


Implementation of the North of Scotland (NoS) Trauma Network Plan is now underway following the funding awarded to the NoS from the Scottish Trauma Network (STN). This newsletter contains some of the progress the network has made in recent months, along with updates from the STN, SAS and STAG teams. We have been extremely busy in recruiting to posts, progressing various developments and hosting the annual network event.

## Scottish Trauma Network

The first edition of the STN Newsletter was circulated on the 17<sup>th</sup> of May. It provides a brief introduction to the network, a summary of the first event in January 2018 and updates on a number of other key developments. If you would like to be added to the distribution list, or have any stories you would like to share in future issues, please get in touch by emailing [nss.scottrauma@nhs.net](mailto:nss.scottrauma@nhs.net).

Alison Gilhooly, Programme Manager, STN.



**SAVE THE DATE**  
NoS Trauma Network Event  
on 2<sup>nd</sup> October 2019

## Developments in the MTC

Over recent months, significant progress has been made in preparation for the MTC go live on the 1<sup>st</sup> October 2018. A summary of the key updates are below.

### Recruitment

- General ICU nurses for MTC have been successfully recruited to
- Rehab Co-ordinators appointed to and awaiting confirmation of start dates
- Case managers appointed to - one will commence in mid August and the other early September
- Psychology posts appointed to and the majority have commenced post
- All rehab posts successfully recruited to and many have now commenced post
- Interview for MTC Lead for Clinical Governance to take place late August

### Service Developments

- Work underway with eHealth colleagues regarding the ability to track MT patients across the MTC and also the development of an e-version of the rehab plan document to support go live in October 2018
- 24/7 Trauma Team Leader Rota is in place and work around the SPOC is moving forward (see overleaf)
- First draft of the NoS Trauma Repatriation policy produced for further engagement and development
- Work underway in the development of the inpatient Trauma Consultant Rota
- Kit for the trauma ward area commissioned and initial testing of the ward area undertaken
- MTC Rehab workshop held to develop detailed MTC rehab model and confirm work required to be undertaken prior to go live
- Plan commenced for roll out of PROMS within MTC

### Other Updates

- Members of the NoS MTC Steering Group visited Newcastle MTC on 13-15 June 2018
- Regular communication updates via twitter, MTC newsletter and monthly progress reports
- Staff awareness sessions on the MTC development are underway
- NoS MTC Steering Group are now meeting weekly to progress all work and manage any areas of risk

Laura Kluzniak, Major Trauma Centre Project Manager, [nhsg.nosmtc@nhs.net](mailto:nhsg.nosmtc@nhs.net)

# Implementing our NoS Trauma Network Plan

The STN Steering Group fully supported the NoS Trauma Implementation Plan submitted by the NoS Programme Board, along with those plans submitted by the other regional network groups and the SAS, at its meeting on 13th November 2017. On 22<sup>nd</sup> December we received formal confirmation of the funding; which is circa £3.3million recurrently for the NoS.

It was also agreed at that time, that the implementation of MTCs in Aberdeen and Dundee should proceed as per agreed national policy. Aberdeen MTC is expected to formally go live on 1<sup>st</sup> October 2018.

A significant amount of progress has been made in implementing the NoS Trauma Plan. Monthly progress updates are produced and are available on request. This newsletter contains some of the developments and progress to date.

## Single Point of Contact

Tests of a new process to quickly contact Aberdeen Royal Infirmary, (the MTC) about transferring major trauma patients have been carried out involving Dr Gray's Hospital, in Elgin, the Gilbert Bain Hospital on Shetland and the SAS Specialist Services Desk (SSD).

The majority of patients with suspected major trauma at a non-MTC hospital will require secondary transfer to the MTC. There should be no delays to transfer for those patients requiring urgent interventions at the MTC. The single point of contact (SPOC) at the MTC is the Emergency Department Trauma Team Lead available 24/7. A specific trauma telephone number will be used to instigate the transfer or request advice. This will be answered as a priority by the SSD who will arrange an immediate conference call to include the referring hospital, the SPOC and EMRS/PICU as required. At the same time the SSD staff will arrange the transfer whilst the conference call is ongoing.

Tests will continue to be rolled out over the coming months and the process will begin to go live in a phased way once standard operating procedures have been finalised following the tests. The intention is for all local emergency hospitals in the network to have access to this process over the next six months.

Anne-Marie Pitt, NoS Trauma Network Manager

## 24/7 Consultant Rota

One of the most important features of a MTC is that every patient, adult or child, who has suffered major trauma is cared for by a consultant led multi-specialty Trauma Team twenty four hours a day, seven days a week. We strongly believe that the immediate presence of an Emergency Medicine Consultant in the Resuscitation Room, supported rapidly by specialist inpatient teams, is of benefit to patient care and safety in such circumstances.

In anticipation of the NoS MTC in Aberdeen opening later in 2018, and in order to meet this national minimum standard, from January of this year we have delivered a resident Emergency Medicine Consultant for major trauma continuously and are the first centre in Scotland to do so. This is one of a number of developments which collectively will "save lives and give lives back".

Dr Roland Armes, MTC Clinical Lead, Aberdeen Royal Infirmary

## NoS Trauma Network Event

The 4<sup>th</sup> annual NoS Trauma Network Event took place on 23<sup>rd</sup> May at the Muthu Newton Hotel in Nairn. There were approximately 163 people in attendance from across the NoS and UK.

The Event Report is available upon request from [nospg.majortrauma@nhs.net](mailto:nospg.majortrauma@nhs.net). A special newsletter focussing on the event has also been circulated.

*Picture on the right - Dr Chic Lee, NoS Trauma Network Clinical Lead presents on the aims and the numerous benefits of the network.*



## SAS North Trauma Region Update

As part of our ongoing work towards the development of the STN, we have included trauma care in this year's Learning in Practice (LIP). LIP is the yearly classroom based mandatory and update training that all of our operational staff complete. Included in this year's training is an overview of the STN as well as practical training with trauma related equipment such as pelvic splints, traction splints, EZ-IO and haemostatic dressings. The use of Tranexamic Acid (TXA) and the management of traumatic cardiac arrest is also included. All staff completing the training are being emailed an online feedback survey. The response so far has been very positive with 86% of respondents stating that they feel more competent at managing major trauma. 88% of respondent feel more competent about using the trauma equipment covered during LIP and 83% of respondents stating that they are now more likely to involve the Trauma Desk when managing major trauma patients. Further analysis will be undertaken to inform future training needs.

Work is also ongoing to ensure that our clinical staff are able to use the Major Trauma Triage Tool (MTTT) when the NoS goes live in October. A number of local internal 'champions' have been recruited and are raising awareness in their areas. We are also being assisted by some members of the NoS Trauma Region to participate in MTTT training sessions over the next couple of months. This is being supplemented by a short information video for our staff which will be presented by Dr Luke Regan from Raigmore Hospital. The video has been recorded and is currently being edited prior to be released to our staff.

We have also recently introduced Age Time Mechanism Injuries, Signs/Symptoms, Treatment (ATMIST) cards to all of our clinical staff. These can be used as an aide-memoire or written on with clinical observations etc. Whilst not specifically related to major trauma, the aim of the cards is to standardise and improve the quality of pre-alerts and handovers for time-critical patients.

For further information please contact [euan.esslemont@nhs.net](mailto:euan.esslemont@nhs.net)

## National STAG Update

Progress has been made to ensure that there is a complete picture of the care of patients suffering significant trauma in the north with data collection now started in the Gilbert Bain and Belford Hospitals. Wick have identified staff who will collect STAG data and training dates are being organised.

Phase 2 of eSTAG was released in February and includes an export function allowing data to be reviewed and analysed more easily by hospital staff. STAG are currently setting up reports in Tableau (a data visualisation product) and these will be released nationally early August. Tableau reports will include:

- Unmet reports – details on which patients met or didn't meet the KPIs – supporting the review process;
- Met reports – Run charts of compliance with KPIs at hospital and network level (depending on your access needs); and
- Management reports - includes number of STAG patients, details on transfers, outcome etc (hospital / network level).

Tableau reports are interactive and will allow you easier and quicker access to data. They are web based but access is limited to the N3 network meaning you need to be on your hospital network to access them. This is necessary to meet information governance requirements as most of the data can be drilled down to patient level.

For further information please contact [angela.khan@nhs.net](mailto:angela.khan@nhs.net)

## The Rehabilitation Plan Document

The Rehab Plan document has now been piloted at ARI with 5 patients and feedback analysed. The recommendations are:

- A rehabilitation coordinator is required to make sure the plan is updated at times of change and the required intervals – posts are recruited to in the MTC and recruitment is underway in the Trauma Unit.
- The document needs to be part of the electronic patient record and accessible wherever the patient is – a group is in place to take this forward.
- The e-Rehab Plan will ideally form part of a joint multi-disciplinary patient record and replace uni-disciplinary notes.

Work has been ongoing with colleagues in the East Trauma Network and a Rehab document has been agreed to use in both networks when they go live. Discussions are ongoing with e-health colleagues to enable an electronic version of the Plan. It is the intention to have eventually, an agreed Scottish Rehab Plan document.

# NoS Trauma Network Recruitment News

## Karin Massie, Joint NoS Trauma Network Clinical Education Lead

A Physiotherapist to trade, I have worked in critical care for the majority of my career and continue to do so in Aberdeen Royal Infirmary. I am also an AHP Practice Education Lead for NHS Grampian. I look forward to working closely with Louise in this new role to bring educational and developmental opportunities to all staff within the NoS Trauma Network.



## Louise McCullough, Joint NoS Trauma Network Clinical Education Lead

I am one of the Orthopaedic Consultants in NHS Grampian with a specialist interest in trauma. Having spent some time working within the East Midland Major Trauma Centre I look forward to working with Karin, developing educational and training opportunities within the NoS Trauma Network.



## Portia Brown, NoS Trauma Network Project Manager

I am delighted to continue to provide Project Management support to the NoS Trauma Network. I have thoroughly enjoyed my time so far in supporting the development of the network and I look forward to supporting future developments.



## Laura Kluzniak, Major Trauma Centre Project Manager

I have worked in NHS Grampian for about 18 years, initially in Public Health and then in 2008 I moved across to Project Management to implement and develop the HPV vaccination programme. I have been involved with a number of programmes and projects since. I am excited to be aboard with the NoS MTC and looking forward to the opportunities it brings for staff and the difference it will make to the people in the NoS.



## Anne-Marie Pitt, NoS Trauma Network Manager

I have managed a number of networks in the southeast and north of Scotland and have had the opportunity to be involved in improvement work as the NoS Trauma Network has developed. It is exciting to continue to work with staff across the north in implementing the network and, although there will be challenges for us all, demonstrating improved care and outcomes for patients.



Further recruitment updates and introductions to other roles will feature in the next newsletter.

## **Dates for Your Diary!**

- Monthly Education Session focussing on M &M's and learning from excellence – 24<sup>th</sup> August (12-1.30pm)
- European Trauma Course – 31<sup>st</sup> August-2<sup>nd</sup> September in Inverness and 28<sup>th</sup>-30<sup>th</sup> September in Orkney
- Dr Gray's International Airway Day in Elgin; Pre-Hospital Advanced Airway Workshop – 15<sup>th</sup> September
- Trauma Surgical Skills Course- 17-18<sup>th</sup> September, Suttie Centre, Aberdeen
- Monthly Education Session – Meet the MTC Team – 28<sup>th</sup> September (12-1.30pm)
- Care of Burns in Scotland (COBIS) Session on Current Burns Management - 22<sup>nd</sup> October (3-5pm)