

Paediatrics engagement event 06.11.18- notes and actions

In attendance:

Chair: Sarah Dunnett (ULHT non-exec)

ULHT CEO Jan Sobieraj

ULHT Medical Director Dr Neill Hepburn

Consultant Paediatrician Dr Ajay Reddy

ULHT Project Director Clive Brookes

Chief Nurse for East Lincs CCG Tracy Pilcher

PAU Acting Ward Manager Hayley Warner

PAU Deputy Sister Della Smith

ULHT Associate Director of Comms and Engagement Anna Richards

ULHT Communications Officer Nicola Galley

Head of Communications and Engagement for Lincolnshire West CCG Kevin Gibson

Engagement Manager for South West Lincolnshire CCG Diane Hansen

40 members of the public.

Meeting began with presentation by Medical Director Dr Neill Hepburn (presentation attached).

Points raised (related to paediatrics only):

- Concern that patient case info had been supplied some weeks ago but uncertain as to what had been done with it.
- Concern that presentation was not accurate in terms of reasons for transfers to hospitals other than Lincoln.
- All keen to support care closer to home, so it would be helpful to understand how a new sustainable and expanded community paediatric services model could be developed further and staffed appropriately.
- Lots of progress on numbers being recruited and trained, but there is a significant national challenge that is felt acutely within Lincolnshire and although plans are in place these take time to come to fruition e.g. ULHT is one of the first trusts for nursing associates but these are only coming on board in January 2019.
- Lack of communication with open access families - there were two really powerful examples where the communication hasn't appeared to happen - immediate need to ensure that open access parents know pathways, contacts and support available.
- Clarity required on support packages for parents who are travelling to other sites.

- Frustration expressed that NHS systems in different trusts don't talk to each other, which is a problem when transfers happen outside of ULHT.
- Concern that the Trust does not communicate events well and engagement is dependent on interest group promotion rather than Trust communications.
- Real concern about STP and Trust and partners moving towards a back door solution for this service rather than consulting formally. Desire to see clarity on STP status, next steps, timelines and reassurance needed that the STP will take into account changing demographics and health needs of the south of the county.
- All agreed all were at the meeting for the same reasons - wanting the best support and care for the local population, albeit everyone is viewing through a different lens.
- All very supportive of staff and experience of care at the Pilgrim site.
- Concern about some of the comments in the risk register and equality impact assessment, mostly around the use of parental transport, travel times between sites and the 'greying out' of patient concerns.
- Keen to ensure that new models developed for maternity and neonates reflect latest guidance and research on distance travelled.
- Keen to understand the safeguarding arrangements around the interim model e.g. numbers of 14-16 year olds on adult wards, safeguarding around transfers, appropriately trained staff etc
- Keen to ensure the Trust/STP has explored the acuity model fully i.e. a transfer to Sheffield was less than 48 hours, the transfer to Peterborough when the patient maybe could have remained at Pilgrim and been home much quicker - links into wider community model.
- Wish for an update on the current nurse staffing situation on the childrens ward and how is that might impact the service in future.
- Clarity required around Trust workforce plan for the short, medium and long term?
- Concerns about proposed 'one team two sites' model and whether this will adversely impact upon Pilgrim, in favour of Lincoln.

Actions:

Discussions at the event resulted in a number of actions to take away, for actions by ULHT and partner organisations.

Progress against these actions will be reported on at the next paediatrics engagement meeting:

- Review, consider and respond to patient feedback on the impact of the interim model supplied at this and last meeting. Develop an action plan based on the feedback.
- Investigate the quantitative data held on impact against that supplied by patients and carers, particularly around out of county transfers.
- Develop a plan around open access families- offering an opportunity to visit the wards on both sites to reduce anxiety and engaging with them and inviting them to future meetings.
- Create a plan for support for transferred families - help with travel and also accommodation. Also consider having a focussed group with those parents who have had children transferred to truly understand the concerns.
- Service improvement – have a focus group of concerned parents to help work through the community services.
- Plan the next engagement event asap (January) in a larger room. Make sure we invite Matt Warman MP, open access families and social care.
- Work with campaigners on improving communications and engagement- both updates and advertising engagement events.
- In producing next presentation, provide a clearer update on workforce planning, current interim establishment, fill rates, nature of employment, pipelines, thinking outside the box especially with trainees etc.
- Trust needs to look at pathways where it is sending patients in agreement with partner trusts (and their carers to other sites).
- Notes from these meetings need to be shared.