

SCOTTISH PAEDIATRIC ANAESTHESIA NETWORK AGM

Dunkeld Hilton Hotel Friday 24th April 2009

Chairman: Dr G Wilson

Present:

Alistair Baxter (Edinburgh), Matthew Checketts (Dundee), Lew-Chin Chee (Inverclyde), Tom Cripps (Borders), Craig Cumming (Dundee), Emma Dickson (Edinburgh), Paul Fettes (Dundee), Steven Gilbert (Dunfermline), Andrew Hothersall (Western Isles), Pamela Johnston (Dundee), Phil Lacoux (Dundee), Colin Lang (Stirling), Ros Lawson (Yorkhill), John Martin (Wishaw), Barry Mcguire (Dundee), Vimty Muir (Monklands), Janet Pollock (Southern General), Artur Pryn (Inverclyde), Grant Rodney (Dundee), John Rutherford (Dumfries), David Simpson (Edinburgh), Francois Taljaard (Monklands), Jonathan Whiteside (Inverness), Graham Wilson (Aberdeen), Shelagh Winship (Perth), Megan Dale (Tayside trainee), Mario Fernandes (Tayside trainee), John Glen (Yorkhill trainee)

Apologies:

Catriona Barr (Shetland), Jane Peutrell, Neil Morton, John Currie and Phil Bolton (all Yorkhill), Tom Engelhard (Aberdeen)

Minutes and matters arising:

2008 minute was accepted, there were no matters arising

Sponsorship:

The generous sponsorship of Abbott, Kimberley Clark and Karl Storz endoscopy was acknowledged.

Office Bearers:

Two year terms of office of all had come to an end

Mark Bloch (website), **Andrew Hothersall**, (R&R), **Alistair Baxter** (Education), **Grant Rodney** (secretary), **Graham Wilson** (Chairperson & Scottish rep APA) were existing office bearers. All departing committee persons were thanked for their contributions.

As previously agreed, **Grant Rodney** would assume chair of SPAN, and **Alistair Baxter** remains as educational representative, being in the midst of educational meeting organisation for 13 November 2009.

Vimty Muir was elected secretary, **John Rutherford** with website responsibility, **Catriona Barr** as remote and rural representative.

Educational update:

Alistair Baxter presented plans for an educational meeting on Friday 13th November at the Stirling conference centre. This will include morning lectures from Rob Walker (managing expected difficult airways), Crispin Best (managing unexpected difficult airways), Tom Engelhard (paediatric airway equipment) and Craig Cumming (maintaining airway skills). The afternoon session will be devoted to small group workshops and scenario training. The meeting fee will be pitched as low as possible. Encouragement will be given to trainees and to anaesthetic nurses and ODPs to attend, with subsidised low

meeting fees. SPAN members are encouraged to attend and to encourage others to attend. More information and advertisement to follow. If successful a biannual educational meeting under SPAN auspices may be considered.

Web site update:

Mark Bloch had managed the web site until retiring recently from paediatric anaesthesia. The web site had lapsed. Graham has negotiated with Scottish Health on the web (SHOW) to host the SPAN site, and the new web address is HYPERLINK "<http://www.span.scot.nhs.uk>" www.span.scot.nhs.uk The site has a framework only and currently no content

It is hoped that the web site will be updated in the coming months, further information will follow.

Finances:

Graham confirmed that the SPAN account stands at ~£1200, prior to delegate meeting and sponsorship fees. The intention remained to not have a membership fee for SPAN and to run a small positive balance in the account.

Membership:

SPAN membership stands at 58. This consists of leads from Scottish hospitals that perform any paediatric anaesthesia or resuscitation and those who have attended SPAN annual meetings. Members were reminded that membership of SPAN and meeting attendance is available to all anaesthetists who care for children, 'spanning' from tertiary centers to remote and rural areas.

APA Scottish membership:

Graham pointed out that Scotland is currently over represented on the APA council with **Neil Morton** (president), **Jane Peutrell** (secretary) and **Graham** (Scottish rep). Regional APA council membership will cease in future, following an APA constitutional change. Where no national council member is currently on the APA committee, input to APA matters will be provided by the network lead for the region or country ie Wales, Northern Ireland, Scotland

Specialist Paediatric Services:

Dave Simpson mentioned a Dep of Health paper looking at specialist paediatric services. This highlighted 23 specialist services, which included the absolute need for paediatric anaesthesia and critical care services (HDU facilities) In England The Health Care Commission views implied lack of sustainability of paediatric services in non specialist centres. Dave mentioned the Scottish political aspiration to local service delivery, probably using a model devolving care to larger DGHs with a separate remote and rural solution.

Other:

Graham mentioned a meeting that he and **Jane Peutrell** are due to attend a meeting with Morgan Jamieson to discuss issues including peer review, differences between English and Scottish paediatric health care, lack of paediatric mortality data for Scotland, and generally to raise the profile of paediatric anaesthesia and critical care in Scotland. A reminder that the 2010 APA meeting takes place in Glasgow with an excellent draft program

PEER REVIEW SESSION SUMMARY

Trottie Kirwan (chair of APA peer review group) and Simon Courtman (SWACA regional coordinator for pilot peer review project) gave excellent presentations about peer review. Trottie presented an overview of the peer review process, Simon highlighted the results of the SWACA pilot from the point of view of the regional coordinator, the reviewed hospital and the external reviewer.

The subsequent discussion is summarised as follows:

Advantages:

Shore up networks and share common ideas and problems and solutions.

Evaluation of paediatric services and opportunity to improve.

Self assessment deemed very helpful with opportunity to reflect and value paediatric anaesthesia service.

Feedback from colleagues positive and helpful and even 'heartwarming'

Opportunities to improve services resulted eg getting access to additional play specialist, equipment purchase, child friendly decoration to areas, access to paediatric life support and child protection courses, case for paediatric HDU beds etc.

Dispelled myths about predatory colleagues and other units and desire to 'remove services', and about issues of confidentiality

All units used the report, which is owned by the individual department, to highlight areas of good practice at managerial and hospital board level and to attempt to get access to resources when need perceived.

All units reviewed in SWACA region described a positive experience worth undertaking despite initial reservation.

Disadvantages

APA peer review does not sit within the governance process which differs in Scotland from England and other countries.

There may not be sufficient clout for the process to be meaningful, ie why should managers take note of a voluntary process initiated by the APA?

The APA has a copy of the report what about issues of confidentiality and performance?

It is not the remit of the APA to deal with these matters, it is for regulatory bodies like the College, GMC, Scottish government, QIS

Scotland has a process of standards review overseen by QIS and this should be within the QIS remit in Scotland.

If we undertake paediatric review where does it all end for the DGH anaesthetist, will review of obstetric, vascular and other services be required.

Timing wise, should this process be undertaken when the whole revalidation issue is being decided?

Overall there was agreement that the process had potential advantage in terms of network consolidation, interaction with colleagues and highlighting and improving paediatric anaesthesia standards in line with College, Association and Health Care Commission guidelines.

Views seemed split on whether peer review, if done at all, should be done under the auspices of the APA and by peers, or as part of a QIS process with external assessment.

Overall it was felt that there was enough interest and merit in exploring peer review via SPAN. The committee will canvas views further and encourage hospitals to come forward in order to pilot the process in Scotland

Grant Rodney
28 April 2009