

Welcome to the North of Scotland (NoS) Trauma Network Newsletter. In this extended first issue we aim to provide you with background to the network, along with an outline of progress to date in relation to enhancing the delivery of high quality, person-centred, safe and responsive care to the NoS population. There is a huge amount of work happening across the network and we plan to provide more detail on individual aspects of this in future newsletters. We hope you find this useful and informative. If you would like to share any developments related to trauma in your service/area or have suggestions to how we can improve future newsletters, please e-mail nospq.majortrauma@nhs.net

Background

What is Major Trauma?

Major Trauma (MT) is a term used to describe injuries that are, or have the potential to be life changing or life threatening. MT patients require specialist care from a wide range of healthcare professionals across the system.

What is the NoS MT Network?

The NoS MT Network is built upon existing local and regional networks. Focus is on enhancing collaboration between people, services and organisations (including the third sector) across Grampian, Highland, Orkney, Shetland and the Western Isles to maximise patient care and outcomes, along with enhancing the experience of patients, families/carers and staff. The network covers prevention through to ongoing care and recovery from trauma. Argyll and Bute and the southern Western Isles will continue to link with the West of Scotland Major Trauma Network.

The NoS MT Network is part of the bespoke Scottish Trauma Network. See 'Developing the Scottish Network' section for more information on this.



Developing the Scottish Trauma Network (STN)

In May 2016, the First Minister announced that there would be the development of a bespoke trauma network for Scotland which would include four Major Trauma Centres. In January 2017, she also confirmed there would investment of £5m made during 2017/18.

In January 2017, 'Saving Lives. Giving Life Back' was published by the Chief Medical Officer – the report is available at <http://www.traumacare.scot>

The document sets out the:

- high level model for a bespoke, inclusive trauma network for Scotland, spanning prevention through to rehabilitation.
- role, remit, and membership for the STN Steering Group, which will oversee the implementation of the STN and its plans.
- focus of the STN, including a set of Key Performance Indicators (KPIs) for trauma.

Each Regional Network and the SAS will be required to produce detailed plans in October 2017. These will focus on the implementation of the KPIs and will inform the national STN Implementation Plan. This plan will guide future resource allocation across the STN.

NoS Major Trauma Network Vision

*"Every person who experiences major trauma receives **responsive, high quality, safe and effective person-centred care** from the point of **first contact through to recovery**. The delivery of care will be provided through a **robust multi-professional/multi-agency network approach** ensuring that care is **co-ordinated around the individuals needs**. The focus of all professionals and agencies contributing to the individuals care is around **maximising clinical/health outcomes**, ensuring the **best possible experience** for individuals and their families/carers, whilst **minimising the long term impact and maximising quality of life**."*

(NoS MT Programme Group 2015)

SAVE THE DATE

NoS Major Trauma Network Event

3rd May 2017, 09:30-16:30 Hours at the AECC.

To register for a place e-mail nospq.majortrauma@nhs.net

Improving Major Trauma Care in the NoS in the Context of the National Trauma Network

Over the last two years a significant amount of work and engagement has taken place with patients/carers and a wide range of professionals across the Network in order to develop a clear understanding of the priorities and key actions in both the short and longer term in order to ensure we are able to deliver improved and sustainable trauma care across the NoS. There is also an overwhelming view that the work which is and will be taken forward will also benefit not just major trauma patients but all critically injured and ill patients in the NoS. A significant amount of work is already underway, some of which is outlined in this newsletter. These improvements and developments have come about through the dedication of colleagues across the network, supported by resources from local Boards and other organisations.

Although there is huge enthusiasm and good will across the network, it is clear there are some developments which cannot be achieved without dedicated funding. The NoS Trauma Implementation Plan was submitted to the CMO in September and provided a breakdown of actions for short, medium and longer term delivery, those which can be delivered within existing resources and the actions dependent on additional/new resources. This initial priorities for resources were guided by colleagues across the Network and were focussed on co-ordination, audit and communication, e.g. website. If you would like a copy of the most recent NoS Plan, please e-mail nospq.majortrauma@nhs.net

NoS Trauma Interface Project

An essential part of the development of the NoS Trauma Network, and wider national network, is responding to local challenges within hospitals throughout the network, enhancing communication and support processes and consequently improving the interface between the parts of the local, regional and national networks. Dr Chic Lee (Project Clinical Lead), Anne-Marie Pitt (NoS Improvement Manager) and Euan Esslemont (SAS Lead) have led the Interface Project to suggest recommendations for these issues.

They have now completed their visits to all hospitals and local SAS teams in the project scope. Information has been gathered on:

- skills and resources available within hospitals and local SAS units to deliver initial care to major trauma patients.
- challenges experienced by hospitals/SAS teams
- ideas for improvement locally, regionally and nationally
- suggestions for enhancing communication pathways between the different hospitals within the NoS and the SAS.

This information is now being distilled and discussion will be had with colleagues across the network to determine key priorities, along with the plan for developing a single point of contact in the MTC and how decision support is offered to clinicians in local communities.

A report will be produced by the end of March 2017 and findings and next steps will be communicated in the next newsletter. For further information please contact Anne-Marie Pitt at anne-marie.pitt@nhs.net

Enhancing Pre-Hospital, Retrieval & Transfer Care in the NoS

Within the NoS there are good networking arrangements locally and regionally between the SAS, NHS Boards and voluntary organisations, e.g. BASICS, community responders.

A key area of focus has been on the development of a Case for Change for Retrieval and Transfer in the NoS. This work has highlighted the challenges and risks and is now informing SAS and NoS planning.

A group of experts met in early December and have reviewed and confirmed the vision and priorities to be taken forward in order to further improve pre-hospital, retrieval and transfer care in the NoS. These are:

- reviewing by-pass protocols
- maximising local pre-hospital expertise and equipment
- clarifying access to decision support
- informing national developments such as the role and function of the trauma desk and the trauma triage tool
- delivery of a training package to support staff in the delivery of secondary transfers in the NoS
- supporting the SAS options appraisal for a retrieval & transfer Hub in the NoS.



For further information e-mail anne-marie.pitt@nhs.net

Collaborative Approach to Patient-Centred Rehabilitation in the NoS

Rehabilitation is essential in supporting MT patients reach their full potential and most importantly, regaining an optimum quality of life, along with their role in their family and also wider society. The NoS MT Rehabilitation & Repatriation Group, co-chaired by Dr Santanu Sarkar (Consultant in Rehabilitation Medicine) and Susan Carr (Director of Allied Health Professionals) involves representatives from a range of professional groups and areas across the NoS.

A clear vision, along with a high level pathway of care, highlighting priorities for enhancing rehabilitation from day of admission to longer term recovery within the community setting has been agreed. Workstreams have been developed and are focussing on:

- **Rehabilitation Plan Document** – work is underway to develop a Rehab Plan which will document the patient's requirements and outcomes from within 24 hours of admission to hospital until they have recovered optimal health. The draft plan will be tested and workshops across the network are being planned for later in the year in order to support implementation.
- **Directory of Services** – work is underway to create an accessible resource which will help staff, patients and carers/families know what services are available locally and within the NoS to support the individual's needs and their recovery back to optimal health. The directory will set out the location and how to access these services. We hope to have this available on the network website in mid 2017.
- **Patient Experience & Outcomes** - work is underway to assess and capture what measures will tell us if patients are getting the best possible clinical outcomes from the care we provide. We are looking at this across the whole rehabilitation pathway. This will also help us understand if the changes we make are improving care and experiences for patients and their families/carers.

Progress will be communicated in future newsletters.

For more information or to get involved, e-mail nospq.majortrauma@nhs.net



Education – Supporting staff and improving patient care

- ❖ Monthly NoS trauma education sessions are held on the 4th Tuesday and Friday of alternate months. They aim to bring clinicians together to share best practice and highlight areas for improvement locally, regionally and nationally. These sessions are open to all clinicians and trainees in the NoS. We have noticed attendance has started to drop at these sessions and an evaluation will be undertaken during April to ensure these sessions add value and meet the needs of staff.
- ❖ Based on feedback, as of February 2017 we will be videoing these sessions and plan to have these available to view on the future Trauma Website.
- ❖ Work is underway to develop a Trauma Website as part of the STN Website. This will host a range of educational information and tools, e-calendar with the available training/educational opportunities, along with related protocols, guidance and standard operating procedures.
- ❖ Three Senior Trainees received funded places to attend the EVTm Symposium in Sweden in February 2017. They delivered presentations at the NoS Trauma Education Session focused on their learning from the symposium.
- ❖ A thoracotomy course (with supporting SOP) has been delivered on two occasions within the NoS. These have been well received - this was highlighted as a gap at one of the NoS Trauma Sessions.
- ❖ In order to further enhance educational and training opportunities which better meet the needs of trainees and professionals, we hope to establish a NoS forum in early Summer to provide greater direction on what is required, along with ensuring this is informed by audit, research and new guidance and evidence based practice.
- ❖ Supporting and informing education and improvements is the development and production of a monthly NoS Major Trauma Dashboard. This currently includes Aberdeen Royal Infirmary, Royal Aberdeen Children's Hospital, Dr Grays and Raigmore major trauma activity. Work is underway in the Ambulance Service to enable their contribution to this. Further work is required around agreeing common definitions/criteria. This will continue to evolve as other data sources become available.

If you would like to receive further information or have ideas for enhancing education, please e-mail nospq.majortrauma@nhs.net.

Specific Trauma Developments in the Trauma Unit/Local Hospitals Across the NoS

NHS Western Isles - We are continuing to progress key frontline staff through the European Trauma Course which will enable a structured local multi-disciplinary team response to MT. A pan Western Isles MT Group has been convened to support and develop a consistent team approach to receiving and managing MT using evidence based practice. For further information contact Jimmy Myles at james.myles@nhs.net.

Updates from other hospitals will feature in future newsletters.

Follow Us on Social Media



Follow us – [@NoSTraumaNtwk](https://twitter.com/NoSTraumaNtwk)

Like us - North of Scotland Trauma Network

Clinical Lead for the NoS Trauma Network

In order to ensure appropriate clinical leadership of the NoS Trauma Network going forward, we will be recruiting to the Clinical Lead role during April/May.

If you would be interested in finding out more about this role, please contact graemesmith@nhs.net

Developing the NoS Major Trauma Centre

In May 2016, the First Minister reaffirmed that there would be a bespoke national trauma network developed which would also include four Major Trauma Centres in Scotland – Aberdeen, Dundee, Edinburgh and Glasgow.

A significant amount of work is in progress to ensure Aberdeen Royal Infirmary (ARI) and the Royal Aberdeen Children's Hospital (RACH) meet the necessary requirements and continues to deliver high quality, sustainable specialist tertiary trauma care, comparable with centres elsewhere in the UK.

Some key areas of progress are:

- implementation of a trauma call system
- major haemorrhage protocol – this has been reviewed/tested for multiple activations
- development of a multi-speciality initial admission trauma document
- development of a rib fracture fixation service
- commencement of the development of a model for the specialist major trauma service, which also includes the polytrauma ward
- development of a draft proposal for governance within the MTC.

Further details will follow in future newsletters.

Scottish Ambulance Service (SAS) Update

The SAS continue to develop capability with regards to responding to major trauma (MT). MT packs have been purchased and have been distributed across all frontline A&E resources. These packs include major haemorrhage control kit including trauma dressings, tourniquets, decompression needles and new traction splints. E-learning and other online training support has accompanied this introduction.

Work continues on the planning and development of the dedicated trauma desk within the Ambulance Control Centre network to support a response to an incident involving MT. The SAS are working closely with NHS colleagues to trial the introduction of the 'Trauma Triage Tool' within Tayside and Fife incorporating the MTC at Ninewells. It is anticipated that the next test of change concerning the trauma tool will involve Grampian and the MTC at Aberdeen.

NoS Major Trauma Network Contacts

NoS Trauma Network Support Team

Lorraine Scott	Programme Manager (part-time)
Portia Brown	Project Manager (full-time)
Anne-Marie Pitt	Improvement Manager (part-time)
Elida Brooks	Programme Support Officer (part-time)
Lisa Wood	Project Support Officer (part-time)

NHS Board/Scottish Ambulance Contacts

Lorraine Scott	NHS Grampian
Donna Smith	NHS Highland
Carolyn Chalmers	NHS Orkney
Roger Diggle	NHS Shetland
James Myles	NHS Western Isles
Euan Esslemont	Scottish Ambulance Service

If you require any further information, wish to get involved or would like to share trauma developments in your service/area, please contact nospg.majortrauma@nhs.net or telephone 01382 424113. Alternatively please get in touch with your local contact as detailed above.