

# minutes

## COBIS Steering Group

Thursday 10<sup>th</sup> September 2020 – Microsoft Teams

**Author:** Mr Richard Crawford

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### Confirmed Attendance:

Mr Stuart Watson	Lead Clinician (Chair)	NHS National Services Scotland
Mr Nikolaos Arkoulis	Consultant Plastic Surgeon	NHS Greater Glasgow & Clyde
Mr Hilal Bahia	Consultant, Plastic & Burns	NHS Lothian
Mr Richie Crawford	Programme Support Officer (Minutes)	NHS National Services Scotland
Ms Claire Gardiner	SBCC	Scottish Burned Children's Club
Dr Murray Geddes	Clinical Lead for Critical Care	NHS Lothian
Mr Gavin Hallford	Data Analyst	NHS National Services Scotland
Ms Jacqui Ivison	Charge Nurse	NHS Greater Glasgow & Clyde
Dr Kim Kirkwood	Clinical Psychologist, Pulmonary Rehabilitation	NHS Greater Glasgow & Clyde
Mr Peter Lindle	Consultant Paramedic	Scottish Ambulance Service
Dr James McBrayne	Consultant – Critical Care & Anaesthesia	NHS Grampian
Ms Deborah McCallum		NHS Fife
Mr David McGill	Consultant Plastic Surgeon	NHS Greater Glasgow & Clyde
Dr Chris McGovern	Radiographer	NHS Greater Glasgow & Clyde
Mrs Valerie McIntosh	Senior Charge Nurse	NHS Grampian
Ms Kirsty Munro	Consultant, Plastic Surgery	NHS Tayside
Mr Jamie Nimmo	Programme Manager	NHS National Services Scotland
Dr Lia Paton	Consultant In Intensive care and Anaesthesia	NHS Greater Glasgow & Clyde
Mr Kaz Rahman	Consultant Plastic Surgeon	NHS Grampian
Mrs Sharon Ramsay	Paediatric Nurse Specialist	NHS Greater Glasgow & Clyde
Dr Eleanor Robertson	Speciality Trainee Plastic Surgery	NHS Greater Glasgow & Clyde
Mr Mark Stevenson	SBCC Chair	Scottish Burned Children's Club

### Confirmed Apologies:

Dr Julie Gordon	Consultant – Emergency Medicine	NHS Ayrshire & Arran
Dr Chris McGovern	Radiographer	NHS Greater Glasgow & Clyde



Chair  
Chief Executive  
Director

Professor Elizabeth Ireland  
Colin Sinclair  
Fiona Murphy

*NHS National Services Scotland is the common name of the Common Services Agency for the Scottish Health Service*

## **1. Welcome, Apologies and Introductions**

Mr Stuart Watson (Consultant Plastic Surgeon, NHS Greater Glasgow and Clyde, Lead Clinician and Chair) welcomed everyone to the meeting. Introductions were made and apologies noted as above.

## **2. Minutes & Actions from the Last Meeting**

Minutes from the previous meeting which took place on the 25<sup>th</sup> June 2020, were approved by the group as an accurate record.

Mr Stuart Watson (Lead Clinician, Care of Burns in Scotland) advised that in the period since the COVID-19 Pandemic started there has been a surge in burns cases. The initial meeting that was held between the four main burns units to discuss nationwide patient cases and was very successful although, there could be issues with acute care and children's sector. A full overview was given per agenda item under "Weekly Remote Meeting for Patient Consultation"

## **3. Annual Performance Review**

Mr Watson commenced by telling the Steering Group that the Annual Performance Review had gone well and that it had been noted that the Network had done really well from an Education point of view. This had been wide ranging from burns care specialists to patient stakeholders.

Mr Watson asked the group if anyone had any questions. There were none noted.

## **4. Adult/Paediatric Clinical Guidelines**

Mr Watson told the group that the Clinical Guidelines review would be completed by the time his tenure comes to an end on 30<sup>th</sup> September 2020. Mr Kaz Rahman (Consultant Plastic Surgeon, NHS Grampian) advised that he had managed to catch up with his colleague, Ms Jen Greenhowe (Consultant Plastic Surgeon, NHS Grampian), who had been asked to become involved with the clinical guidelines. Dr Rahman will arrange with Ms Greenhowe to contact Mr Watson.

Mr Watson told the group that the guidelines will be picked up by the Education Group and will be reviewed and maintained on an ongoing basis. Mr Hilal Bahia (Consultant, Plastics & Burns, NHS Lothian) will take this forward with Mr David McGill (Consultant, Plastics Surgeon, NHS Greater Glasgow & Clyde). Mr McGill suggested that this could be viewed in a two tier form of a detailed approach and an executive approach. Mr Bahia will look into the viability of this.

**ACTION:** *Mr Rahman to arrange with Ms Greenhowe to contact Mr Watson regarding assistance with clinical guidelines*

## **5. UK National Burn Care Standards (Zoom Call)**

Mr Watson told the group that he was still working through the recording of the Zoom meeting, notes of which will be shared with the group. Mr Watson wanted to thank the four units for helping out during the COVID-19 pandemic and there is a base of what can be achieved over the next few years. The burns community have embraced the plans for a national hub and have been able to provide honest and constructive feedback throughout the process. It is seen as a way to help other units and colleagues and there is the probability of maintaining a high educational standard. Mr McGill believed that the key strategy was to optimise training for nurses for Tayside and maintaining skill levels for Aberdeen. Mr McGill suggested that the level

of honesty with which people have approached the review has allowed the enablement to optimise the service review.

## 6. Weekly Remote Meeting for Patient Consultation

Mr Watson shared with the group the details of the first Weekly Remote Meeting for Patient Consultation multi-disciplinary team call. Mr Watson was delighted with the response that had been received from the four services on the numbers and interactions during the meeting. Everyone felt comfortable to speak about non-morbidity with patients doing well and clinical issues. Mr Watson thought that the nature of the discussions was not judgemental and hoped that this will be carried forward in a positive way.

Mr Rahman re-iterated Mr Watson's view that the meeting had gone really well. It was his first time to see other units and what they doing. It was an opportunity for the call to find its feet and focus on the day to day. Mr Rahman thought it would be beneficial to have truncated weekly calls and a monthly slot for more detail and teaching episodes. Ms Deborah McCallum (NHS Fife) gave her apologies for being unable to attend but advised that going forward she will when commitments allow. Mr Watson asked whether there would be the opportunity to present on any patients that they have. Ms McCallum suggested that there are but would like to join first before presenting. Mr Rahman suggested that a pro-forma could be created to list patient presentations.

Mr Watson believed that the Scottish Burned Children's Club (SBCC) had more input from Lothian and more would like to be seen from the Grampian and Tayside area. Mr Jamie Nimmo (Programme Manager, National Services Scotland) told the group that Mr Mark Stevenson (Chair, Scottish Burned Children's Club) will be stepping down from his position and this will be filled by Ms Claire Gardiner (Scottish Burned Children's Club Representative). Mr Nimmo also announced the Ms Judith Montgomery (Specialist Physiotherapist Orthopaedics, NHS Lothian) will be joining the SBCC project group and will become more involved.

Mr McGill asked what the possibilities were of getting someone from Grampian and Tayside. Mr Rahman suggested that Ms Greenhowe maybe a good person to get involved for Grampian.

Mrs Sharon Ramsay (Paediatric Nurse Specialist, NHS Greater Glasgow & Clyde), understood that COBIS were currently looking into arranging translation for patient referral leaflets. Dr Chris McGovern (Burns Specialist, NHS Greater Glasgow & Clyde) suggested that the equality team in NHS GG&C may be able to translate the documents.

Ms McCallum told the group that NHS Fife will engage with families to get them involved with the Scottish Burned Children's Club.

Mr Nimmo informed the Steering Group that the network support team will distribute the summer newsletter in the next few weeks, which will include an item on the Weekly Remote Patient Consultation.

**ACTION:** Ms McCallum will contact the network support team with details of a volunteer for NHS Fife to engage with the SBCC

**ACTION:** Group members were reminded that if they have any articles for the next Newsletter to get in with the COBIS mailbox

**ACTION:** *Mr Rahman to contact Mr Nimmo or the COBIS Network mailbox with contact details for Ms Greenhowe*

**ACTION:** *Mr Crawford to add article to the newsletter regarding the Weekly Remote Patient Update.*

## 7. National Burns Hub/Burns Service Review

Mr Watson advised the group that NHS Greater Glasgow & Clyde were in the process of submitting a revised bid to the National Planning Executive and National Planning Board. There was a requirement for a funding method to be thought of for transferring patients when patients are moved out with their locality. Visiting the hubs, there is a good attitude and energy that burns are able to be treated in the regional centre instead of patient transfer. Mr Rahman thought that there would be support for Aberdeen as have no instructors. Mr Rahman thanked Mr Watson for his continuing support and his contribution back to the network. Mr Watson advised that Mr Mark Allardyce (Senior Programme Manager, National Planning, National Services Scotland) was supportive of the national hub with the three regional facilities. There will be an addendum added for the Lothian burns unit to maintain facility status for patients taken directly, as they have the skills and expertise to manage these.

Dr James MacBrayne (Consultant, Critical Care & Anaesthesia, NHS Grampian) asked whether the patients from Aberdeen and Tayside should currently be transferred to Glasgow or St John's. Mr Watson advised that if status maintained at current levels then Lothian would be the main target. Units in Grampian and Tayside could still maintain and oversee this treatment but there would need to be flexibility. Dr MacBrayne advised that funding could still be an issue and asked if this was still to be sorted. Mr Watson suggested that he would expect that this would be the case and funding would be sought. Mr McGill advised that he would be expecting National Services Scotland to take care of this as it would make sense in the long term to have this in place. Mr Watson further advised that it was being examined for services to transfer the other way. A team of specialists could be made available from the national hub to visit another unit or hospital to assist with care. Dr Lia Paton (Consultant in Intensive Care and Anaesthesia, NHS Greater Glasgow & Clyde) thought this would be a good approach but may be in exceptional circumstances. Dr MacBrayne suggested that this would more than likely depend on the position that the patient was in, whether burns or respiratory as the primary concern.

## 8. Education – EMSB Courses, Webinars, Continulus (Online Training) and Annual Event

Dr Bahia advised that the first Education Group meeting had been very successful with a number of topics that had been discussed such as the EMSB courses being set up again in Scotland. This was something that needed to be discussed with Newcastle regarding having the courses and exams re-instated.

The Steering Group was also advised that the Continulus module on Burns Management was available on the website to trainees, clinicians and non-clinicians. The weekly burns unit discussions had been really well received and the trainees had enjoyed an insight into the practical side of burns cases.

It was noted that there was an education event planned for the 18<sup>th</sup> November. Mr Bahia would be meeting with colleagues after the Steering Group meeting to discuss the programme for this.

Mr Watson announced that the COBIS training visits around the country were still planned and that it would be a good opportunity for new nurses. Mr Watson took the opportunity to thank Mr Bahia for the progression of the Education Group since it recommenced.

**ACTION:** *Mr Crawford to add education event to website education page and add as news item in the newsletter.*

## 9. Update from Comms & Engagement Group

Mrs Ramsay advised that due to COVID-19 there had not been much happening on this front. Mr Stevenson advised that his focus had been on increasing the awareness of the Scottish

Burned Children's Club. The SBCC Leaflet could be translated into several languages, if required. Mr Stevenson also thanked the group for their support over the COVID period. A link for the video was included in the COBIS Newsletter. Mr Stevenson did advise that they had had to cancel several events due to the outbreak of COVID-19, however the SBCC were looking forward to getting back to normal and donations were still coming in.

## 10. Update from Data Group

Mr Gavin Hallford (Data Analyst, IMS, National Services Scotland) gave an update on the Data Group. He began by telling the group that the Tayside data is beginning to come through on CAS. This has been a highlight that the data is being submitted. There does not appear to have been a drop-off during the covid-19 period. NHS Board updates will be sent out in due course. Mr Hallford also reminded members that they should notify IMS when they have their email addresses updated to nhs.scot as their email address will need to be updated on CAS.

Ms McCallum asked if the Tayside figures were inclusive of the Fife numbers. Dr Kirsty Munro believed that from the data that they have seen it should be separate for Fife. Dr Munro suggested that she should meet with Ms McCallum to discuss the Fife data. Dr McGill asked who captures the data regionally. Mrs Jacquie Ivison (Charge Nurse, NHS Greater Glasgow & Clyde) advised that nurses input the data for NHS GG&C. Mr Rahman thought that in Grampian the data is input by the receptionist. Mr James MacBrayne (Consultant, Critical Care & Anaesthesia, NHS Grampian) believed that the ITU numbers for Sick Kids had been underestimated and there needed to be a cohesive approach where there is no requirement for support staff. Dr Munro suggested that support was needed to get on top of the current backlog of data input. Dr Munro asked whether the figures would be expected to include inpatients and outpatients. Mr Watson advised that the number of non-stays should not be included, as this could affect the recording of incidents, although some areas may include this data.

Mr Watson advised that Dr Eleanor Robertson (ST3 Doctor, NHS Greater Glasgow & Clyde) and Stephen Leonard (Theatre Utilisation Data Coordinator, NHS Greater Glasgow and Clyde) may be able to extract data from the system they use. They should have in/outpatient data for Aberdeen burns. Mr Rahman confirmed that some figures have been received from the data office, but he will engage with Dr Robertson. Mr Watson asked the group whether they thought that there should be a funded role for a Data Officer. Mr McGill suggested that this could be something that could be looked at or if an Analyst would have capacity. Mr Hallford suggested that the CAS development team, when they receive the data, could do a bulk upload if it is able to be submitted. Mr Watson added that he received his data from Mrs Ramsay, which he was extremely grateful for considering how busy Mrs Ramsay was. Mr Watson felt that this was detracting from work that already busy people are having to do. Dr Paton advised that she was facing the same issues and that data gathering and data entry are different things. Dr Paton also stated that she is still getting up to speed with the Data Group – the CAS user guide is being reviewed and progress is moving along with this. Mr Watson expressed that Dr Paton had been doing an excellent job since joining the Network.

Mr Watson believed that Dr Robertson had done an excellent job on the collection of the firework data and this now provided a cast iron case for having the four burns units

**ACTION:** *new nhs.scot email addresses to be sent to [nss.imsrequests@nhs.scot](mailto:nss.imsrequests@nhs.scot) so they can be updated in CAS.*

**ACTION:** *Item to be added about changing email addresses in the newsletter.*

**ACTION:** *NHS Board data input figures to be circulated by Mr Hallford*

**ACTION:** *Dr Munro to meet with Ms McCallum to discuss Fife data submission.*

**ACTION:** *Dr Munro to speak with Dr Robertson about extracting data held in NHS GGC Systems.*

**ACTION:** *Mr Rahman to contact Dr Robertson for data for Grampian region.*

## 11. Any Other Business

Mr Watson took this opportunity to advise the group that the next Weekly Patient Update would be on the 21<sup>st</sup> September. They would look at the assessment of burns in low to middle income countries. Mr Watson believed it would be good to see Surgeons in training, ICU Doctors and Nurses in the meeting. Mr Watson suggested to Mr Peter Lindle (Consultant Paramedic, Scottish Ambulance Service) that it may be of interest to members of the Scottish Ambulance Service and for others to hear of the experiences from first responders. Mr Watson took the opportunity to thank Mr Lindle for his support. Mr Lindle advised that he would help if he could.

Mr Watson asked Mr Lindle if there was an update from the Scottish Ambulance Service. Mr Lindle advised that work had been carried out with the Scottish Trauma Network and that triage trauma would be approached differently from spring 2021. A trauma desk will be directing burns patients so they are triaged effectively and this will impact on the first responders. Mr Lindle took the opportunity to thank Mr Watson for his work on the COBIS Network.

Mr Stevenson advised that he would be stepping down from Chair of the Scottish Burned Children's Club and that Ms Gardiner would be taking up the role of Chair. Mr Stevenson told the group that he was moving to France. Mr Watson thanked Mr Stevenson for all the work he had done with the COBIS Network.

Mr McGill thanked Mr Watson on behalf of the COBIS Network for all the work that he had done over the years as Lead Clinician. Mr Watson told the group that it had been a tremendous honour to be part of COBIS and was glad that a younger group of specialists were becoming involved in the Network and burns care.

Mr Watson took the opportunity to thank Mrs Ramsay for all her help and support over the period of his tenure.