

# South Yorkshire & Bassetlaw Critical Care Operational Delivery Network

**Annual Report 2022/23**

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## **Foreword by Dr Nick Barron, Network Medical Lead**

2022-23 has seen the South Yorkshire and Bassetlaw Critical Care Operational Delivery Network (SYBCCODN) settle into the post-pandemic world of the NHS. The effects of Covid-19 in terms of patient numbers seem to have diminished to levels in keeping with those seen with seasonal flu. Hospitals have adapted their PPE, testing and isolation requirements in response to this and the days of doffing and donning areas, high levels of PPE and large numbers of infected patients are becoming increasingly distant memories. This has been replaced by a world of catching up, staffing issues and industrial action. As is always the case, critical care has stepped up and adapted to ensure on going patient safety and service recovery. Nursing, medical, AHP and support staff have been exceptionally flexible in maintaining service delivery and overcoming adversity.

Myself, Claire and Andrea have continued to complete the first round of peer review visits. At the point of writing, there is only one unit visit yet to be undertaken, which is the Neurosurgical ITU at the Royal Hallamshire Hospital and this is scheduled for May 2023. The feedback from the units regarding peer reviews has been exceptionally positive and they remain not only a mandatory requirement of the ODN function but a useful tool for identifying service development needs to support improvements. As a team, we are exceptionally grateful for the efforts put in by the units visited so far and by the staff who have gone out of their way to provide appropriate information. We are particularly indebted to staff from out of the area that have been invaluable in providing a robust means of peer reviewing specialist units such as the Cardiac Intensive Care Unit at the Northern General Hospital.

The peer reviews have highlighted the issues all units face with staffing. Retention of specialist nursing staff remains a challenge and peer reviews have also highlighted issues with regard to medical staffing challenges and AHP provision.

We have been very fortunate to have Joanne King and Dr Emma Temple joining us for the year and providing a huge amount of assistance with their improvement activities. This is fully described in this report but I would like to extend a huge thank you to both of them and hope to see them continue this invaluable work.

Additionally I would like to extend a big thank you to all the staff involved in critical care for their on-going hard work and dedication throughout the year.

**Dr Nicholas Barron**  
**SYBCCODN Medical Lead**

## Role of the ODN

The strategic aims of the South Yorkshire & Bassetlaw Critical Care ODN (SYBCCODN) are based on the National Service Specification for Adult Critical Care Operational Delivery Networks, NHS Commissioning Board (2013).

They are:

- To ensure equity of access, equitable care and timely admission and discharge to and from adult critical care for all appropriate patients
- To take a whole system collaborative approach to ensure delivery of safe and effective services across the patient pathway, adding value for all its stakeholders
- To promote cross-organisational multi-professional clinical engagement to improve pathways of care
- To ensure resources are used efficiently/effectively

The Adult Critical Care Operational Delivery Network for South Yorkshire & Bassetlaw (SYBCCODN) was re-commissioned by NHS England Specialised Commissioning Yorkshire and Humber Hub in April 2020 following a 2 year break. The network model changing from what had existed previously to one merged from a management perspective with the West Yorkshire Critical Care & Major Trauma ODNs, and is hosted by Leeds Teaching Hospital NHS Trust.

The organisational structure is set out in Appendix 1.

The South Yorkshire & Bassetlaw Critical Care ODN is made up of 4 acute trusts who collectively serve a population of approximately 1.5 million;

- Barnsley NHS Foundation Trust - BFT
- Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust - DBTFT
- Rotherham NHS Foundation Trust - RFT
- Sheffield Teaching Hospitals NHS Foundation Trust - STHFT

Critical Care services are normally delivered across the network within discrete locations such as Intensive Care Units (ICU) or High Dependency Units (HDU), or combined units. Some services are dedicated to one speciality; post cardiac surgery or neurosurgery/neurology.

Services, irrespective of case mix, are required to meet the standards described by the Intensive Care Society & Faculty of Intensive Care Medicine<sup>1</sup> and the Service Specification for Adult Critical Care Services<sup>2</sup> (D05).

Key achievements of the ODN during past 12 months include:

- Leadership course delivery for West and South Yorkshire Critical Care Unit Registered Nurses (RN)
- Capacity monitoring and mutual aid support as required

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<sup>1</sup> Guidelines for the Provision of Intensive Care Services, Joint Professional standards Committee of the Faculty of Intensive Care Medicine and the Intensive Care Society Edition 2(2019)

<sup>2</sup> NHS England (2 019) Adult Critical Care Service Specification

- Supporting timely and accurate capacity and workforce data submission, and provision of daily capacity data to SYB stakeholders as required
- Supporting completion of the national critical care stocktake
- Delivery of a national nursing conference on behalf of CC3N
- Completion of a rehabilitation gap analysis and establishment of network rehabilitation forum
- Engagement with South Yorkshire Integrated Care Board AHP representatives
- Completion of critical care capacity modelling project
- Critical care peer review visits completed for Doncaster and Bassetlaw, Sheffield Teaching Hospitals General and Cardiac Critical Care Units
- Delivery of transfer training
- Supporting access to an interim Adult Critical Care (ACC) transfer service

## Network Team

The SYBCCODN Team comprises of:



**Claire Horsfield**  
 Network Manager & Lead Nurse  
 (West Yorkshire Critical Care & Major Trauma  
 and South Yorkshire & Bassetlaw Critical Care  
 ODNs)



**Dr Nicholas Barron**  
 Network Medical Lead



**Andrea Berry**  
 SYBCCN Quality Improvement Lead Nurse



**Joanne King**  
SYBCCN Rehabilitation Quality Improvement Lead



**Samantha Rogers**  
Network Data Analyst/Project Officer

### **Network Governance**

The ODN is aligned to the SY&B Acute Trust Federation, and this alignment continues to be an essential part of delivering critical care services across the system.

Richard Parker, Chief Executive Officer at Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust continues in the role as chair of the network Clinical Advisory Board, and meetings are held quarterly. We are grateful to Richard for his continued support for the network and his enthusiasm for improving critical care services across South Yorkshire and Bassetlaw.

### **Clinical Advisory Board**

The Clinical Advisory Board (CAB) comprises the network medical lead, network manager, quality improvement lead nurse and medical, nursing and management leads from each of the South Yorkshire & Bassetlaw critical care units, specialised commissioners and workforce transformation. There is additional representation from Yorkshire Ambulance Service (YAS) and other key stakeholders as required. The board meets quarterly and is the decision making body on behalf of the constituent network organisations.

The role of the board is to agree priorities and work streams, ensuring collective responsibility and cooperation by all the organisations within the critical care network in developing adult critical care services in line with national and local requirements. The

ODN work plan 2021 - 23 was developed and agreed at the July 2021 board meeting (Appendix 2).

Reports referred to within this report are available on request via: [Claire.horsfield4@nhs.net](mailto:Claire.horsfield4@nhs.net)

## Collaboration & Communication

The SYBCCODN team embrace the opportunity to work collaboratively with colleagues to improve services for patients.

### National Collaboration

Members of the SYBCCODN have continued to contribute to national programmes of work which include:

- National Network Directors/Managers Forum - Claire Horsfield (Co-chair)
- National Network Medical Leads Forum - Dr Nicholas Barron
- National Rehabilitation Outcomes Group- Claire Horsfield
- National Nursing Workforce Group -Claire Horsfield & Andrea Berry
- Critical Care Leadership Forum -Claire Horsfield
- Critical Care National Network Nurse Leads Forum (CC3N) - Claire Horsfield & Andrea Berry
- National Critical Care Education Review Forum - Andrea Berry
- National AHP Group -Joanne King

In July 2022, West and South Yorkshire Network team members were delighted to act as project leads to deliver a national nursing conference in Birmingham on behalf of CC3N. The event was well attended by over 200 delegates and 18 sponsors and there was good representation from SYB critical care units. The day ended with guest speaker Philip Hammond who delivered an important message about self-care as well as several hilarious anecdotes from his time as a junior doctor in training.



### Regional Collaboration

The SYBCCODN continues to work with a wide variety of organisations across the North of England, Yorkshire and Humber to improve patient pathways, outcomes and experience. Partnership working with West Yorkshire and North Yorkshire and Humberside ODNs has continued to be strengthened over the past 12 months with regular meetings of the ODN teams to facilitate collaborative work streams. The network team also attend various regional meetings, which offer the chance to link with other Adult and Paediatric ODNs, and NHSE colleagues to receive national updates, identify issues and offer support; e.g. NEY Critical Care Cell and the Yorkshire and Humber Critical Care Huddle.

The network also continues to engage with the Y&H Maternal Enhanced and Critical Care Group (MEaCC) to improve the care of acutely ill maternity patients, with the MEaCC team presenting an overview of their work at the CAB meeting in February 2023.



## Network Communication

To facilitate timely mutual aid requests and provide individual support the network established a WhatsApp group at the beginning of the pandemic and this has continued to provide a valuable and responsive method of communication whereby clinical leads may seek the opinions of their peers about specific clinical issues or may seek support in the form of mutual aid or highlight problems with patient flow.

The network values existing and emerging collaborative relationships such as the SY Integrated Care Board, Acute Trust Federation and the SYB Workforce Transformation Group, which have been particularly useful in raising the profile of critical care and articulating specific development needs.

The network website and twitter platforms are maintained to provide a valuable resource for critical care colleagues and patients within and outside the SYBCCODN.

## Patient Engagement

The ODN continues to seek Patient and Public involvement in our activities. We have received an offer of support from a past patient who has kindly agreed to share their experience and insight in the hope this will help drive improvements across the service.

The patient and carers information page on the network website has now been created and content continues to be added to provide useful resources for past patients and their families.

The rehabilitation forum has worked with a number of stakeholders to deliver a joint conference between West Yorkshire and South Yorkshire and Bassetlaw Networks and patient stories feature in this programme. Unfortunately due to industrial action during February, the event had to be postponed until May 2023.

## SYB Critical Care Capacity and Patient Flow

The total bed base for the Network for 2022-23 was 128 beds of which 64 were described as level 3 and 64 as level 2 as per Table 1.

**Table 1- Baseline critical care bed numbers by Trust 2022**

Unit	Level 3 beds	Level 2 beds	Total
Barnsley	8	5	13
Bassetlaw	4	2	6
Doncaster	10	10	20
Rotherham	5	8	13
STH General	18	26	44
STH Cardiac	12	0	12
STH Neuro	7	13	20
<b>Total</b>	<b>64</b>	<b>64</b>	<b>128</b>

Source: [Service Search Results | NHS Pathways DoS \(directoryofservices.nhs.uk\)](https://directoryofservices.nhs.uk)

The demand for critical care will continue to grow due to an ageing population and advances in technology. The need for level 2 and level 3 care will increase with the increasing use of specialised services such as complex interventional cardiology, bone marrow and solid organ transplants. Such predictions prompted the commissioning of a SYB capacity modelling project which has now been completed and presented to the CAB in February 2023. The model was developed to predict the critical care capacity requirements over the coming years up to 2029. Utilising Critical Care Minimum Data

Set (CCMDS) from 2016-2020, analysis was carried out by Dr Tom Lawton (Consultant Intensivist and Director of Clinical Analytics for the Improvement Academy) Key points to note include;

- The South Yorkshire population has grown over the last two decades and has reached 1.4m in 2020, up to 1.5m including Bassetlaw.
- With an established base of 128 critical care beds, this currently provides 8.5 beds per 100,000 capita of population.
- Large units such as STH general ICU are better able to cope with running at higher occupancy levels
- Level 2 and level 3 bed requirements are predicted to increase by 2029 to the numbers in Table 2.
- Capacity increases have associated significant workforce implications
- The full report is available on request from: [Claire.horsfield4@nhs.net](mailto:Claire.horsfield4@nhs.net)

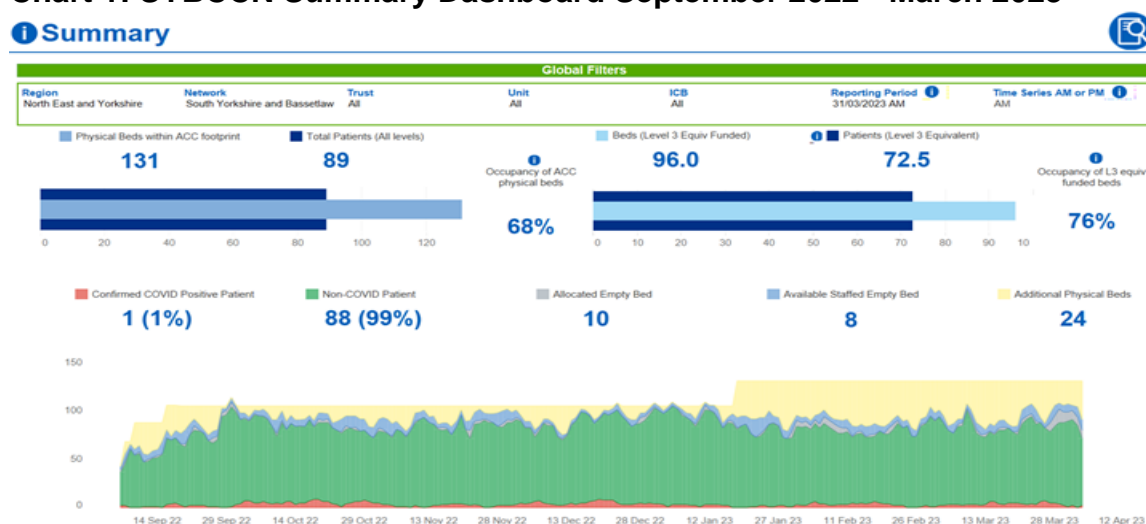
**Table 2: Model Recommendations for 2029**

Unit	L2 Beds	L3 Beds
Barnsley	10 - 11	8 - 9
Bassetlaw	3 - 4	6 - 7
Doncaster	12 - 13	12 - 13
Rotherham	10 - 11	8 - 9
STH CICU	4 - 6	15 - 17
STH General	30 - 34	22 - 24
STH Neuro	17 - 19	12 - 13
STH SHDU	3 - 4	0

### Critical Care Capacity Monitoring

In September 2022, the national critical care capacity monitoring system known as the Directory of Services (DOS) was updated to include greater detail regarding patient acuity, workforce, bed occupancy and patient flow. The data is entered twice daily by unit staff and this is available to view at: [NCDR \(england.nhs.uk\)](https://ncdr.england.nhs.uk) with examples provided below.

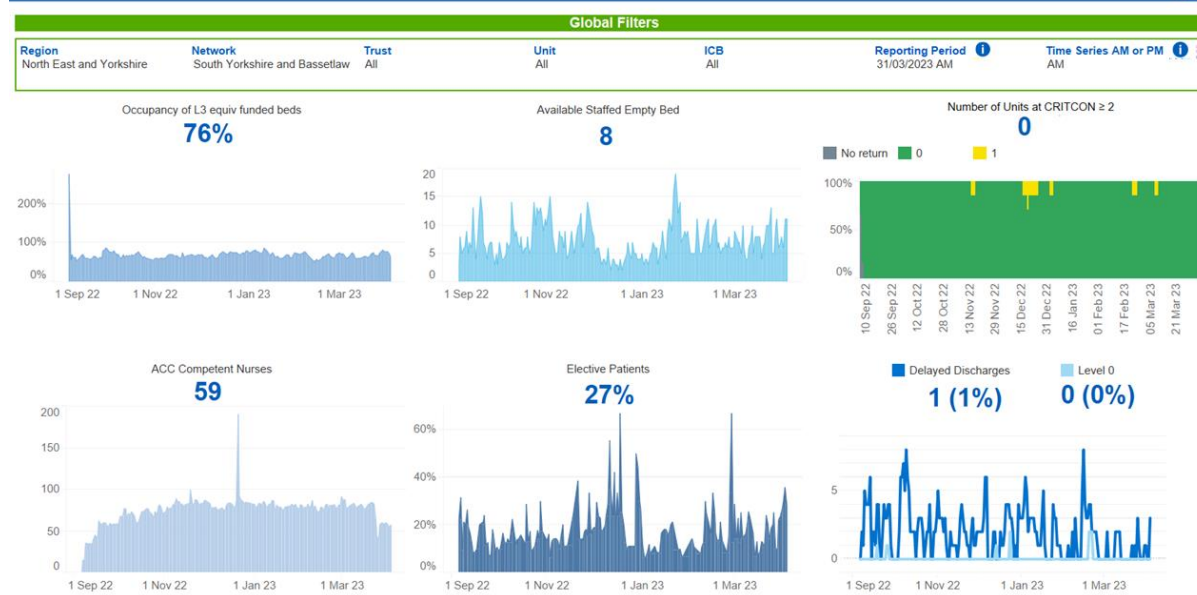
**Chart 1: SYBCCN Summary Dashboard September 2022 - March 2023**



Source: [NCDR \(england.nhs.uk\)](https://ncdr.england.nhs.uk)

## Chart 2: SYBCCN Adult Critical Care Overview September 2022 - March 2023

### Adult Critical Care Overview



Source: [NCDR \(england.nhs.uk\)](https://ncdr.nhs.uk)

The network team monitor the timely completion of this Monday - Friday and units can access the DOS system to view bed availability should mutual aid be required.

### Critical Care Surge and Escalation

Following the agreement and adoption of The Adult Critical Care Surge Plan Guidance<sup>3</sup> as a regional approach, an addendum to this plan was developed to include the critical care network response to rapid escalation such as during a mass casualty incident. This has been approved via regional EPRR governance routes and disseminated in March 2023.

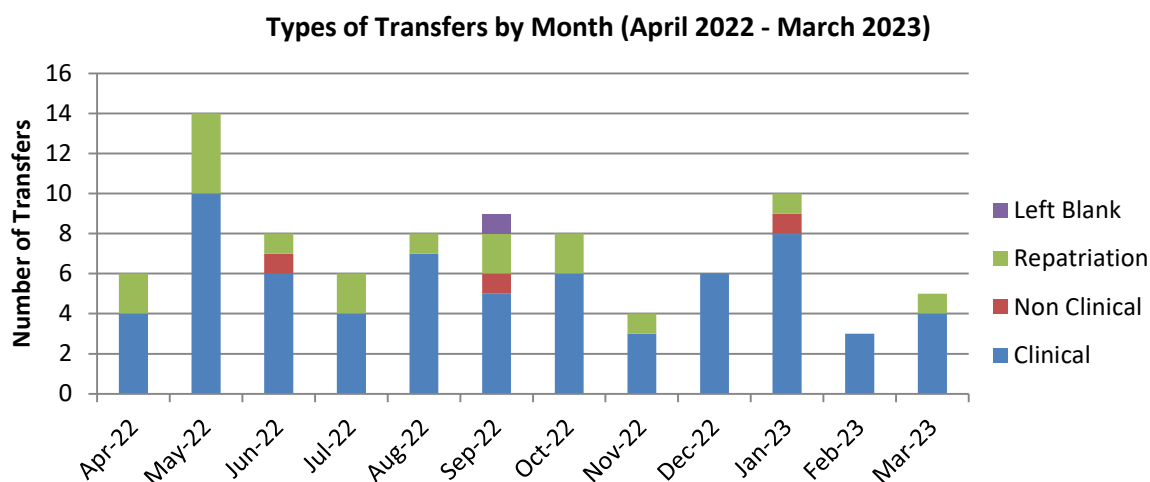
The ACC stocktake reported an increase in additional level 3 bed surge capability from 29 beds in 2021 to 38 in 2022, providing a maximum level 3 capacity of 170 beds both within and outside SYB critical care units

### SYBCCN Transfers

The transfer of a critically ill patient to another hospital site is often the last resort due to the potential risks involved, however specialist pathways or high occupancy or acuity will at times require the movement of patients from one site to another. When patients are transferred, Network guidance requires a form to be completed and submitted to the network for audit purposes. The chart below details the number and types of transfers occurring within the network for the past 12 months. It is acknowledged that this is an under estimation of the total number of transfers carried out as some transfers have been completed by the NECTAR service and others transfers may not have resulted in the return of a completed form. This data has been collated from the transfer forms that have been returned to the network office.

<sup>3</sup> NHSE/I Adult Critical Care Surge Plan Guidance, 2021

**Chart 3 - Types of transfers by Month (April 2022-March 2023)**



Source: Transfer forms received by SYBCCN

### Y&H Adult Critical Care Transfer Service

Funding of £1.9M was allocated to deliver a service for Yorkshire and Humber but a host for the service has yet to be agreed. NECTAR has provided an interim daytime service (10am -10pm) run from the Darlington base since December 2022, and this arrangement will continue until September 2023 but this is not a permanent solution. NHSE have increased the funding available to £6m /year for the NEY Region to support delivery of a 24 hours per day service (including time critical transfers). Responsibility for taking this forward now sits with the regional commissioning team.

### Critical Care Workforce

#### Critical Care Stocktake

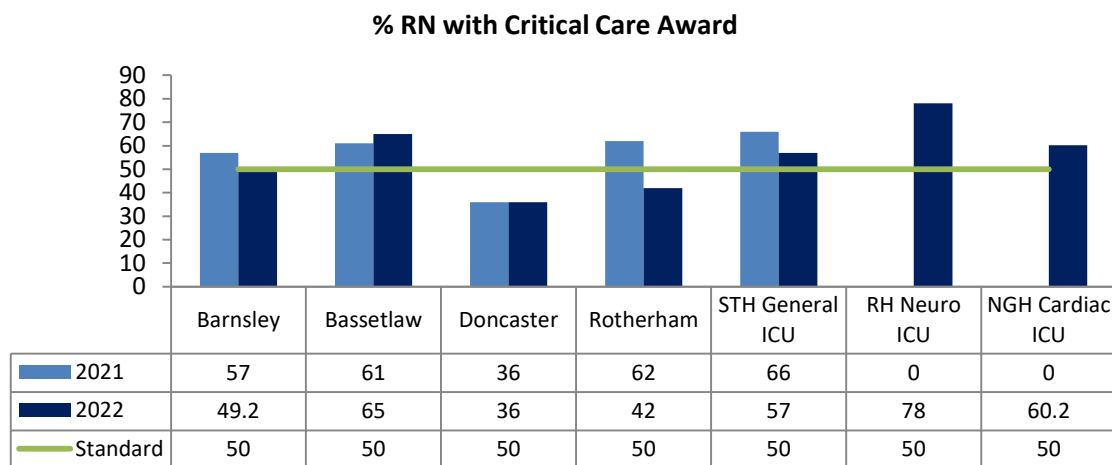
The Annual ACC Stocktake was conducted again in May /June 2022. Its aim was to provide comparative data about critical care capacity and workforce and to identify any trends and areas for development.

Data was collected by unit leads and entered via an online portal. This was then sense checked for errors and omissions, then validated with the unit prior to final submission. The key findings for SYBCCN demonstrated;

- A higher than national average proportion of band 5 Registered Nurses
- Inequity in whole time equivalent (WTE) Registered Nurses (RN) per level 3 equivalent bed
- Increased staff sickness across all units when compared with previous year
- Increase in number of RNs over 50 years of age
- Increase in number of RNs obtaining their first nursing qualification outside the UK
- Each trust has at least one trained Professional Nurse Advocate
- 4 out of 7 units met the standard relating to the % of nurses with a post registration critical care award (Chart 4)
- Inequity of AHP provision

All evidence from the national stocktake together with peer review findings have demonstrated on going challenges to the workforce establishment. Consultant staffing across the network reflects a relatively extreme pattern with some units easily able to recruit and others suffering ongoing major problems. This situation is reflected nationally and is multifactorial in its nature and isn't improving. The known solutions to non-consultant medical staffing are slowly evolving with a gradual increase in ACCPs and non-anaesthetic trainees. Progression is still slow in places that need it most and more recent changes in training program requirements, an ageing workforce and recruitment difficulties are impacting general and specialist units alike. Looking forward to the next year, implementation of clinical information systems may well become even more vital in supporting more remote management of units.

**Chart 4: SYBCCN % RNs with a critical care award**



Source: ACC Stocktake 2021 & 2022: <https://ncdr.england.nhs.uk/report/view/139>

The results of the stocktake were presented at the Clinical Advisory Board in August 2022 and later shared with the SYB Chief Nurses. As a result of this further work was requested to support improvements in relation to AHP provision and patient rehabilitation, led by the ICB AHP Lead Laura Evans, along with focussed work regarding nursing establishments led by Simon Brown, Acting Deputy Chief Nurse, DBTHFT.

### Education

Critical care courses are now centrally funded following a tendering process led by Health Education England during 2021. South Yorkshire & Bassetlaw Critical Care Education Collaborative was successful in their application and is the only approved provider of the critical care award within SYB. Other providers are available outside the network with a proportion of course delivery now being offered virtually to facilitate a blended learning approach. The stocktake and subsequent peer reviews identified units which did not meet the standard of 50% in relation to the proportion of nurses with a post registration critical care award (Chart 4), this is mostly due to high staff turnover. The network continues to link with unit educators to ensure access to course places is monitored. The SYB Workforce Transformation team collaborate with the critical care network to ensure support for critical care education.

## Critical Care Course

'Principles of Critical Care Practice' Judith Cutler, Course Leader

Over the last 12 months the SYBCCODN critical care course hosted by STHFT and accredited with Sheffield Hallam University (SHU) has continued to develop nurses from across the network and beyond. The course team includes 16 nurses and nurse educators from all our critical care units. Some of the faculty are supporting the course in their own time, it is important as a network that we continue to develop experienced nurses into education roles to ensure future sustainability. We are one of only 16 nationally approved providers funded from Health Education England (HEE) to deliver the Critical Care Course as per the high-quality specification. Funding has now been secured until at least November 2025 and ensures we have a robust programme for ensuring nurses complete the National Step 1, 2 & 3 competencies. Delivery of the modules continues with a mix of face to face and virtual sessions in line with HEE contract specifications.

The last 12 months have seen 103 students undertake 30 credit modules resulting in 51 nurses completing their overall critical care qualification. Managers have a responsibility to ensure nurses allocated to the course have the resilience to undertake the increased workload that studying presents to ensure student withdrawal numbers remain low. Six nurses from Bradford Royal Infirmary critical care unit in West Yorkshire and six nurses from Chesterfield Royal Hospital critical care unit have accessed the course as places were available. 57 students have enrolled on the February 2023 intake due to complete in July this year.

The quality of work produced by nurses undertaking the course continues to be of a high standard and this has been specifically noted by both SHU and our new external examiner Dr Nadeem Khan, Assistant Professor, Bradford University. Despite challenging work conditions, commitment to development is still clearly evident with pass rates over 98%. Several of the level 7 quality improvement projects have shown a clear improvement in patient care. Thanks to everyone across SYBCCODN for their ongoing support of the course by releasing both educators to deliver and staff to attend.

## Leadership Training

During September 2022, the WY and SYB Critical Care Networks supported two leadership training courses for senior band 5 and junior band 6 Registered Nurses. Each unit was allocated 2 places and in total 39 staff completed the 2 day course. The focus of the course was developing leadership potential and preparing staff to lead and manage change. Staff were required to complete the Myers Briggs Personality Indicator prior to the course, individual reports were generated and information was used during the sessions. Staff were also required to lead a small change management project following the course and feedback their progress at 6 months. Trust Critical Care Senior Nurse Leaders were invited to contribute on the second day of each course by being involved in a question & answer session focusing on how to manage resistance to change. The course evaluation was extremely positive. The evaluation report is available on request.

Some of the projects undertaken by staff on the course included:

- Safety huddles
- Rehabilitation - Patient Diaries
- Admission Checklist
- ETT fixation - Reducing pressure ulcers

## **Transfer Training**

Critical Care Transfer Training has gained momentum over the past 12 months in SYB and this is thanks to Dr Emma Temple and the faculty of staff who support this initiative. The transfer training faculty have established and delivered a simulation based, multidisciplinary led and attended network transfer course that meets training requirements for both doctors and nursing/ODP colleagues. Over the past 12 months in the region of 45 trainee doctors, registered nurses and OPDs, required to undertake critical care transfers as part of their role, have attended the training. Course evaluations have been excellent and the information gathered has been used to inform course development.

## **Quality Improvement**

### **Peer Reviews**

In keeping with national requirements, a key role of the network is to provide impartial advice to both providers and commissioners regarding gaps in service provision and compliance with national guidelines and standards. This is achieved through a process of annual peer review.

Within South Yorkshire there are no previous recorded peer reviews and as such this has been a key priority for the network. Peer reviews have been completed for all units with the exception of the Neuro Critical Care Unit, STHFT and this is scheduled to take place in May 2023. The peer review process involves completion of the GPICS self-assessment tool, followed by a planned peer review visit and meeting with the multi-disciplinary team (MDT). A network report is then produced and once agreed, this is circulated to unit leads, NHSE specialised commissioners and the trust executive team. Following this process, unit leads are expected to develop action plans in response to the review findings and these should be shared with the network. There are common themes emerging from peer reviews including the inequity in AHP provision and this invariably impacts on the team's abilities to deliver a consistent patient centred approach to rehabilitation. The availability of some guidelines and protocols has also been highlighted and where there are common gaps, the network seeks to develop a standardised approach. One such example of this is the proposed development of a network Ventilator Acquired Pneumonia Guideline being led by the network Medical Lead.

### **Data Collection & Benchmarking**

The network has a key role in assuring providers and commissioners of all aspects of quality and to do this, the ODN has a responsibility to obtain and provide local information, data and intelligence to support performance monitoring of the constituent members. Through the provision of comparative data, there is a focus on benchmarking to promote quality improvement and effectiveness. Data is submitted by units to inform a variety of national and local platforms. ICNARC and Quality Surveillance Information System (QSIS) data for each trust was reviewed as part of their peer review visits, and the ODN produce a quarterly data report for presentation at the CAB. Prior to the Covid-19 Pandemic, networks received annual Network Quality Reports (NQR) from ICNARC, however these ceased during the pandemic to focus resource on reporting findings relating to Covid, these comparative reports have not yet resumed and the network is reliant on individual units sharing their annual ICNARC reports.

Work is ongoing with Medicus to develop a network global measures template report which will provide comparative data relating to patient flow, capacity and other quality indicators.

### **Rehabilitation**

The rehabilitation agenda has been supported over the past 12 months by Joanne King, Rehabilitation Sister at Barnsley, who has been seconded to the network 2 days a week. Having Jo in the team has allowed specific pieces work to focus on critical care rehabilitation. A significant amount of energy has been dedicated to undertaking an in-depth gap analysis against NICE guidelines and Quality Standards for all units across SYB.

Collaboration has also taken place between the SYB ICB AHP Leads collating intelligence in relation to AHP workforce and rehabilitation provision. This piece of work is on-going.

### **Network Forum Updates**

The Network has established a number of groups and forums including;

- Senior Nurse
- Transfer
- Rehabilitation
- PNA

We are especially grateful for the contributions made by colleagues in support of network activity and forums, in particular to Emma Temple and Joanne King for chairing the transfer and rehabilitation forums respectively. Thanks also to Alison Richmond for continuing to lead the PNA forum for West and South Yorkshire & Bassetlaw Critical Care Networks.

### **Senior Nurse Meetings**

The Senior Nurse Forum meets quarterly and is attended by Matrons and senior nursing staff. The purpose of this meeting is to cascade information from national and regional sources, to share best practice and provide peer support. This meeting is also used to seek views and feedback on national work streams, enabling the group to inform and steer the future of critical care nursing. This meeting is well attended by the majority of units.

### **Transfer Forum - Dr Emma Temple**

Consultant in Neuroanaesthesia and Neuro Critical Care, Royal Hallamshire Hospital, Sheffield Teaching Hospitals

An audit completed by Dr Prateek Verma and myself, showed poor adherence to transfer guidance, particularly with respect to documentation. In response to this, the Transfer Forum stepped up attempts to advertise and educate staff about the importance of transfer documentation and use of the SYBCCODN transfer form. This work is ongoing but is already producing encouraging results. A new Neuro Transfer form has also been developed and rolled out for use in recognition of the challenges associated with these time critical transfers, particularly for





junior staff who may have limited experience with Neuro patients. Dr Prateek Verma has recently won a prize for presenting this work at a national conference.

In order to share the volume of work required as Network Transfer Lead, a Trainee Transfer Forum has been established and Dr Prateek Verma (ST6 in Anaesthesia and Critical Care) has agreed to lead this group. These motivated trainees with a wide range of experience have agreed to take on specific transfer projects required by the network under my supervision, and progress is monitored via the Network Transfer Forum. The group has created an 'indicator grid' to facilitate the audit of SYBCCODN transfer forms and the first report from this will be presented at the next Transfer Forum meeting.

### Rehabilitation Forum

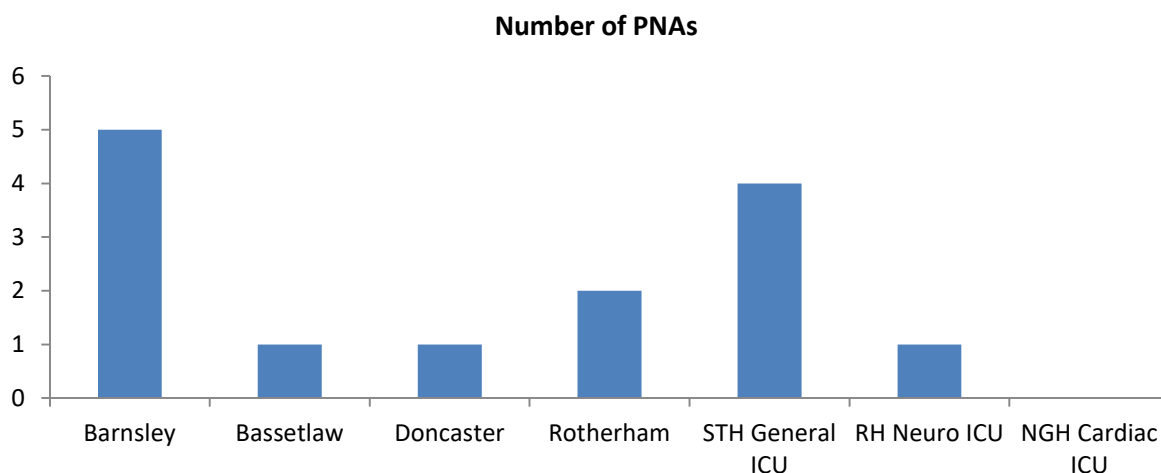
A multi-disciplinary rehabilitation forum has now been established and is chaired by Joanne King. There has been good representation from all units and development work has begun to scope out two work streams looking at delirium, possible use of virtual reality in training and early mobilisation of patients in the critical care environment. Stephanie Lee, Physiotherapist from TRTH is now representing the group on the National Networks AHP Group.

### Professional Nurse Advocate (PNA) Forum

The PNA forum is chaired by Alison Richmond (West Yorkshire Critical Care Network QI Lead Nurse) who has completed the PNA training along with Claire Horsfield. The forum is attended by PNAs from WY and SYB critical care units and provides an opportunity for peer support, sharing of resources and supporting implementation of the role in line with national guidance.

The majority of units now have at least one RN who has completed the PNA training. PNA's support all critical care nurses through the Advocating for Quality Improvement (A-EQUIP) model. This approach supports a continuous improvement process that aims to build on the personal and professional clinical leadership of nurses, enhance the quality of care for patients, and support preparedness for appraisal and professional revalidation. The restorative supervision function has been shown to have a positive impact on the physical and emotional wellbeing of staff as it reduces burnout, stress and absence, and improves job satisfaction and patient experience. The degree to which the PNA's have been able to implement the role has varied across the network and indeed nationally.

**Chart 5: SYBCCN PNAs**



Source: Critical Care Stocktake, NHSE 2022: <https://ncdr.england.nhs.uk/report/view/139>

## **Finance**

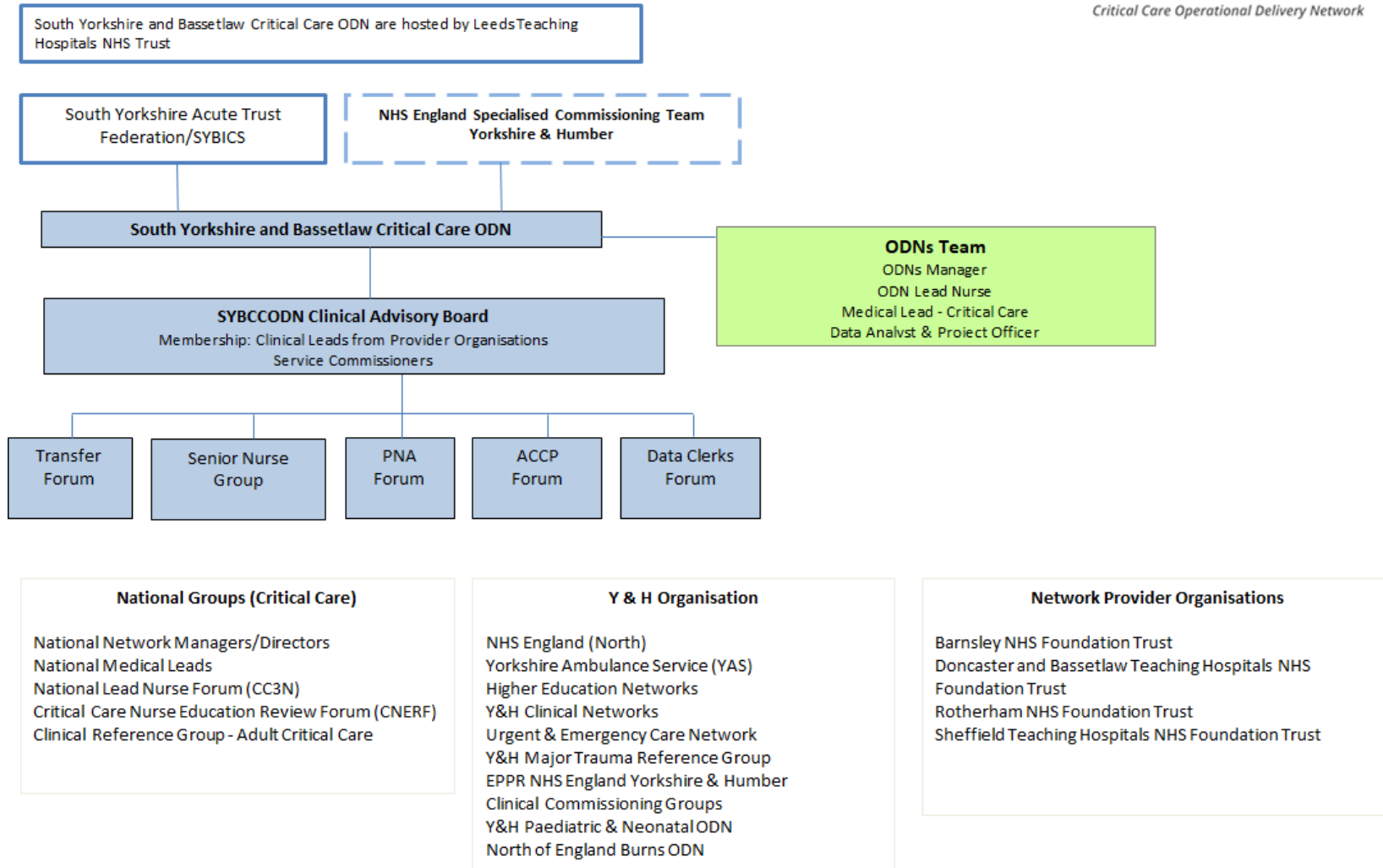
Funding for the network in 2022/2023 was provided by the North East and Yorkshire Specialised Commissioning Team (Yorkshire and the Humber). The network manager has budgetary responsibility and is accountable to Leeds Teaching Hospitals NHS Trust for financial stewardship. At year end, the network expenditure was within budget.

The Network also holds a small amount of historical sponsorship money from industry which is held by the Leeds Cares Charities and as such complies with Charitable Fund requirements.

## **Acknowledgements**

Finally, we would like to thank all those who have contributed to and engaged with the network in support of critical care delivery and improvement during the past 12 months. This includes those who have attended meetings, participated in peer reviews, completed surveys, submitted data or provided feedback. We really do value all contributions. Particular thanks to Board and Forum chairs; Richard Parker, Andrea Berry, Alison Richmond, Joanne King and Emma Temple. Thank you also to all the transfer training forum and faculty members for supporting delivery of the network transfer training course and supporting improvements in relation to critical care transfers.

# Appendix 1 - SYB ODN Structure



## Appendix 2 - South Yorkshire & Bassetlaw Critical Care Operational Delivery Network - Work Plan 2021/23

No.	Work Stream	Key Objectives	Outcome Measures	Actions	Responsibility	Links / Support	Context /Ref
1	ODN Organisational Development	Continue to develop an effective Critical Care Operational Delivery Network	Effective engagement with all stakeholders that play a role in the patient pathways for critical care	<p>Commissioner engagement: Maintain existing communication and engagement with commissioners of critical care services e.g. NHSE/I, CCG's</p> <p>Establish links with emerging ICSs</p> <p>Continue effective relationship with host organisation</p> <p>Clinical Engagement: Maintain and grow effective engagement with clinical teams, organisations and other stakeholders</p>	<p>Network Manager /Lead Nurse</p> <p>Medical Lead</p> <p>Deputy Medical Leads</p>	<p>NHSE/I CCG's ICS HEE Host Organisation Provider Trusts Medical Leads Nursing Leads Service Managers</p>	<p>NHS England: Developing Operational Delivery networks the way forward 2012</p> <p>NHS England 2014: ODN Memorandum of understanding</p> <p>Department of Health &amp; Social Care (2021) Policy paper: Integration and innovation: working together to improve health and social care for all</p>
2	Communication and Collaboration	Effective communication and engagement with all key stakeholders of the network	Systems in place to underpin effective communication, engagement and collaboration with all key stakeholders across the wider health economy using a variety of	<p>Develop network communications strategy</p> <p>Utilise a variety of communication approaches</p>	Network Team	All stakeholders	

			communication tools				
3	Quality of Critical Care Services	Delivery of consistent, equitable and effective high quality critical care services across the network	<p>Effective critical care delivery</p> <p>Timely access to and from critical care services</p> <p>Effective bed utilisation</p> <p>Positive peer review visits</p>	<p>Collect, monitor and report critical care data to identify improvement areas and share good practice e.g. benchmarking, ICNARC reports, SSQD, incidents, DOS</p> <p>Monitoring of capacity and bed utilisation</p> <p>Monitoring of delays through effective data systems e.g. Global measures, ICNARC data, DOS, SSQD</p> <p>Carry out peer review visits including 360° feedback</p>	<p>Network Manager /Lead Nurse</p> <p>Network Medical Lead</p> <p>QI Lead Nurse</p> <p>Network Administrator /Data Analyst</p>	<p>CRCU Medical and Nursing Leads</p>	<p>Guidelines for the provision of intensive care services (GPICS) Joint Standards Committee of the FICM and ICS (2019)</p> <p>Core Standards for Intensive Care Services (2013) Intensive Care Society</p> <p>NHSE (2019) Adult Critical Care Service Specification (DO5)</p>
4	Data collection, Intelligence, Analysis and Reporting	Effective use of data collection systems in order to inform quality improvement and capacity planning	<p>Network wide approach to data collection, analysis and reporting</p>	<p>Collect, monitor and report critical care data to identify improvement areas and share good practice e.g. benchmarking, ICNARC reports, SSQD, incidents</p> <p>Develop and agree data sharing agreement with stakeholders</p>	<p>Network Manager /Lead Nurse</p> <p>Network Medical Lead</p> <p>QI Lead Nurse</p> <p>Network Administrator /Data Analyst</p>	<p>CRCU Medical and Nursing Leads</p> <p>Unit data clerks</p>	<p>Putting Patients First: The NHS England business plan for 2013/14 – 2015/16</p> <p>DH NHS Outcomes Framework 2014/2015 Public Health Outcomes Framework England 2013-2016 (Outcomes 2 &amp; 4)</p>

5	Guidelines, Clinical Effectiveness and Patient Pathways	Provision of right care, right place, right time.  Effective use of critical care capacity	Work to agreed clinical pathways for critical care, including; - Transfer - Repatriation - Critical Care Escalation - Neurosurgery - Renal	Review guidance as required and develop new pathways /protocols as required according to intelligence and /or system transformation	Network Manager /Lead Nurse Network Medical Lead QI Lead Nurse		NICE Quality Standards  Intensive Care Society Guidelines  Service Specification for Adult Critical Care Services (2019) DO5  Regulation 28: Report to Prevent Future Deaths February 2017
6	Emergency Preparedness, Resilience & Response	Delivery of effective critical care service provision according to changing demand	Network and regional plans in place to manage surge and rising tide situations	Review current escalation plans with colleagues across Yorkshire & Humber  Co-ordinate the national stocktake survey and liaise with regional teams to determine priorities for the future development of critical care capacity  Utilise data and information to inform future plans (modelling)  Ensure lessons learned from Covid are included within network plans	Network Manager /Lead Nurse Network Medical Lead Deputy Medical Leads	NHSE/ICS Unit Clinical and Nursing Leads Trust EPRR Leads Trust COO's	Yorkshire & Humber Critical Care Escalation Framework (2014)  NHS England, 2013. Management of surge and escalation in critical care services: standard operating procedure for adult critical care.  Emergency Preparedness, Resilience and Response Framework. NHSE, 2015
7	Transfer of Adult Critical Care Patients	High quality transfers for critical care patients. Establish a regional ACC transfer	Safe, equitable, high quality, timely transfers of critical care patients	Explore options for the delivery of training for transfer programme and develop according to evaluations  Commence audit of transfer forms and disseminate results to inform improvement	Network Manager /Lead Nurse Network Medical Lead	NHSE/ITransfer service stakeholders	NHSE (2019) Adult Critical Care Transfer Services Service Specification  Guidelines for the transport of the

		service	within network and beyond ACC transfer service established according to Transfer Service Specification	<p>Monitor incidents related to transfers and take action to address areas for improvement</p> <p>Work with commissioners and other stakeholders to develop a project plan for delivery</p>			<p>critically ill adult (3rd Edition 2011) Intensive Care Society</p> <p>West Yorkshire Critical Care Operational delivery Network Guidance (2021)</p>
8	Workforce and Education	To have sufficient critical care workforce that is educated, skilled and competent to deliver high quality, effective critical care for patients	Critical care workforce established according to commissioning and professional standards	<p>Carry out peer review visits, highlighting areas of concern</p> <p>Undertake workforce review and link with regional teams to seek solutions to areas of concern</p> <p>Establish links with HEE, Y&amp;H Deaneries , HEI's</p> <p>Explore opportunities for new roles and ways of working to deliver a workforce for the future</p> <p>Maintain links with national groups e.g. CC3N in order to inform future education plans for critical care nursing across the network</p> <p>Embed PNA role within CRCUs across the network</p> <p>Establish links with ICS workforce transformation leads to ensure critical care training and education is included with training needs analysis.</p> <p>Highlight any areas of risk through established governance systems</p>	Network Manager /Lead Nurse Network Medical Lead	NHSE/ I CCG's ICS HEE Network Forums e.g. Education, Rehabilitation, Outreach Provider Trusts Medical Leads Nursing Leads Service Managers	<p>Strategic Workforce Planning Tool (2013)</p> <p>Guidelines for the provision of intensive care services (GPICS) Joint Standards Committee of the FICM and ICS (2019)</p> <p>Core Standards for Intensive Care Services (2013) Intensive Care Society</p> <p>NHSE (2019) Adult Critical Care Service Specification (DO5)</p>

9	Clinical Governance, Safety and Outcomes	Ensure effective and appropriate arrangements to manage patient safety, quality, risk and governance across the network	Systems and processes in place for collection and sharing of lessons learned	Review network incident reporting system and develop as required. Develop process to enable sharing of SUIs and lessons learned. Maintain network risk register	Network Manager /Lead Nurse Network Medical Lead QI Lead Nurse	CRCU Medical Leads Nursing Governance Leads	Everyone counts planning for patients 2014/14-2018/2019
10	Research, Best Practice and Continuous Improvement	Promotion of best practice research and innovation across West Yorkshire	Involvement and promotion of research initiatives	Contribute to local and national research initiatives  Explore opportunities to link with critical care researchers across the network  Include assessment of unit engagement with research as part of peer review process	Network Medical Lead Network Manager /Lead Nurse	Y&H Patient Safety	
11	Patient and Carer Experience	Ensure patients are at the heart of everything we do	Patient experience and feedback incorporated within network plans	Explore opportunities to collate feedback from follow up clinics  Develop patient and public involvement strategy  Explore opportunities to receive patient feedback  Maintain and grow patient information page on website	Network Manager /Lead Nurse Network QI Lead Nurse	Patient Groups e.g. ICU Steps	NHS Patient and Public Participation Policy (2015)
12	Financial Governance	Delivery of network objectives within financial envelope	Achievement of objectives within current budget	Review ODN structure to ensure best use of resources  Monthly review of expenditure to ensure on track	Network Manager	Finance Team, Host Trust NHSE/I	



13	Wider Influence	Contribution to the wider agenda of critical care services	Contribution to regional and national working groups to ensure the South Yorkshire & Bassetlaw ODN is able to influence decision making around future service models and clinical guidance	<p>Attendance at national and regional working groups e.g. CC3N, CCNERF; National Managers &amp; Medical Lead Forum</p> <p>Embrace opportunities to inform and support national work programmes e.g. stocktake, workforce survey, PNA role in critical care, ODP's in critical care, Nursing Associates in CC</p> <p>Attendance and presentation at national conferences to showcase South Yorkshire &amp; Bassetlaw Critical Care ODN</p>	<p>Network Medical Lead; Deputy Medical Lead; Network Manager /Lead Nurse QI Lead Nurse</p>	<p>National Groups e.g. Intensive Care Society, UKCCNA, CC3N, FICM, ACC CRG, NOrF</p>	
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