

Bwrdd Iechyd Prifysgol Bae Abertawe Swansea Bay University Health Board



Meeting Date	24 January 2	uary 2023 Agenda Item					
Report Title	Update from t	he South Wales	Major Trauma Ne	etwork			
Report Author	Andrea Bradley (Network Manager, SWTN)						
Report Sponsor	Sian Harrop-Griffiths (SRO, SWTN)						
Presented by	Andrea Bradley (Network Manager, SWTN)						
Freedom of	Open						
Information							
Purpose of the Report	To provide SBUHB Quality and Safety Committee with an updated position from the South Wales Trauma Network (SWTN) Operational Delivery Network (ODN).						
Key Issues	Nil issues at ODN level. Any South Wales Trauma Network issues updated and included via the Delivery Assurance Group (DAG) report and the governance section of the report.						
Specific Action	Information	Discussion	Assurance	Approval			
Required (please choose one only)							
Recommendations	 Members are asked to: Note content of report. Note continuing excellent progress across the work through quarter 2 of the ODN establishment Note the key actions for the next quarter. Note the SWTN mitigation and impact around the recurring risks Note that there are no risks to Swansea Bay as host organisation of the ODN						

Quarter 2 Update from the South Wales Major Trauma Network

1. INTRODUCTION

The South Wales Trauma Network (SWTN) launched on September 14th 2020. The formal evaluation programme for the operational network began in March 2022 when the first year of operational data was made available. The external Peer Review process began during November 2021 where evidence gathering was required across all participant organisations and culminated with the peer review interview process that took place in late March 2022. TARN data for the full year effect was made available in early March 2022 and alongside other measurable metrics informed both the peer review and has been utilised for the formal one-year evaluation being carried out in collaboration with Swansea University.

The Operational Delivery Network (ODN), Major Trauma Centre (MTC) and orthoplastic services are commissioned by WHSSC (Welsh Health Specialised Services Committee). WAST (Welsh Ambulance Service NHS Trust) and EMRTS (Emergency Medical Retrieval and Transfer Service) Cymru are commissioned by EASC (Emergency Ambulance Services Committee). The remainder of the service is commissioned by LHBs.

SBUHB (as the host of the network) has an MOU (memorandum of understanding) in place with all organisations and the ODN discharges its clinical governance responsibilities and 'operational authority' (in relation to patient flows) through its clinical and operational board to WHSSC (via the SWTN (South Wales Trauma Network) Delivery Assurance Group). It also reports into the SBUHB Management Board and Q&S Committee respectively. The role of SBUHB is described in detail in the MOU with organisations. It has been agreed that quarterly update reports will be provided to the Swansea Bay UHB Management Board and Quality and Safety Committees as part of the governance process.

2. BACKGROUND

Some key points to note from Q2 2022/23 are set out below, the detailed information is contained in **Appendix 1**.

- There continues to be a high number of patients accessing the MTC either by a primary or secondary transfer
- 87% of admissions are due to road traffic accidents and falls (inc falls below and above 2 meters)
- 20% of patients discharged from the MTC required repatriation to their local Health Board hospital
- Compliance against the daily sitrep remains variable. The network team are working with the sites who have poor compliance
- 69 TRiDs were submitted with a wide variety of themes

3. GOVERNANCE AND RISK ISSUES

There is a live risks and issues log that is presented to the Clinical and Operational Board meetings. The latest Risk and Issue Registers are attached as **Appendix 2 & 3** respectively.

Quality and Safety Committee – Tuesday, 24th January 2023

There are currently 25 risks identified. One risk is a high rating, and the mitigations can be found in the attached Risk Register as **appendix 2**:

 Major Trauma ICU Capacity- 3 ICU beds were commissioned as part of the SWTN however, due to various demand in the MTC ICU capacity transfers have taken place. These require investigation regarding the requirement for MTC rehabilitation requirements post patient ICU admission and an evaluation regarding major trauma patients transferred from MTC ICU to TU ICU including their rehabilitation requirements when ICU admission has been stepped down to take place.

Mitigation- Evaluation ongoing- being led by the ODN.

There are currently 4 live issues. One issue is a high priority, and the mitigations can be found in the attached Issue Register as **appendix 3**:

• **Trauma Team Activation-** ODN has started a process of benchmarking across other MTNs around 2 tier trauma team activations

Mitigation- Trauma team activation issues noted across 6 Health Board's via the peer review process. A fully evaluated trial of a 2-tier trauma call model due to take place in CTM and formal reporting back to the SWTN will take place.

4. FINANCIAL IMPLICATIONS

There are no direct financial implications of this report.

The ODN holds the budget for the ODN element of the South Wales Trauma Network only. This is broken down into the following elements-

Pay- There is currently a band 4 Administrative Support officer vacancy out to advert. The ODN have appointment into a band 6 TARN Support Manager on a secondment basis as proof of concept, with the potential to request for recurrent funding.

Non-Pay- The ODN are on target to breakeven from a non-pay perspective at the end of the financial year.

Informatics- All informatics support and software solutions are now in place or have plans to come online as described within the Programme Business Case.

Training & Education- The ODN are working with the Training and Education Lead to identify the areas of priority for this financial year and 2023-24.

5. RECOMMENDATION

The Quality & Safety Committee are asked to:

- Note content of report
- Note continuing excellent progress across the work through year 2 of the ODN establishment
- Note the key actions for the next quarter
- Note the SWTN mitigation and impact around the recurring risks

Quality and Safety Committee – Tuesday, 24th January 2023

- Note that there are no risks to Swansea Bay as host organisation of the ODN

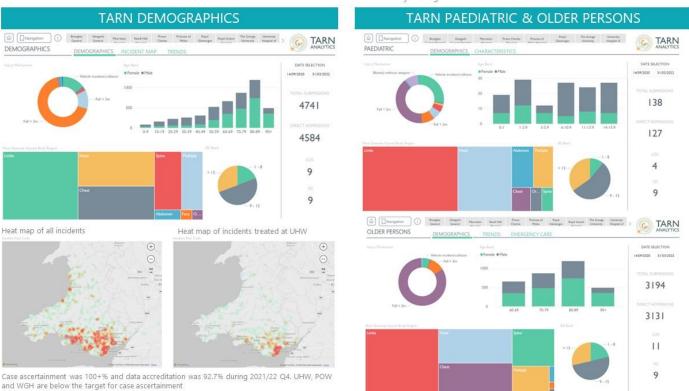
Link to Enabling	Supporting better health and wellbeing by actively empowering people to live well in resilient communities	promoting and				
Objectives (please choose)	Partnerships for Improving Health and Wellbeing					
	Co-Production and Health Literacy					
U	Digitally Enabled Health and Wellbeing					
	Deliver better care through excellent health and care services achieving the					
	outcomes that matter most to people					
	Best Value Outcomes and High Quality Care					
	Partnerships for Care					
	Excellent Staff					
	Digitally Enabled Care					
	Outstanding Research, Innovation, Education and Learning					
Health and Car		-				
(please choose)	Staying Healthy					
	Safe Care					
	Effective Care					
	Dignified Care					
	Timely Care	\boxtimes				
	Individual Care					
	Staff and Resources					
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Quality and Safety Committee – Tuesday, 24th January 2023

- Integration Clinical pathways are delivered across the network.
- **Collaboration –** The SWTN works in collaboration with all HBs in Wales as well as with WAST.
- Involvement all HBs are involved in the network alongside 3rd sector groups

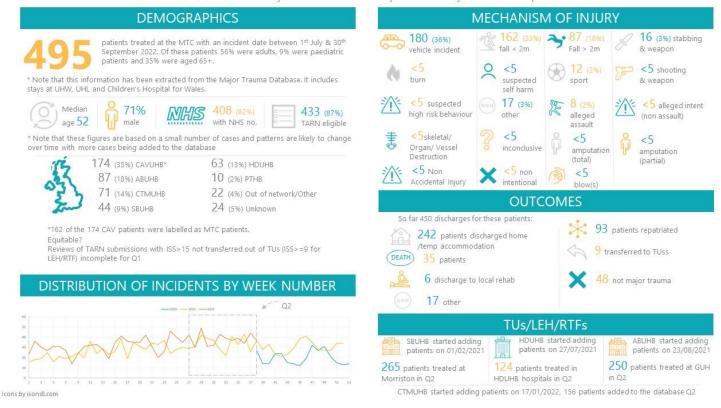
Report History	The ODN last reported into SBUHB Quality & Safety in October 2022.
Appendices	Appendix 1- SWTN Detailed Activity Q2 (2022-23) Appendix 2- Network Risk Register Appendix 3- Network Issue Log

Appendix 1- SWTN Detailed Activity Q2 (2022-23)



South Wales Trauma Network TARN activity from go live

South Wales Trauma Network Major Trauma Database Activity between 1st July 2022 and 30th September 2022.



Quality and Safety Committee – Tuesday, 24th January 2023 6

South Wales Trauma Network Activity be	tween 1 st July a	and 30 th Septer	nber 2022			
TRAUMA DESK, WAST & EMRTS	TRID SUMMARY					
median number of calls connected per day. 2, 144 incidents (including providing advice to crews, arranging transfers and checking the call stack).	69 TRIDS. Most common themes include delayed repatriation, pathway awareness and clinical issues					
130 trauma tool	TRAUMA DESK OCCURRENCE LOG ENTRIES					
positive incidents	12 entries. Themes include: no contact with trauma desk, no trauma desk cover, TTL phone line down					
60% taken 40% taken to 17% taken 83% taken to	GREATix					
to UHW TU/LEH/RTF/ to UHW TU/LEH/RTF/ out of network out of network	1 nominations for teamwork, support, leadership and communication					
* Note that Trauma desk data is at incident level. Therefore, in an RTC, multiple patients would have the same Incident number and we would not be able to differentiate between patients, and trauma tool usage can only be recorded once	10					
154 primary missions to MTC, 217 primary missions overall, 100 secondary transfers to MTC (80 were ACCTS) involving EMRTS	EDUCATION					
+ N primary transfers to MTC by WAST – New ePCR data currently not available	Commencement of scoping exercise for Level 2 nursing course development.					
in DHCW data warehouse therefore unable to provide these figures currently. MTC data for first year shows that 77% of direct admissions had a mode of arrival of ambulance.	Plan 2022	ning of first South 2	i Wales Trauma N	Jetwork conferen	ce due to be held	November
· Or	SITREP COMPLIANCE					
11 pathway 1 (Hyperacute) transfers to MTC	Aim for 90% compliance.					
22 pathway 2 (Emergency) transfers to MTC	EMRTS	PCH	MH	UHW 020/	RGH	WAST 90%
pathway 3 transfers to UHW recorded	95%	95%	92%	92%	92%	90%
*Note that the figures are under-reported as further cases of secondary transfers are recorded in the Trauma Database	BGH	WGH	POW	GGH	GUH	
6 incidents escalated to EMRTS Top Cover Consultant	87%	82%	76%	75%	48%	
Icons by isons8.com						

Appendix 2- Network Risk Register

Appendix 3- Network Issue Log