

Care of Burns in Scotland
National Managed Clinical Network
ANNUAL REPORT 2019/20

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1. Executive Summary

CoBiS has experienced many challenges over the past year and this has highlighted the crucial role that the network plays in enabling the delivery of safe, effective and equitable services throughout Scotland. From CoBiS' perspective these challenges have brought the burn care community closer together, with instances of fruitful co-operation between all of the Scottish units. This has been helped by excellent professional and personal relationships amongst the units, and this co-operation will help to continue to build a successful network.

During this reporting period the Care of Burns in Scotland (CoBiS) network has consolidated its engagement with stakeholders including emergency services, third sector, hospital emergency departments, major trauma centres and services providing burns care outside the specialist burns centres. The network continues to be committed to developing skills and knowledge in the acute management of burns through the production of a series of short videos along with national and regional education events.

The network has also been working with National Planning to support a review of burn services in Scotland, with an aim of publishing new options in the coming year. This involves a multi-disciplinary approach from a broad spectrum of health boards and other organisations.

The network has continued to facilitate the sharing of skills, knowledge and national standards across burns services to ensure better outcomes for patients. The four main burns units in Scotland will continue to ensure the national burns standards are met and will be organising reciprocal visits in 2020/21 to provide peer support and recommendations as well as to share best practice.

Since February 2020, understandably NHS Scotland's priority has been to prepare for and deal with the COVID-19 impact and this has seen clinical and other resource diverted from network activity. The network has undertaken an exercise to not only capture the impact of this unprecedented situation on the current reporting period, but also to assess the likely impact on delivery of the 2020/21 workplan.

It has been acknowledged by Lead Clinician, Mr Stuart Watson, that it will be difficult for burns services throughout Scotland to maintain burn care at the level hoped with the ongoing crisis. Due to the additional strain on services, it is expected that this will have a significant knock-on effect for the network.

A CoBiS Steering Group meeting was due to take place in Dundee on 19th March 2020, however this was cancelled. CoBiS subgroup meetings have also been cancelled due to COVID-19, with work being carried out remotely.

From March 2020, Mr Stuart Watson noted that in Glasgow, the burns team were planning to run an "austere circumstances" burn service and shared a number of recommendations and guidelines with the network.

Mr Watson added that it is important that clinicians treating burns under adverse circumstances have confidence in the decisions they are making. Some documents from the American Burns Association and the International Society for Burns were shared with colleagues to offer some guidance in March 2020. Mr Watson also shared advice from China (Shanghai Burn Service) about burn admission.

2. Introduction

Since designation in 2007 the Care of Burns in Scotland (CoBiS) network has enhanced the delivery of care to patients who have suffered a severe burn injury, through the following aims:

- Improve resources available for patients – adults and children – as well as their families and carers
- Support the maintenance of a skin bank to ensure there is safe and satisfactory supply of skin allografts that have been stored and processed in accordance with all the appropriate regulations
- Initiate and maintain training and educational events to meet the skill requirements of those involved in the management of patients with burns
- Ensure that, should an adverse event occur, there is a comprehensive plan in place in Scotland to manage mass casualties
- Establish and maintain a database of complex burn injury in Scotland
- Set up mechanisms to regularly audit outcome of burn treatment against nationally agreed standards of care
- Maintain a website to provide guidance and access to national protocols for those managing burn injuries in Scotland, as well as patients and carers, which will also be accessible to the general public for information purposes.

A review of the network was undertaken in 2017 and NHS Boards and the Scottish Government Health and Social Care Directorate (SGHSCD) endorsed a further cycle of national commissioning, with a specific remit around supporting the implementation of the Review of Burns Services in Scotland (2016). The Review recommended a new service model and NHS Boards were invited to submit proposals to lead the design and delivery of this important service development. Following initial work undertaken by NHS Greater Glasgow and Clyde (NHS GG&C) and in response to a range of strategic developments in NHS Scotland since 2016, the proposed Burns Hub model is being revisited through the National Planning Board.

A further review of the network was due to take place in 2020, however, given the interdependency between the network and burns services this is on hold pending the outcome of ongoing collaborative work with the National Planning Team. The review of burn services in Scotland will require the input of many of the key stakeholders involved with the CoBiS network. Therefore, it was agreed that this work would take priority of the network review, which will now likely take place in 2021.

3. Report on Progress against Network Objectives in 2019/20

National networks have agreed core objectives that reflect the Scottish Government's expectations for managed clinical networks, as described in CEL (2012) 29¹. The network's core objectives are:

1. Design and ongoing development of an effective Network structure that is organised, resourced and governed to meet requirements in relation to SGHSCD Guidance on MCNs (currently CEL (2012) 29) and national commissioning performance management and reporting arrangements;
2. Support the design and delivery of services that are evidence based and aligned with current strategic and local and regional NHS planning and service priorities.

¹ Please see: https://www.sehd.scot.nhs.uk/mels/CEL2012_29.pdf

- Support the development of a national burns hub and facilities model, in line with the recommendations from the Review of Burns Services in Scotland (2016).
- 3. Effective Stakeholder Communication and Engagement through design and delivery of a written strategy that ensures stakeholders from Health, Social Care, Education, the Third Sector and Service User are involved in the Network and explicitly in the design and delivery of service models and improvements.
- 4. Improved capability and capacity in burn care through design and delivery of a written education strategy that reflects and meets stakeholder needs.
- 5. Effective systems and processes to facilitate and provide evidence of continuous improvement in the quality of care, including the development of a written quality improvement strategy.
- 6. Generate better value for money in how services are delivered.

This report gives an overview of progress against these objectives in the year 2019/20. A summary of this information is detailed below.

3.1. Effective Network Structure and Governance

The CoBiS Steering Group meets three times each year and is chaired by Mr Stuart Watson, the CoBiS Lead Clinician (NHS Greater Glasgow and Clyde). Mr Watson was appointed as Lead Clinician in May 2017 and his tenure was due to end in April 2020. A new Lead Clinician was appointed in March 2020, however due to the ongoing COVID-19 crisis, it has been agreed that Mr Watson's tenure will be extended to 30th September 2020 and his successor will take up post on 1 October.



The Steering Group members include consultants from burns and plastic surgery and emergency departments, specialist nurses, allied health professionals, psychologists, and service managers, in addition to emergency services, third sector and patient representatives (see Appendix 1). They have a key role to play in ensuring effective two-way communication between the network and their NHS Board colleagues and that progress continues against the workplan. Through the management structure and terms of reference for the network Steering Group and sub-groups, CoBiS meets the core principles of national managed clinical networks as set out in CEL (2012) 29.

Sub-groups include:

- Communications and Engagement Group
- Education Group (although this has been absorbed as part of the Steering Group in 2019/20)
- Data Group

Workplans and reports are published on the CoBiS website, and any documents produced and reviewed by the network are publicly available for clinicians and patients to access. Resources are continuously reviewed and refreshed by the Steering Group and subgroup members.

It should be noted that the network was without a Programme Support Officer for the first quarter of the reporting period. Towards the end of the reporting period, there were a couple of changes to the programme support team, with Mr Jamie Nimmo replacing Mrs Lisa Stewart as Programme Manager and Mr Richard Crawford coming in to backfill Mr Nimmo's role as Programme Support Officer. This was a very smooth transition and has not impacted on the delivery of the workplan.

Ongoing partnership with the Scottish Government Resilience Unit, the Scottish Ambulance Service and the Scottish Trauma Network will ensure that incidents involving mass casualties, which include burns, are managed with an effective and planned approach. This extends to close working with the Scottish National

Blood Transfusion Service, for regular and exceptional supply of allografts. Dr Sharon Zahra (Consultant and Clinical Lead, Scottish National Blood Transfusion Service) presented at the CoBiS workshop at the National Scottish Trauma Network conference in June 2019, which demonstrates the close working relationship with the network.

3.2. Service Development and Delivery

3.2.1 Burns Service Model

The network was consulted in the Review of Burns Services carried out in 2016 and its recommendations have continued to inform the annual workplans.

At the National Specialist Services Committee (NSSC) meeting in March 2019, an application from NHS GG&C to host a National Burns Hub for Adults and Paediatrics was accepted in principle. The network continued to support the move towards a national burns hub in 2019/20, through discussion of triage and referral criteria, follow-up and rehabilitation requirements.

Following the CoBiS Annual Performance Review (APR) in November 2019, with an evolving picture of strategic developments that would have implications for the future of burn care, and no agreement from Board Chief Executives to fund the National Burns Hub, the newly established National Planning Board undertook to revisit the proposed service model. This review will be done in partnership with CoBiS and the Scottish Trauma Network (STN). This review will look at a more recent and comprehensive dataset, current delivery across Scotland, a horizon scan of burns care and a number of model options.

CoBiS have had, and continue to have, a crucial role to play in this process. In the early stages of evidence gathering, CoBiS circulated a staff survey to obtain feedback and opinions on burn care, as well as facilitating a patient survey through its third sector partners, including the Scottish Burned Children's Club and Changing Faces.

CoBiS CAS data was instrumental in the original review of burn services in Scotland and will continue to be utilised as part of the National Planning Board's review going forward.

CoBiS will continue to develop and embed the National Burn Care Standards and will continue to offer expertise on defining which patients should be referred at each level of care. Many of the experts involved in the review are current members of the CoBiS Steering Group, including Lead Clinician, Mr Stuart Watson. While the review is ongoing, CoBiS continues to drive improvements within the current model of care.

3.2.2 Burn Care Standards

It has been agreed by the Steering Group to adopt the UK [National Standards for Provision and Outcomes in Adult and Paediatric Burn Care](#) and to carry out peer reviews across the burns units in Scotland. It was agreed at the Steering Group meeting on 31st October 2019 that this would be a useful way of sharing best practice and identifying areas for improvement.

3.2.3 Emergency Medicine

Close links between CoBiS and the Emergency Departments (ED) in Scotland has been made possible through the inclusion of representatives from Emergency Medicine (adults and paediatrics) on the Steering Group. The key areas for joint working include provision of ED clinical pathways, collaboration on the [Trauma App](#) and targeted burns education sessions for regional Emergency Departments.

Clinical Guideline posters for the immediate management of burns in adults and children have continued to be sent out to every Emergency Department and Minor Injuries Unit in Scotland.

3.2.4 Clinical Guidelines

CoBiS has a range of [clinical guidelines](#) (adult and paediatric) accessible on the website, which includes guidance on the management of burns, and supports addressing unwarranted variation in practice. The

Emergency Department guidelines are particularly helpful for the acute medical management of burns in adults and children. During 2019-20 the network has made efforts to review the clinical guidelines and update them on the website.

The Paediatric Guidelines were reviewed by Mr Watson and circulated to the network for comment. Due to the COVID-19 crisis, the final versions of the guidelines have yet to be signed off and published on the website. This action has been rolled over from the 2019/20 workplan to the 2020/21 workplan with a revised deadline of 30/09/2020.

The Fluid Resuscitation in Adults guideline was reviewed as part of the Steering Group meeting and an amended version drafted by representatives from NHS Greater Glasgow and Clyde, NHS Grampian and NHS Lothian.

A new Physiotherapy and Occupational Therapy page has been added to the CoBiS website, with an additional set of guidelines used in NHS GG&C for various exercises after burn injuries. These guidelines will be reviewed to bring them in line with the CoBiS national guidelines.



3.3. Stakeholder Communication and Engagement

CoBiS has a number of channels of communication and engagement, including regional and national events, social media and a well-developed website. CoBiS also engages with a number of campaigns and projects with partner organisations including The Scottish Government, third sector and the Scottish Fire and Rescue Service. It was also agreed at the Steering Group meeting in January 2020 that a newsletter would be produced going forward, to keep the network up-to-date with all the latest developments, news, campaigns, projects and events.

3.3.1 Conference

CoBiS, the Scottish Trauma Network (STN) and Scottish Acquired Brain Injury Network (SABIN) delivered a joint national conference on 26th and 27th June 2019. This attracted approximately 450 delegates and helped to raise the profile of CoBiS across a broader community of clinicians and services.

One of the aims of jointly delivering the national STN conference was to increase stakeholder engagement with a broader group of clinicians. Over the 2-day conference the network gained 60 new Twitter followers, including high-profile followers such as Angiolina Foster (CEO NHS24), in addition to those signing up for

COBIS communications.

The network presented two breakout sessions ('Current Management of Burns' and 'Multidisciplinary Management of Burns') with invited speakers from outwith the CoBiS network, including Dr Sharon Zahra (Consultant and Clinical Lead, Scottish National Blood Transfusion Service), Ms Kathleen Harvey-Wood (Principal Clinical Scientist, NHS Greater Glasgow and Clyde) and Mrs Fiona Graham (Paediatric Dietitian, NHS Greater Glasgow and Clyde).

While the joint conference was a success, the CoBiS Steering Group agreed that it would ideally like to continue delivering a separate CoBiS annual conference, whilst still contributing to the STN one. Plans for a CoBiS annual conference in November 2020 have since been put on hold due to the COVID-19 crisis.

3.3.2 A Consultation on Fireworks in Scotland

In response to attacks on emergency services with fireworks, the Scottish Government undertook a consultation on the use of fireworks in 2019.

CoBiS has been collaborating with the Scottish Government on 'A Consultation On Fireworks in Scotland' led by Ms Ash Denham, Minister for Community Safety. The network supported this consultation by gathering the views of the burns community.

As part of the consultation, there has been an online survey, a number of focus groups, a social media campaign and a round table event earlier in the year, which was extremely well attended. There were over 16,000 responses to the survey, which took place over a 14-week period, and 80% of respondents welcomed a ban on the sale of fireworks to the public, whilst 92% were in favour of more controls.

The network also assisted Dr Eleanor Robertson (MBChB BMSc MRCS MD, NHS Greater Glasgow and Clyde) with the collection of firework injury data over the period 15th October to 12th November 2019. This was done via a survey of ED and MIU with patients presenting with firework-related injuries. The survey captured information on the cause and location of the incident, site of injury and burn management. This was the first survey of its kind in Scotland. CoBiS was referenced in the Scottish Government's recommendations, demonstrating the quality and importance of this work.

A request was made to NHS GGC for coded admission and procedure data from 2008 to 2019. Permissions were granted and patient care episodes were exported from Trak (ICD-10 diagnosis codes for firework injuries) and OPERA (OPCS-4 procedure codes). Analysis was undertaken by Dr Robertson to investigate patient demographic information, injury pattern and treatment modalities.

The first key point to note from the analysis was that 41 (60%) of the patients presented in the month of November. Of all the cases, 46 (68%) happened between 01/10 and 30/11. 30 (44%) of all cases presented between 05/11 and 07/11. Another key finding was that 63 (93%) of the patients were male, with an average age of 22 years old.

A firework injury survey was developed based on similar surveys ('Firework Injuries in Great Britain' and Northern Ireland 'FWK1'). All 84 Scottish ED and MIU units from 14 NHS Health Boards were contacted directly and invited to submit firework injury attendance data from 15th October 2019 to 12th November 2019. A total of 41 forms were returned from 23 ED MIU via the CoBiS mailbox for processing. It should be noted that the dataset is still to be finalised, due to delays between injury and completion of clinical coding. The following results are therefore the latest as of 31.03.2020.

The map in figure 1 below demonstrates the distribution of firework related injuries recorded throughout Scotland.

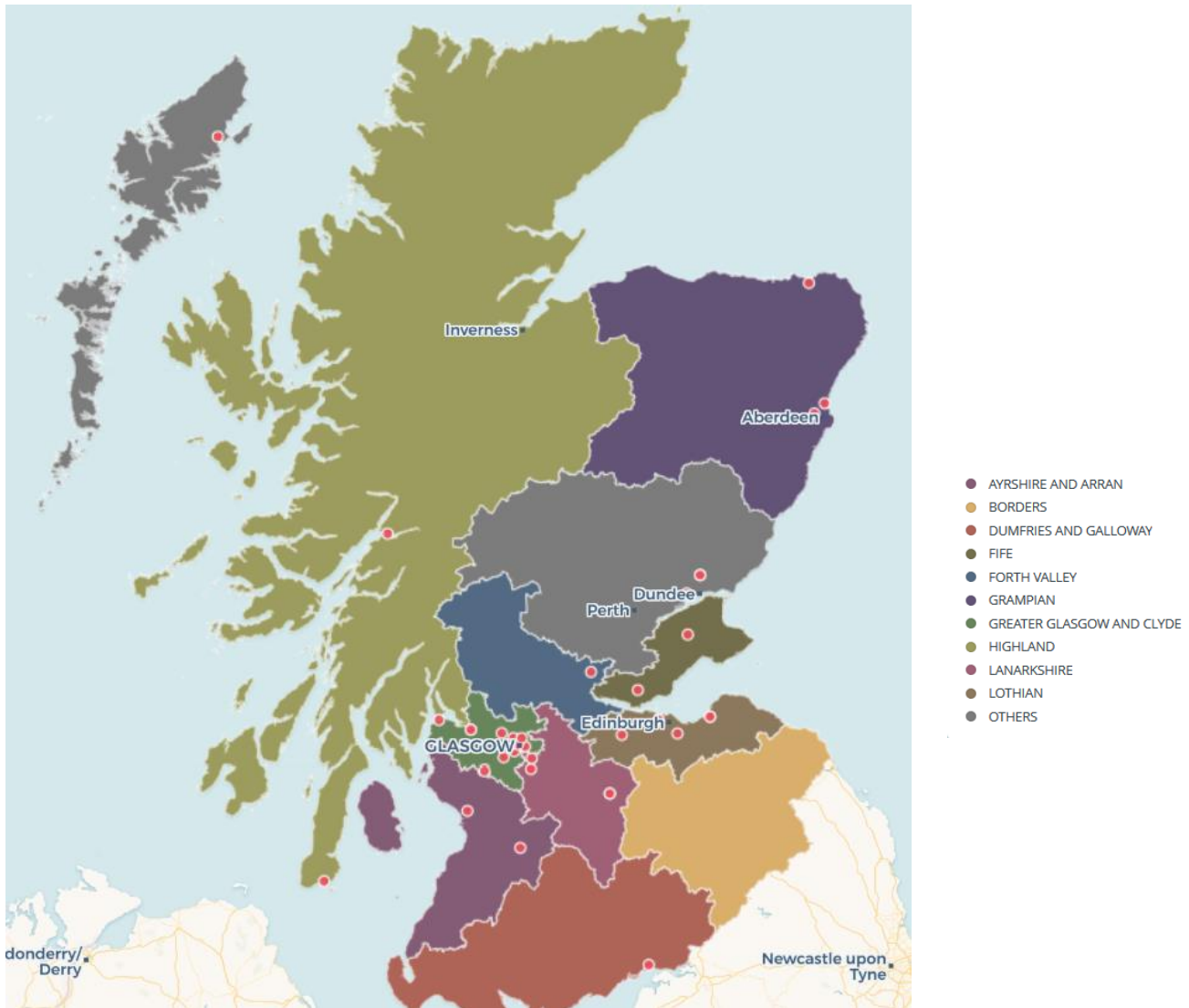


Figure 1 Map of Patients Attending Hospital with Firework Injuries (15th October to 12th November 2019)

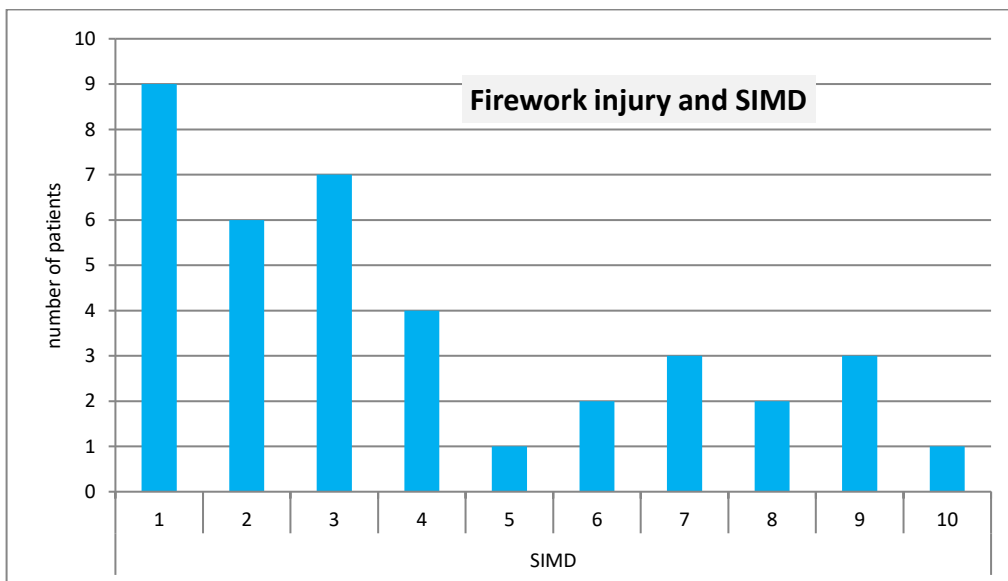


Figure 2 SIMD for Firework Injuries

Figure 2 above shows the SIMD (Scottish Index of Multiple Deprivation) analysis on available postcodes (38). A significant correlation was demonstrated between lower SIMD and firework injury.

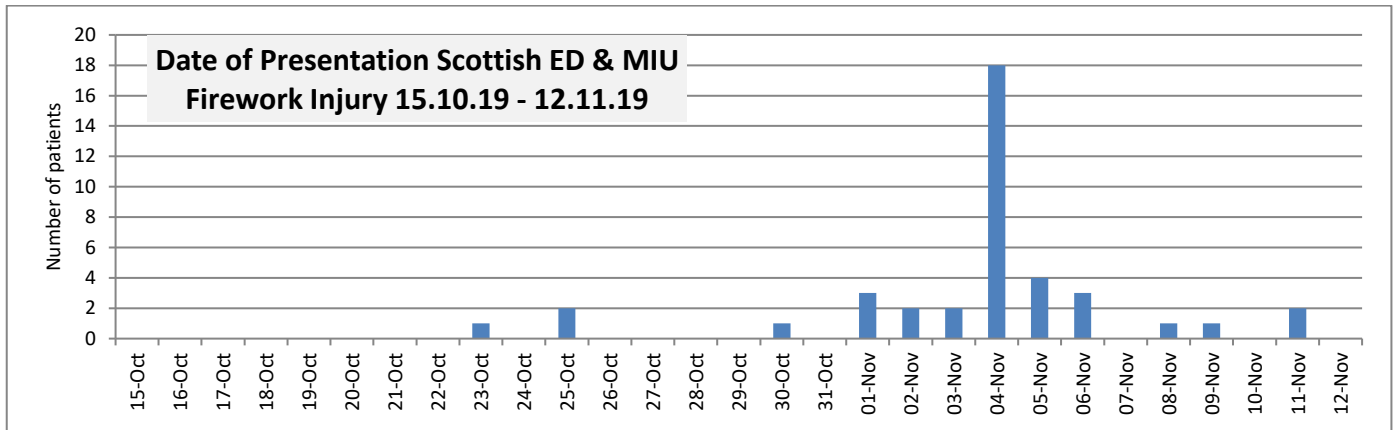


Figure 3 Date of Presentation at Scottish ED and MIU with Firework Injury between 15.10.19 and 12.11.19

Figure 3 above highlights the prevalence of firework related injuries on and around Guy Fawkes Night.

As with the preliminary analysis using the NHS GGC data, the majority of patients, 30 (68%) were male. The average age of male patients was 19.6 years old.

Figure 4 below highlights the frequency of body parts injured in those aged 16 and under and those aged 17 and over. The most affected area in both age groups was the hand and wrist, followed by face and neck.

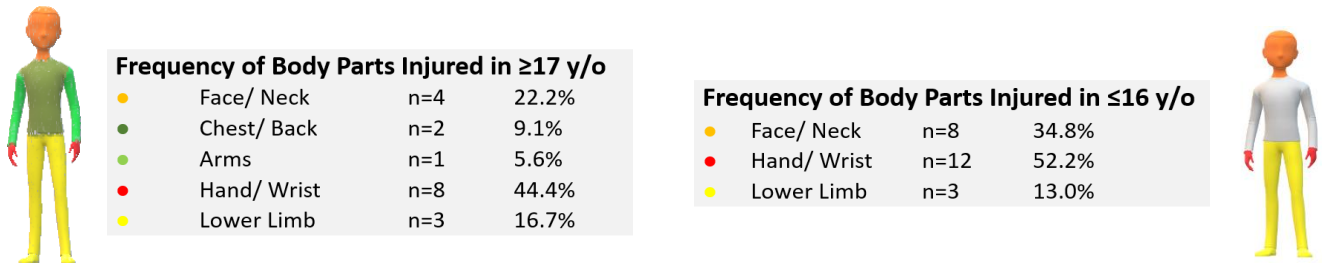


Figure 4 Frequency of Body Parts Injured

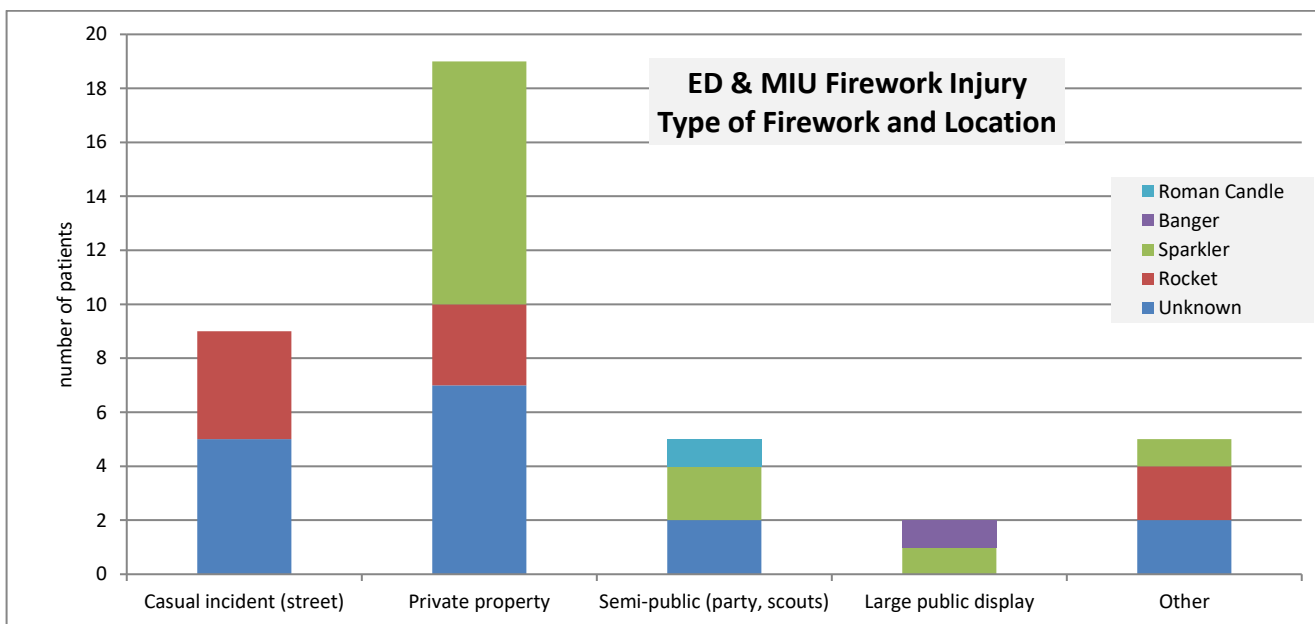


Figure 5 ED and MIU Firework Injury Type of Firework and Location

Figure 5 above shows more detail about the type of firework that caused the injury and the location of where the injury occurred. Only 2 (4.9%) of the 41 injuries were sustained at a large public display, whereas 19 (46.3%) occurred at a private property.

3.3.3 Social Media

The network has updated its Communication Strategy to include the scope and type of communications required, including use of social media. The CoBiS [Twitter account](#) has generated well over 700 followers since November 2017. During 2019/20, there were 91 Tweets sent from the CoBiS Twitter account, along with 311 reTweets and 17 replies. These generated 949 'likes', 3931 'engagements' and 129644 'impressions'. Figure 6 below shows a more detailed breakdown of the Twitter statistics for 2019/20.

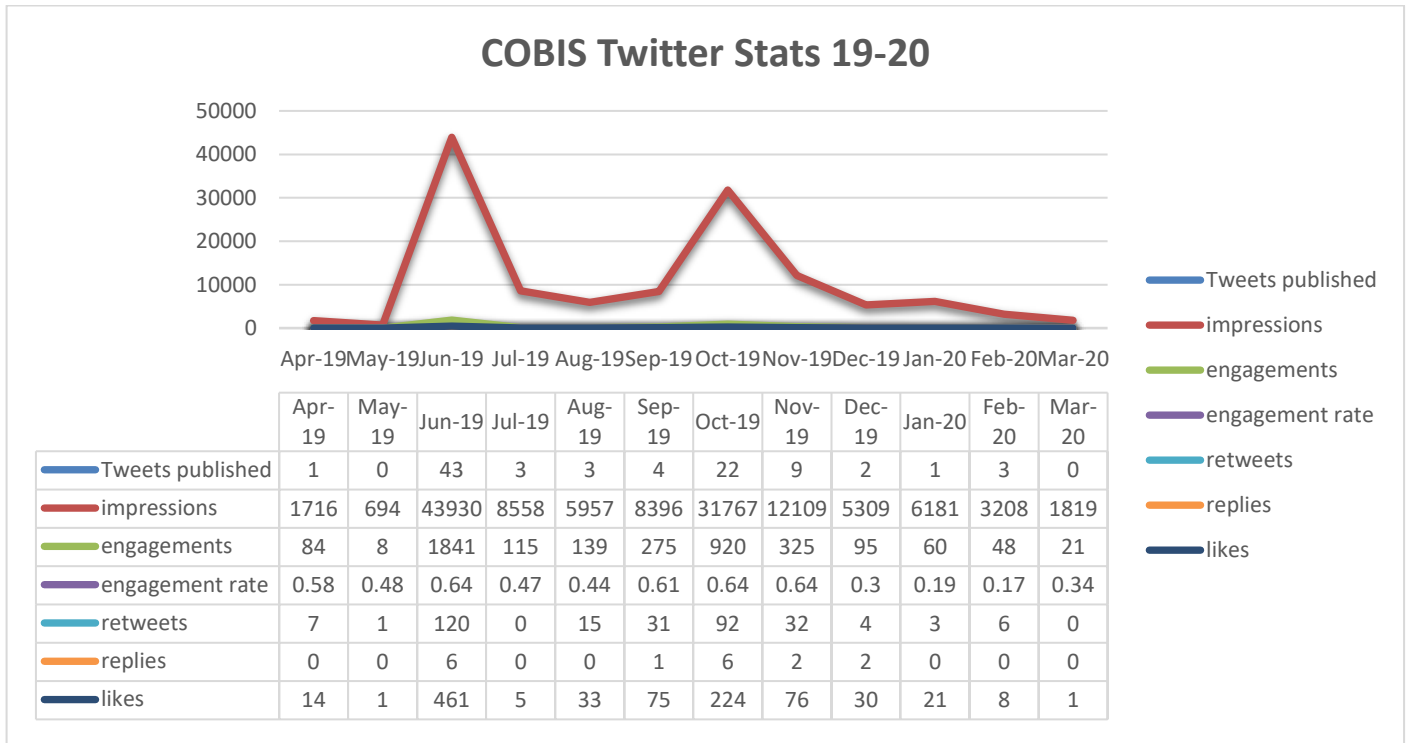


Figure 6 Overall CoBiS Twitter statistics for 2019/20

Figure 7 below demonstrates the relationship between the number of Tweets sent within a single month and the impressions generated. There are distinct spikes around the time of the joint STN conference and the Fireworks Injury data collection period. The chart below emphasises the importance of sending Tweets in raising the network's profile and increasing engagement.

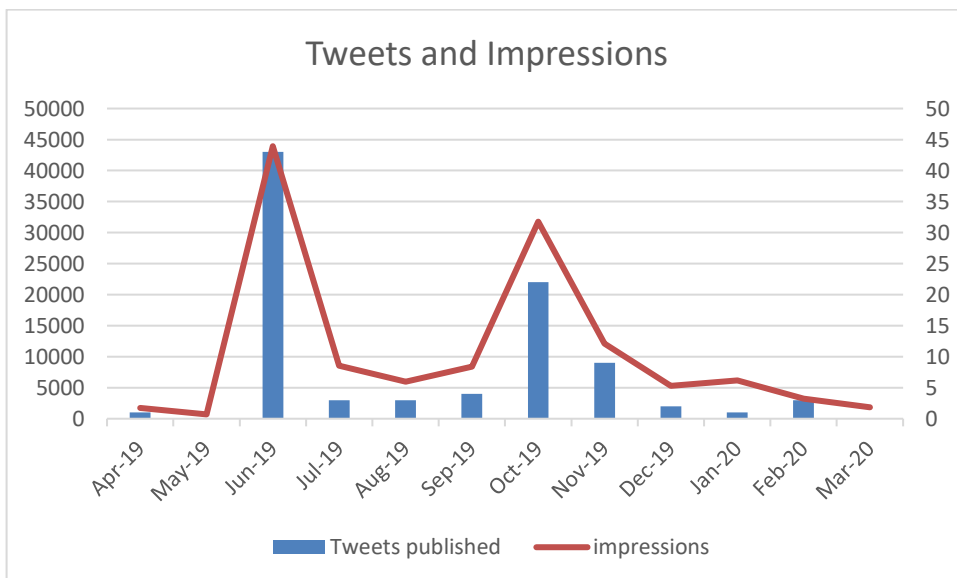


Figure 7 Number of Tweets and Impressions on CoBiS Twitter account for 2019/20

3.2.4 Website

The CoBiS website has been updated and refreshed throughout the latest reporting period. A physiotherapy and occupational therapy zone has been developed on the CoBiS website to promote the sharing of clinical expertise across Scotland. This initiative attracted 120 visitors to the website the day the network announced this via email and Twitter. Figure 8 below shows a breakdown of the pageviews and sessions in the year 2019/20, compared to 2018/19. This shows an increase of 113% for pageviews and an increase of 101% for sessions. The clinical guidelines continue to be the most accessed pages, reinforcing the value placed on these by the network.

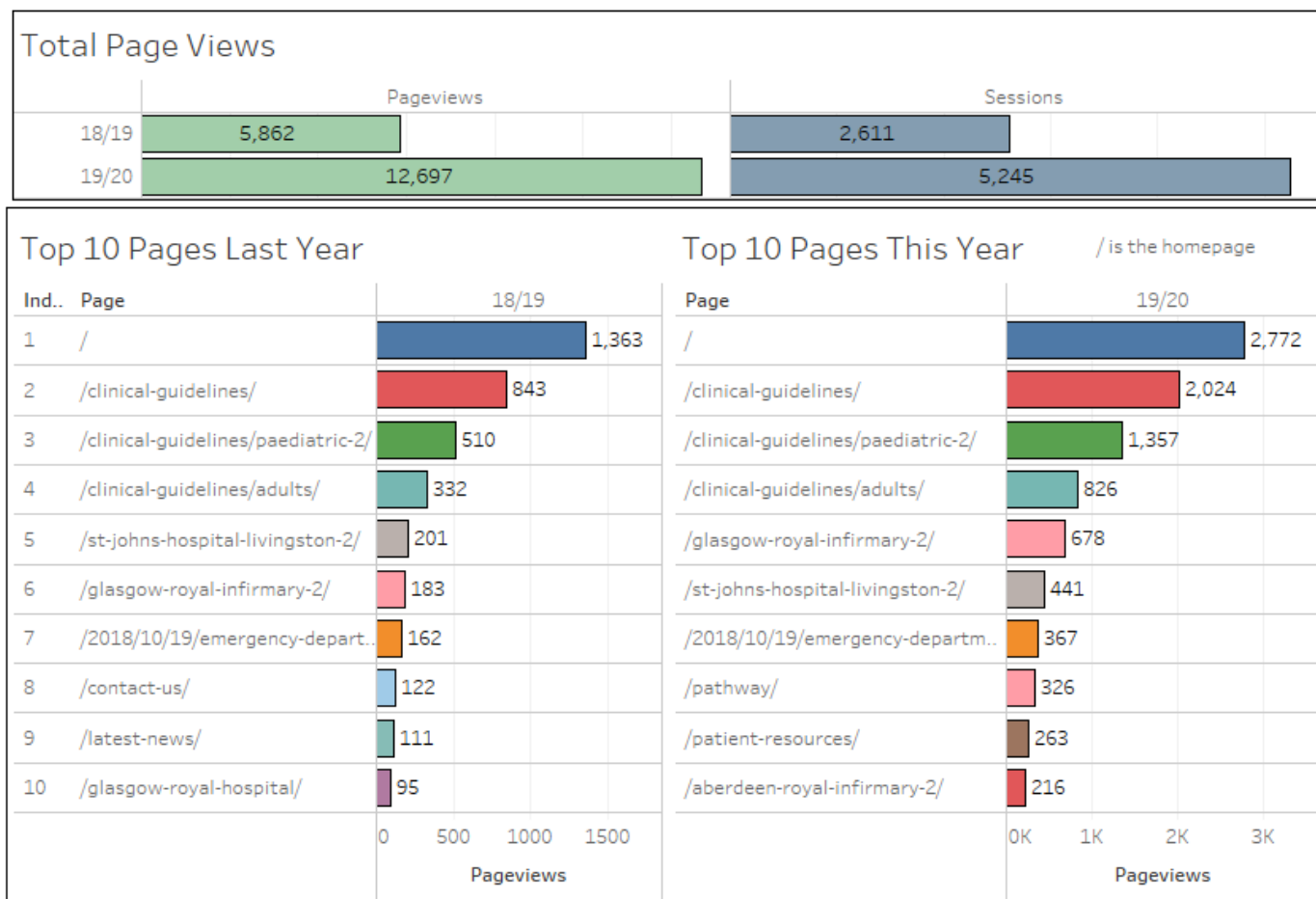


Figure 8 CoBiS Web Analytics for 2019/20

3.4. Education

In 2019-20 CoBiS's key priority was the implementation of the Education Strategy including delivery of education sessions to the wider burn treatment community in Scotland.

The Education Strategy has four key themes:

- Building a specialist workforce within burns care
- Improving patient experience and supported self-management
- Supporting burns hub and facility services and promoting education beyond burns care, for example, in primary care
- Enhancing educational infrastructure, including educational opportunities in a range of formats

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Between April 2019-March 2020 CoBiS has delivered the following education activities:

- Regional education events were held at Raigmore Hospital (NHS Highland), Belford Hospital (NHS Highland) and Monklands Hospital (NHS Lanarkshire). The sessions included the medical and nursing management of burns and practical patient assessment and dressings demonstrations.



- Creation of a series of short videos (in collaboration with NHS Greater Glasgow and Clyde) to assist clinicians with assessment and treatment in the acute presentation of burns in Emergency Departments and the ongoing management and dressing of burns in adults and paediatrics. Links to these will be included on the CoBiS website, which meets the network's objective to provide education in a range of formats and are of particular benefit to remote and rural communities.

- Scottish Trauma Network (STN)/ CoBiS/ Scottish Acquired Brain Injury (SABIN) national conference on 26th – 27th June 2019. This attracted approximately 450 delegates and raised the profile of CoBiS across a broader community of clinicians and services.



Additional content for the CoBiS website including links, [patient information leaflets](#) and updated clinical guidelines. A new physiotherapy and occupational therapy page has been added to the website. Work has also been done to bring the third sector pages up-to-date in collaboration with Changing Faces and the Scottish Burned Children's Club.

3.5. Audit and Continuous Quality Improvement

In 2017-18 the CoBiS Steering Group produced and approved its [Quality Strategy](#), which was reviewed and amended in March 2019.

3.5.1 Clinical Audit System

The network is collaborating with the Information Management Service (IMS) to improve and validate the data recorded through the Clinical Audit System (CAS). IMS is leading on data management, liaising directly with clinical users of CAS, providing training where required and producing local data reports. Quarterly data reports generated by IMS, and shared with the burns units, provide an opportunity for clinicians to monitor progress and make improvements with data collection.

A Data Group was established in October 2018 to make refinements to the CAS data set, ensuring the information collected supports the audit of burns services. Data collection has improved significantly as a result, particularly in Greater Glasgow & Clyde and Lothian.

The network has devised a 'Burns Care Bundle', which prompts clinicians to provide key elements of care for patients with a burn of more than 15% (adult) and 10% (paediatric). Completion of the key elements of the bundle is recorded on the Clinical Audit System (CAS) and demonstrates that patients have received recommended healthcare interventions.

Figure 9 below shows the ratio of patients with the total surface burn area (TBSA) recorded on CAS by reporting year. The percentage of TBSA burn is important as, if a patient has a burn of 15% (adult) or 10% (child) or higher, then a care bundle of interventions is clinically recommended. If the TBSA is not recorded on CAS, then completion of the care bundle data cannot be measured. While there was improvement in data completion from 2018/19, this has slipped a bit in the last reporting period.

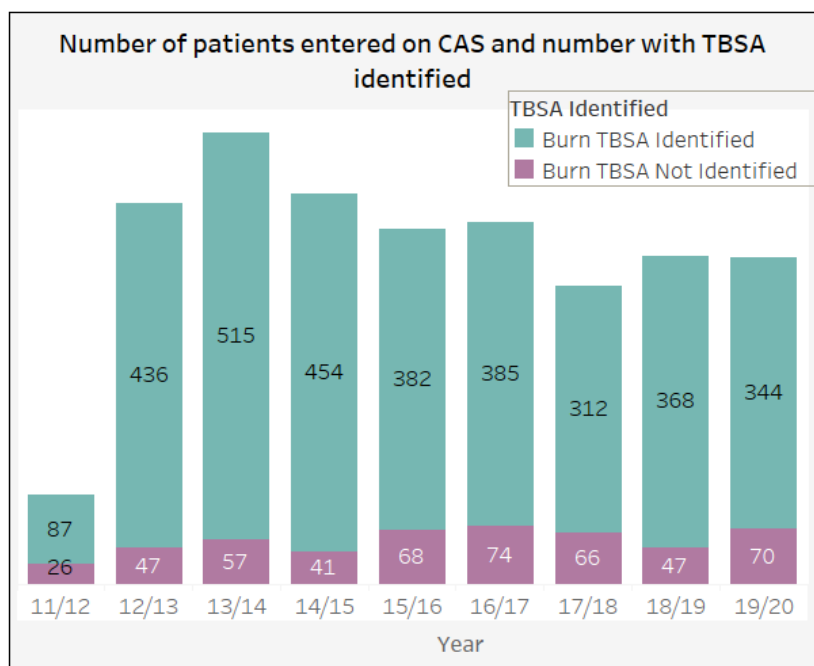


Figure 9 TBSA recorded on CAS by reporting period

Figure 10 below shows the number of burns patients added to CAS by reporting year. As with last year, this illustrates some burns units are still having difficulty in submitting data on a regular basis. The Data group will continue to work with individual boards to ensure staff are trained accordingly and support is in place to help backdate data. The review of burns services in Scotland will also provide additional support in collating and updating data. Ninewells in NHS Tayside has faced a number of issues including a reduction in burns patient beds and the loss of several experienced staff members with burns expertise. These issues have contributed to the lack of data collected in the last reporting period.

CAS numbers collected in the Clinical Audit System by Injury Date (Financial Year)									
	12/13	13/14	14/15	15/16	16/17	17/18	18/19	19/20	Grand ..
NHS GRAMPIAN	35	37	29	11	27	45	21	47	247
NHS GREATER GLASGOW & CLYDE	274	307	283	282	310	272	292	275	2,282
NHS LOTHIAN	158	195	161	125	88	48	100	88	946
NHS TAYSIDE	6	20	6	26	16				74
Grand Total	473	559	479	444	441	365	413	410	3,549

Figure 10 Patients entered onto CAS by reporting period

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Figure 11 below outlines the SIMD16 Deprivation scores. SIMD16 is made up from several metrics to rank a patient based on where they stay. The patients are split into 5 quintiles which allow us to group the Health Board Patient population with 1 being the most deprived group and 5 being the least deprived group. Those in quintile 1 (29.2%) were 3 times more likely to present with a burn injury than those in quintile 5 (10.03%).

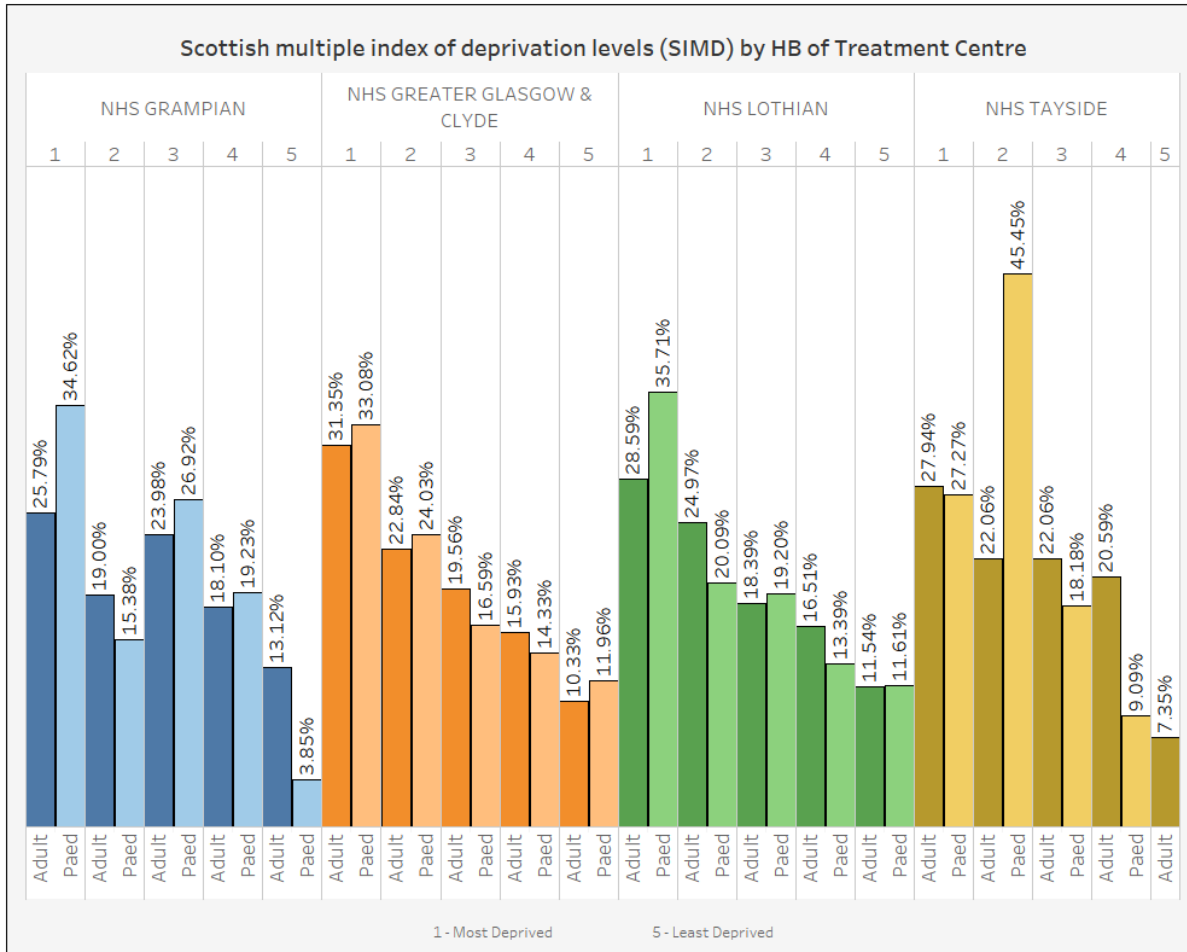


Figure 11 SIMD16 Deprivation levels of burns patients

Figure 12 below shows the referral pathway of patients admitted to three of the four main burns units from their board of residence.

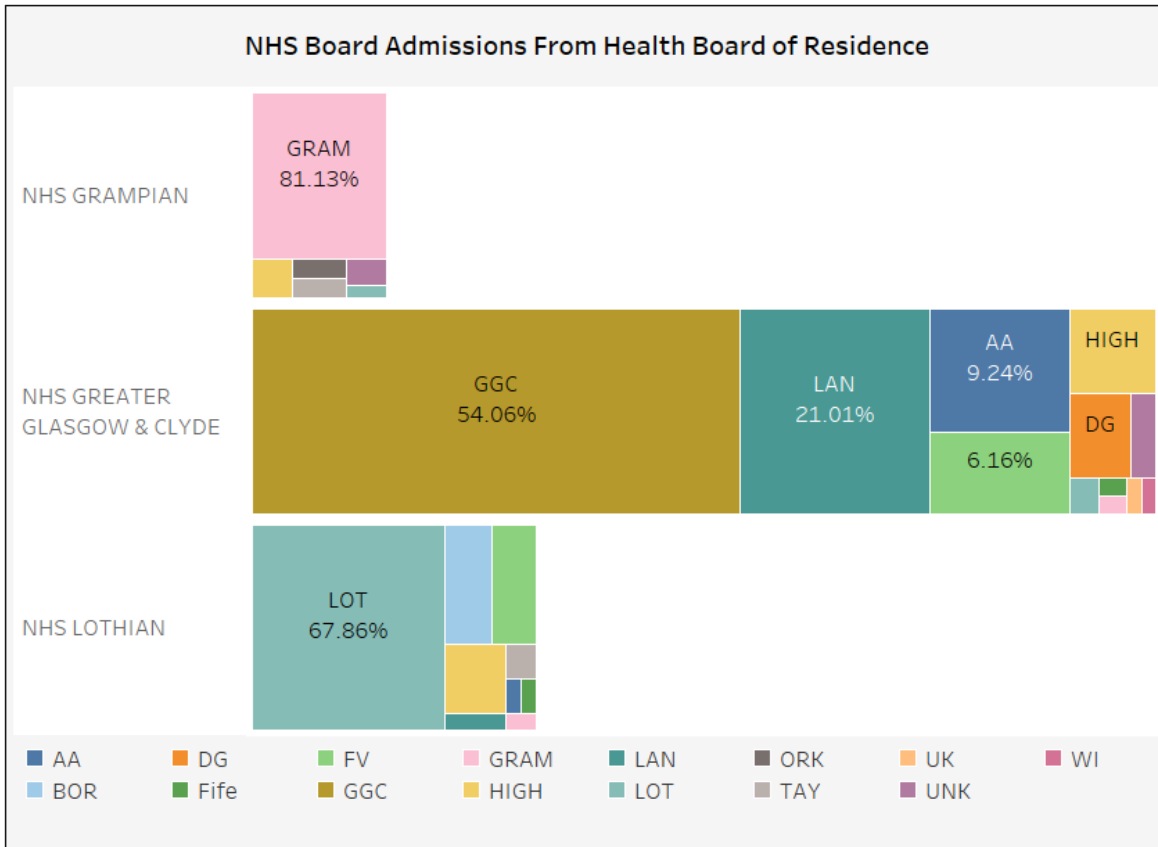


Figure 12 NHS board admissions by health board of residence

Figure 13 below shows a breakdown of burns injury categories recorded on CAS. 68% of paediatric burn injuries were caused by hot liquids in 2019/20.

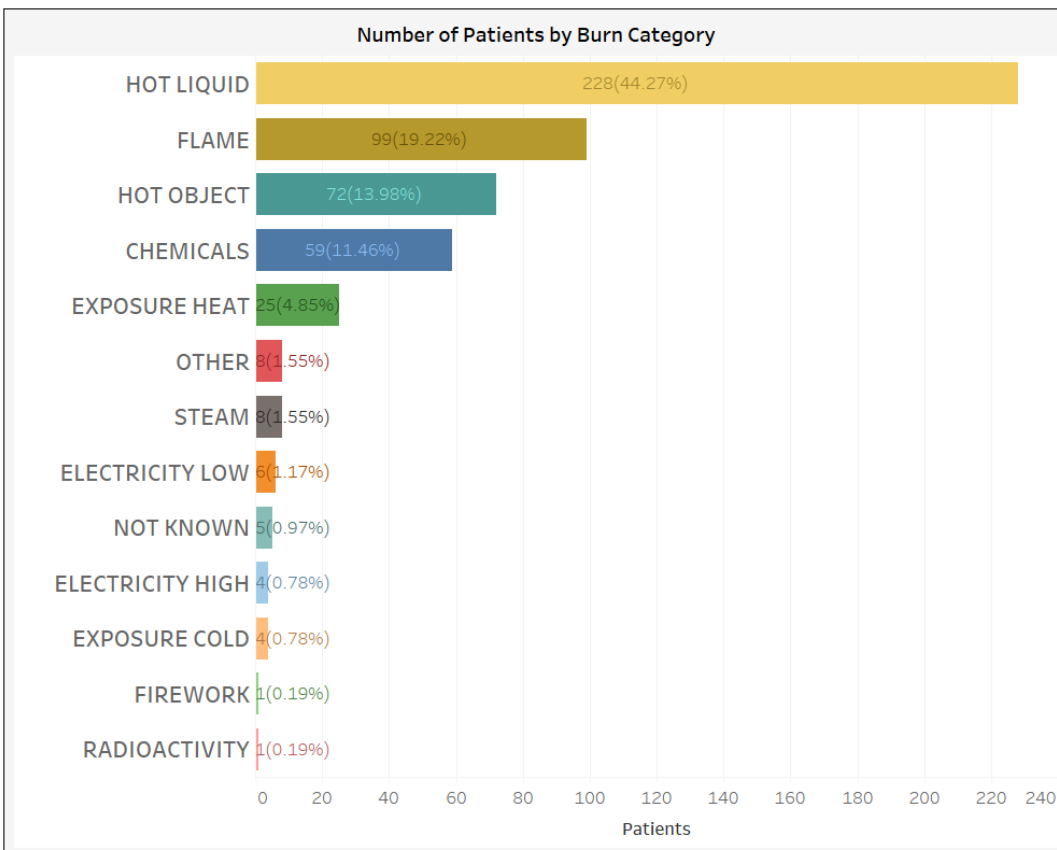


Figure 13 Burns injury categories as recorded on CAS

3.5.2 Scottish Burned Children's Club Quality Improvement Project

The network's key quality improvement project is to improve follow-up support for children and young people and their families through the Scottish Burned Children's Club (SBCC) - a Third Sector Organisation partner with CoBiS. A driver diagram ([Appendix 2](#)) has been developed and improvement in the number and scope of referrals will be measured. Baseline data indicates that referrals are submitted from NHS Greater Glasgow and Clyde only. Improvement work will focus on promotion of the excellent support offered by the SBCC amongst clinicians across Scotland. This is in line with the [National Standards for Provision and Outcomes in Adult and Paediatric Burn Care](#) (2018) that all patients should be offered burn-specific support resources.



The aims of the project include:

- Improve the referral process through online access (via SBCC and CoBiS websites)
- Improve referral numbers by 20%
- Ensure referrals are coming from health board areas other than NHS Greater Glasgow & Clyde
- Develop marketing materials and good news stories
- Develop the SBCC page on the CoBiS website to include pictures, a video clip, essential information, good news stories and a referral form
- Support SBCC to develop a robust database of members to include where referrals have come from and when referrals were made
- Ensure referral discussions as well as referrals are recorded and followed up
- Organise road shows along with Changing Faces to promote the SBCC

The results of the project are expected to be reported on by the end of March 2021.

3.5.3 Burns Mortality Audit Meeting

The 2019 National (UK and Ireland) Burns Mortality Audit meeting was attended by Mr Stuart Watson and Dr Charlotte Gilhooly (Chair of the COBIS Data Group) on 1st July 2019. The 2019 External Audit Chair, Professor Peter Vogt, was very impressed with the meeting, and he commented on the high standard of contributions that stimulated productive discussions. Mr Watson presented a mortality case from Scotland, which was discussed, and action points taken forward for implementation. It was agreed that this national forum offers a good learning experience and useful governance process for national audit.

3.6. Value

The aim of the CoBiS national and regional education events is to provide clinicians working in NHS Scotland with the relevant skills and knowledge to deliver the best care for patients following a burn or scald.

Providing clinical guidance on the medical and nursing management of burns will ensure evidence-based practice and equity of access to high quality care to reduce harm and unwarranted variation. The inclusion of video clips on the CoBiS website will help to ensure access to training and best practice is available throughout Scotland.

CoBiS produced a branded postcard and fridge magnet with clear instructions on the immediate management of a burn, which continues to be requested and utilised throughout Scotland. The network maximises opportunities to promote this targeted first aid information at National Network Management Service events and on National Burns Awareness Day in October and around the 5th November. The prompt and effective application of burns first aid has been shown to positively impact on the burn outcome, preventing further tissue damage and reducing subsequent morbidity ([British Burn Association First Aid Clinical Practice Guidelines](#)).

CoBiS has been working with a group led by the Scottish Government to develop and action plan on

improving the sale and use of fireworks in Scotland. The network has supported a large-scale survey across all Emergency Departments and Minor Injury Units in Scotland. The surveys have been returned to CoBiS and collated and shared with Dr Eleanor Robertson who has led on this work. This ongoing work will help to promote safety awareness and accident prevention.

4. Plans for the Year Ahead

The key role for the network in the year ahead will be to collaborate with National Planning to support the review of burn services in Scotland.

Due to the COVID-19 crisis, there is great uncertainty around how much impact this will have on the ability to achieve the outcomes outlined in the workplan. It has already been agreed that the changeover of Lead Clinician will be postponed to 1st October 2020.

It was highlighted in the Review of Burns Services that, owing to the reducing number of patients presenting each year in the local burns facilities, it is challenging for medical, surgical, nursing and rehabilitation clinicians to maintain their skills and knowledge in the management of burns. The network has a key role in providing the strategic framework for the ongoing provision of specialist education and clinical guidance to ensure safe, effective and person-centred care.

A sub-set of the UK National Burn Care Standards will be agreed by the network for benchmarking of services in NHS Scotland. In 2020/21 peer review site visits will be carried out to assess the units' facilities and to support service improvements.

In line with the NHS National Services Scotland guidance on guideline development and governance for (which states that guidelines need to be reviewed every 3 years to ensure that they are still fit for purpose and up to date), all CoBiS guidelines will be included in the 2020/21 workplan for review. A CoBiS newsletter will be introduced and circulated on a quarterly basis. This is to improve communications and engagement with the network and to ensure that all of the latest developments are outlined clearly.

It was hoped that a CoBiS annual conference would take place in November 2020, however this is likely to be postponed due to the COVID-19 crisis. Regional teaching sessions will also be affected by this and the network may struggle to deliver three of these across Scotland in 2020/21. However, progress is expected to be made with the training videos recorded in 2019, with these expected to be added to the CoBiS website in summer 2020. This will make training accessible in even the most remote parts of the country.

CoBiS will continue to work with third sector partners including the Scottish Burned Children's Club and Changing Faces to ensure patients receive the best possible aftercare.

Work will continue on the Clinical Audit System, with missing data highlighted and targeted on a quarterly basis, by health board. The Data Group will also work closely with National Planning to collate a up-to-date data to assist with the review of burn services in Scotland.

The 2020/21 workplan was formulated by the network Steering Group and each of this year's anticipated outcomes is linked to the principles of Realistic Medicine.

4.1 Risks

1. There is a risk that the network will not be able to deliver all of the actions outlined in the workplan for 2020/21. This is due to the impact the COVID-19 crisis has had and will continue to have on the network throughout the year and a lack of availability of clinical staff to contribute to the delivery of the workplan. The new Lead Clinician will now start on 1st October 2020 to ensure there is minimal disruption to the delivery of CoBiS' workplan as well as burn services.

2. There is a risk that the network will not be able to deliver 3 Steering Group meetings and 3 (of each) subgroup meetings in 2020/21. This is due to the impact the COVID-19 crisis has had and will continue to have on the network throughout the year and a lack of availability of clinical staff to contribute to these meetings.
3. There is a risk that the network will not be able to deliver an annual event or regional educational sessions in 2020/21. This is due to the impact the COVID-19 crisis has had and will continue to have on the network throughout the year. With social distancing in place for the foreseeable future, it is unlikely that meetings of this nature will be allowed to take place. There will also likely be a lack of clinical availability to facilitate these.
4. There is a risk that some clinical guidelines may not be reviewed on time. This is due to the impact the COVID-19 crisis has had and will continue to have on those individuals that are part of the review process.
5. There is a risk that CAS data collection could be negatively impacted. This is due to the impact the COVID-19 crisis has had and will continue to have on the network throughout the year and a lack of availability of clinical staff to enter this data.

5. Detailed Description of Progress in 2019/20

Care of Burns in Scotland (COBIS) Network WORKPLAN – 2019-20 Update

When defining network objectives please consider the Institute of Medicine’s six dimensions of quality, which are central to NHS Scotland’s approach to systems-based healthcare quality improvement:

1. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
3. **Effective:** providing services based on scientific knowledge;
4. **Efficient:** avoiding waste, including waste of equipment, supplies, ideas, and energy;
5. **Equitable:** providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
6. **Timely:** reducing waits and sometimes harmful delays for both those who receive care and those who give care.

Key

RAGB status	Description
RED (R)	The network is unlikely to achieve the objective by the agreed end date.
AMBER (A)	There is a risk that the network will not achieve the objective by the agreed end date but progress has been made.
GREEN (G)	The network is on track to achieve the objective by the agreed end date.
BLUE (B)	The network has been successful in achieving the network objective to plan.

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Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
1. Effective Network Structure and Governance [linked to Quality Dimensions 3,4,5,6]						
2019-01	To facilitate delivery of the 2019-20 workplan, the network will organise 3 Steering Group and 3 of each sub-group meetings by 2020	01/04/2019	Steering Group and Sub-Group membership	Steering Group meetings and subgroup meetings have all taken place as planned.	Effective delivery of the COBIS network workplan to ensure continuation of progress.	B
2. Service Development and Delivery [linked to Quality Dimensions 1,2,3,4,5,6]						
2019-02	By March 2020 review existing and develop new clinical guidelines relevant to burns services.	01/04/2019	Education Group	Currently on hold due to the COVID-19 crisis. This has been included in the workplan for next year with a reviewed deadline.	Delivery of evidence-based practice and equity of access to high quality care across Scotland to reduce harm and unwarranted variation.	A
2019-03	By September 2019 review patient and family burns information, with the aim of developing a single Scottish information leaflet.	01/04/2019	Communi-- cation Group	Universal burns management leaflet has been drafted by clinicians across Scotland. Next version being developed by key clinicians.	Patients and families are supported to manage their condition and to share in informed decision-making.	G

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Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
3. Stakeholder Communication and Engagement [linked to Quality Dimensions 1,3,4,5,6]						
2019-04	By June 2019 review and update the COBIS Communication Strategy to meet the needs of all stakeholders, including provision of information and effective sign-posting through the website.	01/04/2019-01/07/2019	Communi-- cation Group	Communication Strategy reviewed July 2019 and QI project identified. Collaboration with the Scottish Government Consultation on Fireworks in Scotland.	Stakeholders across Scotland will inform the annual workplan to ensure a personalised approach to care.	B
2019-05	By October 2019 develop a collaborative youth campaign to raise awareness of burns risk factors for young people.	01/04/2019	Communi-- cation Group	QI Project aims to increase referrals to the Scottish Burned Children's Club to ensure equitable patient support across Scotland. Will continue into next year.	Through joint working the campaign will reduce risk of injury to young people.	G
4. Education [linked to Quality Dimensions 1,2,3,4,5,6]						
2019-06	By March 2020 deliver one national conference and two regional teaching events.	01/04/2019	Education Group	The COBIS network joined forces with the Scottish Trauma Network and the Scottish Acquired Brain Injury Network to deliver a two-day national conference in June 2019. 3 regional training events have also been delivered.	Healthcare professionals across Scotland share and increase their knowledge and skills and in burns management.	B

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Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
2019-07	By September 2019 review and update the Education Strategy to support stakeholders' learning needs in response to the emerging burns service model.	01/04/2019	Education Group	The network has collaborated with NHSGGC and Medreach to create a series of short videos on the current management of burns and burns assessment in Emergency Departments.	The workforce is valued and has access to evidence-based specialist burns training and resources for improved health and care.	G
5. Audit and Continuous Quality Improvement <small>[[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2019-08	By December 2019 improve the quality of the Clinical Audit System dataset and provide clinical access to dashboard.	01/04/2019	Data Group	Data Group has identified actions to engage clinicians in CAS training and review of dataset. Key areas identified for improvement. Work ongoing.	Clinicians are able to access their data and audit patient outcomes to drive improvement.	G
2019-09	By March 2020 agree a subset of the UK National Burn Care Standards for implementation in Scotland and audit performance against these to drive improvement.	01/04/2019	Steering Group	The four burns centres have been asked to assess current provision against UK standards as a baseline. Steering Group has agreed to carry out peer review site visits to assess against Standards.	Patients will benefit from burns centres working together to provide optimum care and manage risk better.	A

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Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
6. Value [linked to Quality Dimensions 1,2,3,4,5,6]						
2019-10	By July 2019 audit the impact of the Emergency Department burns algorithms to gather evidence of clinical value.	01/04/2019	Communi-- cation Group	The Comms and Engagement Group has identified a clinician (Mr Thomas Reekie) to review the use of acute burns management posters within Emergency Departments and Minor Injury Units in Scotland.	Effective communication between those involved in patient decisions and contribute to patient care.	A

6. Proposed Work Plan for 2020/21

Care of Burns in Scotland (COBIS) Network WORKPLAN – 2020-21

When defining network objectives please consider the Institute of Medicine’s six dimensions of quality, which are central to NHS Scotland’s approach to systems-based healthcare quality improvement:

7. **Person-centred:** providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
8. **Safe:** avoiding injuries to patients from healthcare that is intended to help them;
9. **Effective:** providing services based on scientific knowledge;
10. **Efficient:** avoiding waste, including waste of equipment, supplies, ideas, and energy;
11. **Equitable:** providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
12. **Timely:** reducing waits and sometimes harmful delays for both those who receive care and those who give care.

Key

RAGB status	Description
RED (R)	The network is unlikely to achieve the objective by the agreed end date.
AMBER (A)	There is a risk that the network will not achieve the objective by the agreed end date but progress has been made.
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Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
1. Effective Network Structure and Governance [linked to Quality Dimensions 3,4,5,6]						
2020-01	The network will organise 3 Steering Group meetings and 3 (of each) sub-group meetings by 2021 to ensure effective delivery of the 2020-21 workplan.	01/04/2020 - 31/03/2021	Steering Group and Sub-Group membership	The first of each of the planned meetings have been postponed, cancelled or moved to video conferencing as the COVID-19 crisis has developed. There is a risk that the number of meetings throughout the year will be reduced as a result.	Effective delivery of the COBIS network workplan to ensure continuation of progress	A
2. Service Development and Delivery [linked to Quality Dimensions 1,2,3,4,5,6]						
2020-02	By September 2020, ensure all clinical guidelines on the COBIS website are up-to-date and on the correct templates.	01/04/2019 - 30/09/2020	Education Group	Current review of adult and paediatric guidelines is ongoing and deadline has been pushed back to September 2020 from March 2020 as a result of the COVID-19 crisis.	Delivery of evidence-based practice and equity of access to high quality care across Scotland to reduce harm and unwarranted variation	G
3. Stakeholder Communication and Engagement [linked to Quality Dimensions 1,3,4,5,6]						

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Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
2020-03	Introduce a quarterly COBIS newsletter, delivering 4 newsletters by March 2021.	01/04/2020 - 31/03/2021	Communi-- cations Group	The first edition of the COBIS newsletter will go out by the end of June 2020, accounting for the COVID-19 crisis and changes to working arrangements in the first quarter of the year.	Quarterly newsletter communications will help to keep stakeholders up-to-date with all network-related developments.	G
4. Education [linked to Quality Dimensions 1,2,3,4,5,6]						
2020-04	By March 2021 deliver a COBIS national conference.	01/04/2020 - 31/03/2021	Education Group	All meetings and training sessions are currently suspended and there is a risk that the network will not be able to host an annual conference this year.	Opportunity to share best practice and developments within burn care.	A
2020-05	By March 2021 deliver regional burns care training across three locations throughout Scotland.	01/04/2020 - 31/03/2021	Education Group	Regional training sessions may have to be put off, due to the COVID-19 crisis.	Opportunity to share best practice and developments within burn care.	A
2020-06	Access training videos filmed in 2019 for adding to the COBIS website by June 2020	01/04/2020 - 30/06/2020	Education Group	£2000 payment made to allow full access and publishing of training videos.	Allow remote access to training resources to ensure equity of care across Scotland	G

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Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
5. Audit and Continuous Quality Improvement <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2020-07	By March 2021 improve the quality of the Clinical Audit System dataset by ensuring data is being collected across all the main burns units, including NHS Tayside.	01/04/2020 - 31/03/2021	Data Group	Data Group has identified actions to engage clinicians in CAS training and review datasets. Key areas identified for improvement	Clinicians are able to access their data and audit patient outcomes to drive improvement	G
2020-8	Scottish Burned Children's Club Quality Improvement Project to increase referrals by 20% by March 2021 and to improve communications, referral process and sharing of best practice. Referrals also to come from throughout Scotland, not just Glasgow.	01/04/2020 - 31/03/2021	Communications Group	Key stakeholders have been identified within the Communications Group to work on this QI Project. Due to the impact of the COVID-19 crisis, activities may have to be postponed.	Young patients will be more informed about the SBCC and will have more opportunity to join the club, regardless of location.	A
2020-9	By March 2021 agree a subset of the UK National Burn Care Standards for implementation in Scotland and audit performance against these to drive improvement	01/04/2020 - 31/03/2021	Steering Group	The four burns centres have been asked to assess current provision against UK standards as a baseline. Steering Group has agreed to carry out peer review site visits to assess against Standards, however these visits have been postponed due to the COVID-19 crisis.	Patients will benefit from burns centres working together to provide optimum care and manage risk better	A

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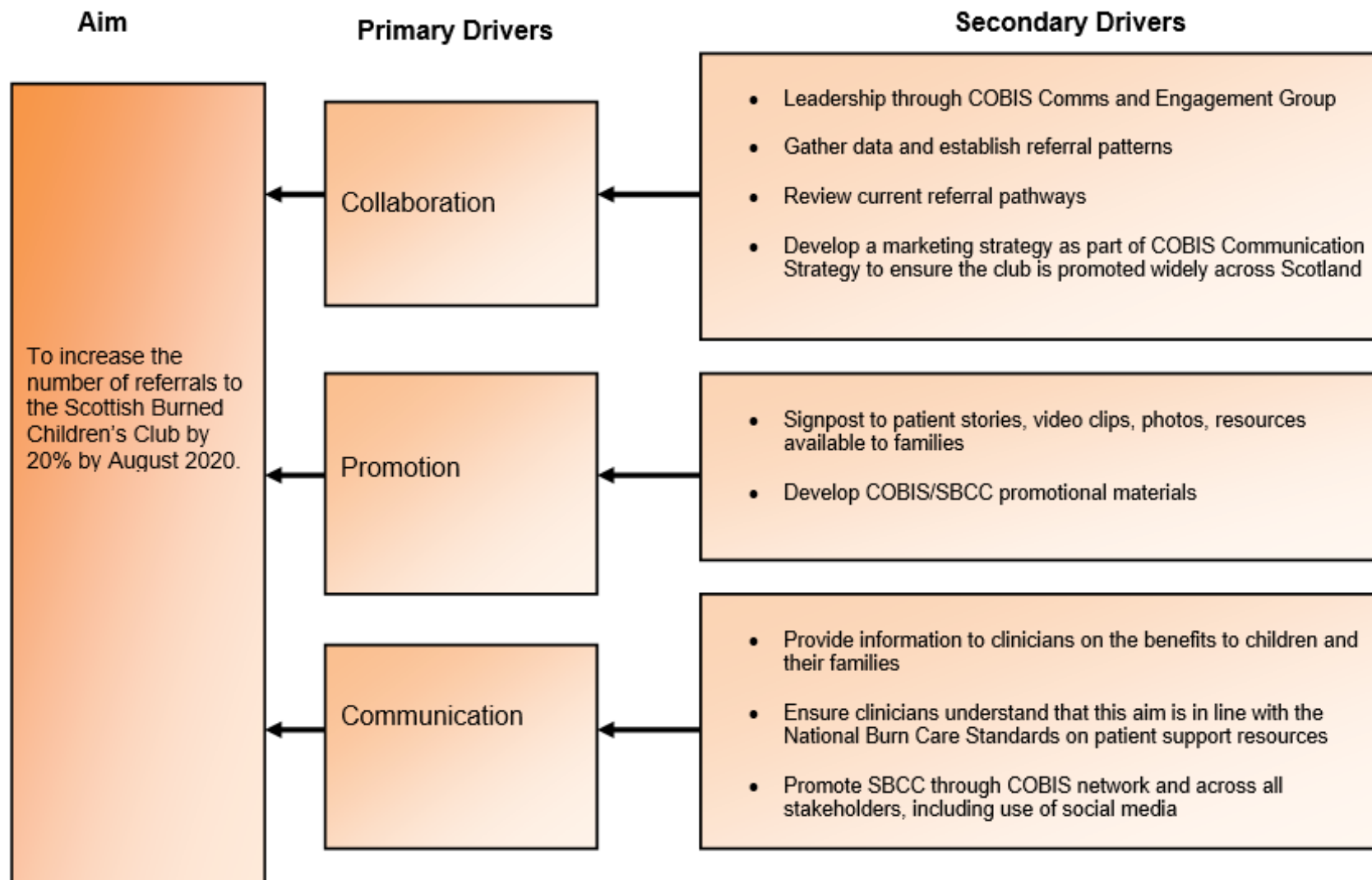
Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 31.03.2020	Anticipated Outcome	RAGB status
6. Value [linked to Quality Dimensions 1,2,3,4,5,6]						
2020-10	Key stakeholders from the COBIS network will engage with the NSS National Planning Team and Trauma network to carry out a review of burn services.	01/04/2020 - 31/03/2021	Steering Group	The review of burn services will continue, however activities may be postponed based on availability of key stakeholders, impacted by the COVID-19 crisis.	A fresh review of burn services will ensure the highest standards of burns care as well as equity of access across Scotland.	A

Appendix 1: Steering Group Membership

Alphabetical list of Steering Group members as of 31 March of reporting year, stating their designation and where applicable, the Health Board/organisation they represent.

Name:	Role/Organisation:
Hilal Bahia	Consultant, Plastic & Burns, NHS Lothian
Lisa Black	Consultant - Emergency Medicine, NHS Ayrshire & Arran
Gillian Calder	Physiotherapist, NHS Greater Glasgow and Clyde
Rebecca Crawford	Consultant Clinical Psychologist, NHS Greater Glasgow and Clyde
Alain Curnier	Consultant Plastic Surgeon, NHS Grampian
Richard Crawford	Programme Support Officer, National Network Managed Service, NHS NSS
Stella Digba	Senior Charge Nurse, NHS Tayside
Jackie Dunlop	Lead Nurse, NHS Greater Glasgow and Clyde
Julie Freeman	Consultant in Paediatric Anaesthesia, NHS Lothian
Murray Geddes	Clinical Lead for Critical Care, St John's, NHS Lothian
Charlotte Gilhooly	Consultant in Anaesthesia, NHS Greater Glasgow and Clyde
Julie Gordon	Consultant - Emergency Medicine, NHS Ayrshire & Arran
Gavin Hallford	Data Analyst, Information Management Services
Angela Harris	Head of Scotland Changing Faces
Jacqui Ivison	Charge Nurse, NHS Greater Glasgow and Clyde
Roselynn Kennedy	Acting Senior Charge Nurse, NHS Greater Glasgow and Clyde
Claire Lawrie	Programme Manager, Information Management Service, NHS NSS
Peter Lindle	Consultant Paramedic, Scottish Ambulance Service
James MacBrayne	Consultant, Critical Care & Anaesthesia, NHS Grampian
Breeda McCahill	Burns Nurse Practitioner, NHS Greater Glasgow and Clyde
Elaine McClure	Acting Deputy Charge Nurse, NHS Greater Glasgow and Clyde
David McGill	Consultant Plastic Surgeon, NHS Greater Glasgow and Clyde
Valerie McIntosh	Senior Charge Nurse, NHS Grampian
Joanne McPeake	Senior Staff Nurse, Glasgow Royal Infirmary, NHS Greater Glasgow and Clyde
Kirsty Munro	Consultant, Plastic Surgery, NHS Tayside
Jamie Nimmo	Programme Manager, National Network Management Service, NHS NSS
Kaz Rahman	Consultant Plastic Surgeon, NHS Grampian
Sharon Ramsay	Paediatric Nurse Specialist, NHS Greater Glasgow and Clyde
Thomas Reekie	Plastic Surgeon, NHS Greater Glasgow and Clyde
Samantha Seeds	Station Manager, Prevention and Protection (Community Safety Engagement), Scottish Fire & Rescue Service
Denise Smith	Charge Nurse, NHS Tayside
Alley Speirs	Senior Programme Manager, National Network Management Service, NHS NSS
Mark Stevenson	Chair, The Scottish Burned Children's Club
Lynn Struthers	Clinical Nurse Manager, NHS Lothian
Alastair Turner	Consultant Paediatric Intensivist, NHS Greater Glasgow and Clyde
Stuart Waterston	Consultant Plastic Surgeon, NHS Tayside
Stuart Watson (Lead Clinician)	Consultant Plastic Surgeon, NHS Greater Glasgow and Clyde
Daniel Widdowson	Consultant Plastic Surgeon, NHS Lothian

Appendix 2: COBIS SBCC QI Project Driver Diagram



Appendix 3: Finance

