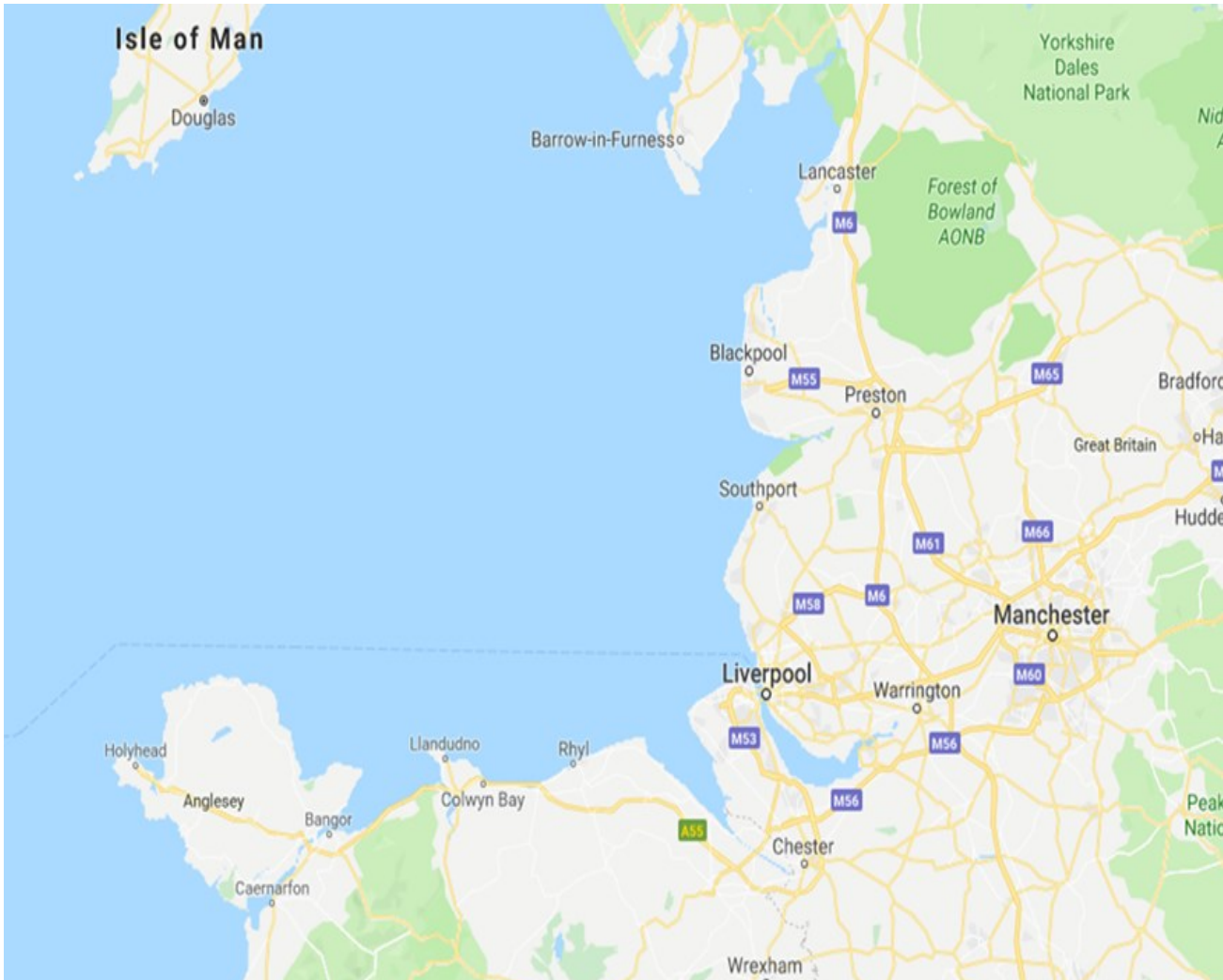
-  Welsh Data / Retrievals > 3 hours to DGH's (AB)
-  Cardiac Network Data / Mortality Data / Mobilisations / Monthly Data Reporting / Annual Report (AJB)
-  Conference artwork / Outreach / Education / Quality Control NWTS Database (SM)
-  Conferences /Quality Control NWTS Database (DMG)
-  PICANET / Flight Data / OOR Data / Quality Control NWTS Database / Consumables (JF)
-  Monthly Data Reporting / SOP Management of Database / Audit Database / Hospital Referral Breakdown & Referral Category (IC)



The Children's Air Ambulance (TCAA) above and NWTS PICU Ambulance below at Barton Heliport, Manchester.



NWTS cover a large geographical/paediatric population



Thank you for taking the time to read this annual report and we hope it is informative in regard to the operation and responsibilities of the service.

There have been some challenges in regard to senior staffing, especially over the winter period but we have managed to avoid any gaps in service delivery.