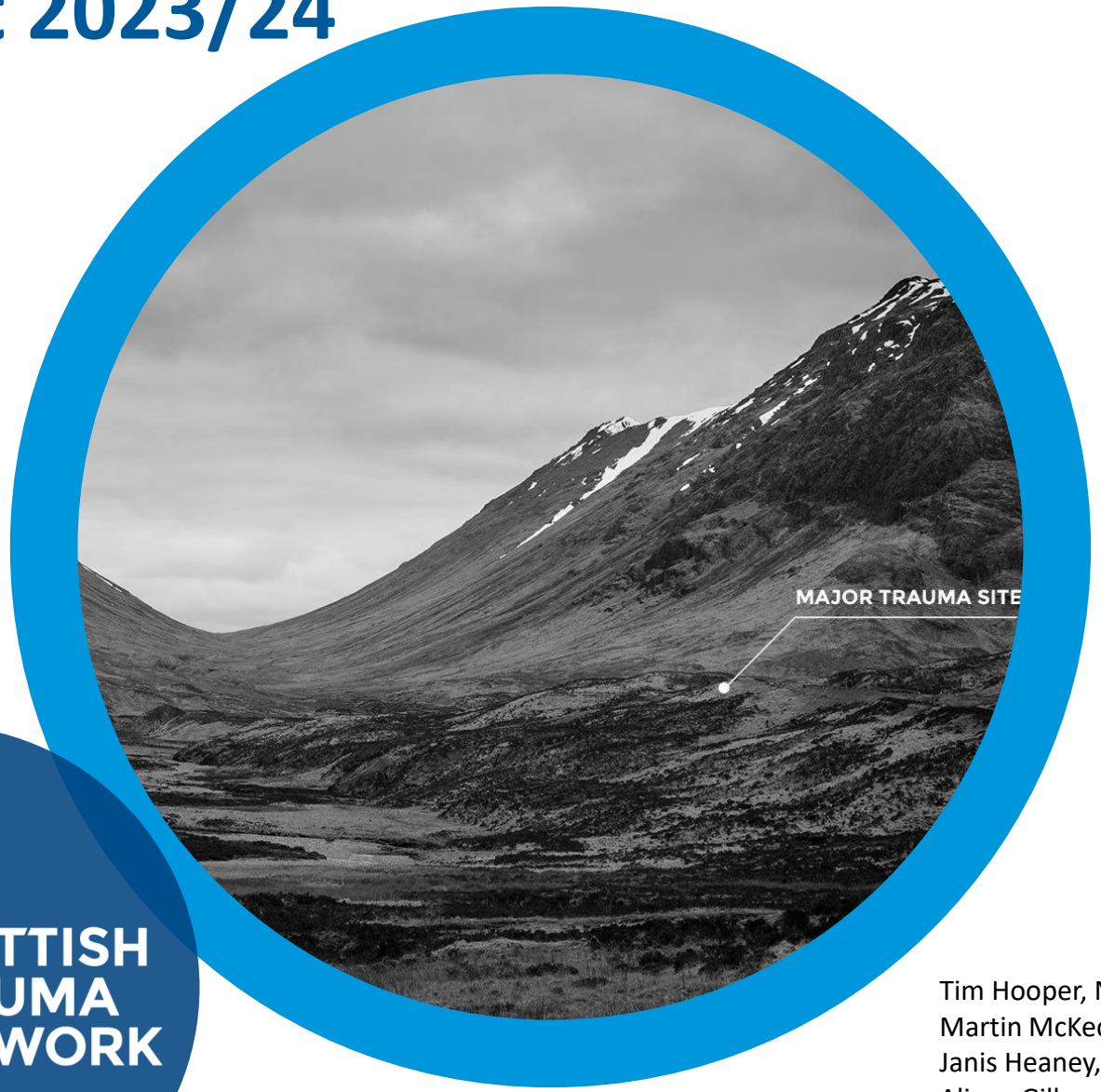
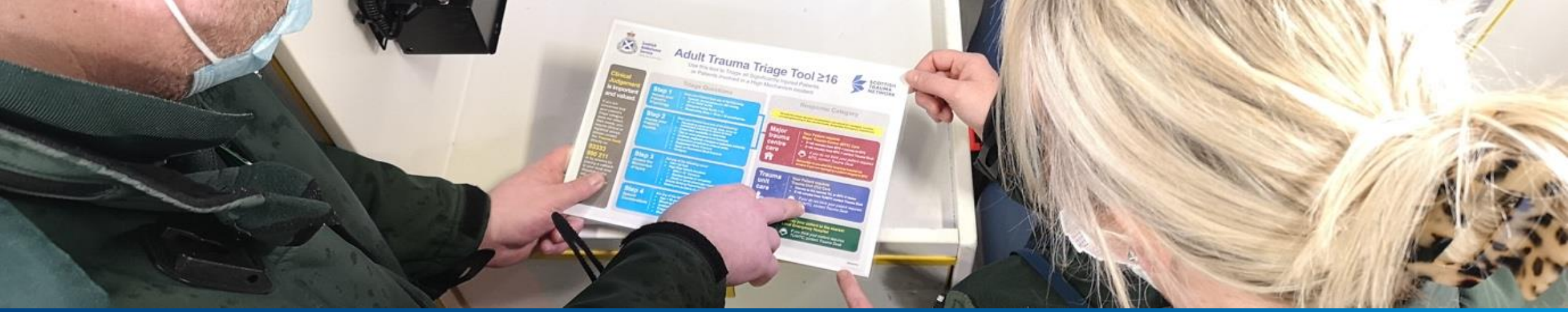
Annual Report 2023/24

NHS SCOTLAND



SCOTTISH TRAUMA NETWORK

Tim Hooper, National Clinical Lead (joined January 2024)
Martin McKechnie, National Clinical Lead (left December 2023)
Janis Heaney, Associate Director
Alison Gilhooly, Senior Programme Manager
Stewart Robison Senior Programme Manager
(maternity cover from May 2023)
Mark McKeirnan, Programme Support Officer



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Introduction

It has been a busy year for the STN with an external peer review, strategic plan development, progress on key milestones and changes to the leadership and management team. I would like to say a heartfelt thanks to my predecessor, Martin McKechnie, for his hard work, dedication and leadership during the implementation phase of the STN. I'd also like to welcome back Alison Gilhooly, our senior programme manager, and thank Stewart Robison for his significant efforts and coordination whilst Alison was on maternity leave.

With the implementation phase now largely complete, we are moving into our second phase of review, consolidation, maturation and advancement. The recent external peer review, the findings of which are due to be published shortly, showed the STN to be in a generally strong position. As importantly however, it helped highlight the areas needing further development. This has assisted the shaping of the 3-year strategic plan that is in the process of being formalised. The plan will highlight 4 key areas of focus: Improved quality of care; Enhanced trauma education and workforce development; Improved equity of access to services and in the care delivered and Improved data and outcomes. Each of these 4 areas has short, medium and longer term (stretch) goals to help inform the workstream and regional workplans.

Together we can continue to improve the outcomes of those who sadly suffer traumatic injury. With a clear vision, enthusiasm and a collaborative approach we can achieve much. Our mission remains the same – *Saving Lives, Giving Life Back*.

Dr Tim Hooper
National Clinical Lead for the STN

Governance

STN Governance is conducted through the Core Group, which consists of clinical and planning leads from each of the regional networks and SAS. The Core Group reports to the STN Steering Group. A number of working groups are in place, which produce recommendations and guidance which are subsequently ratified through the Core and Steering Groups.

Mary Morgan, Chief Executive of NHS NSS continues as chair of the STN Steering Group. Tim Hooper in now chair of the STN Core Group following his appointment to the National Clinical Lead post, taking over from Martin McKechnie.

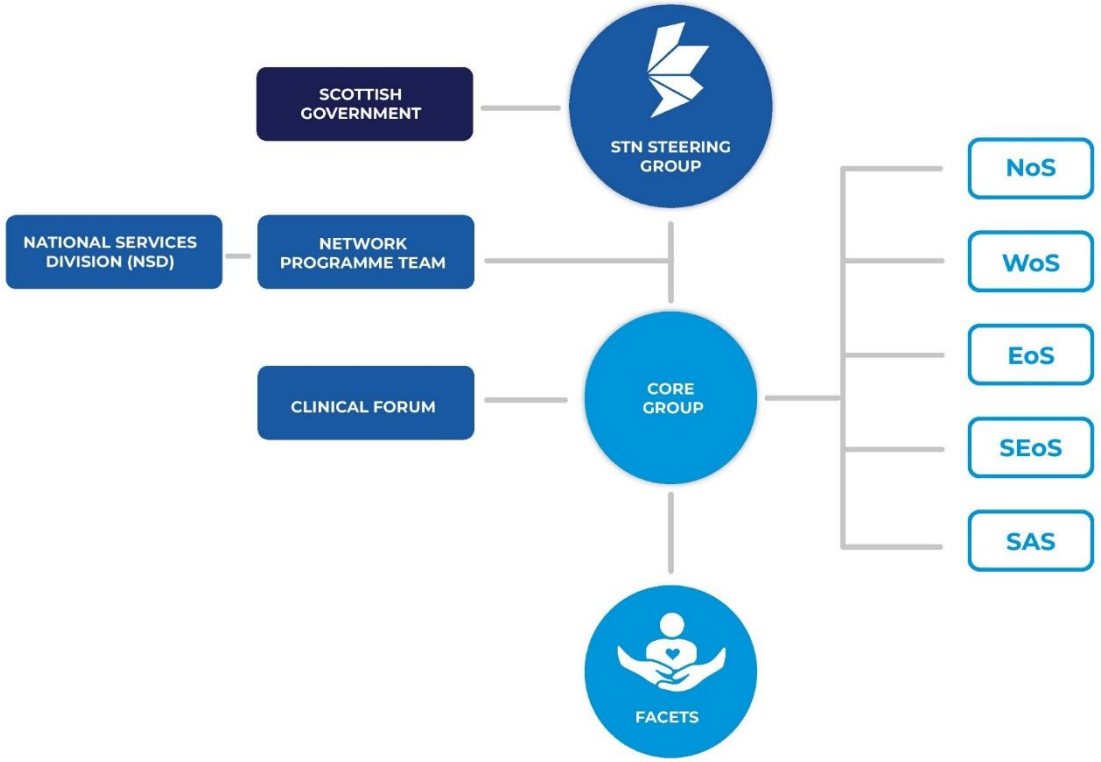
Clinical Governance days are held annually, with Clinical cases presented from each region. The next National Clinical Governance session is due to take place in June 2024. Patient stories continue to be part of the STN Steering Group.

A peer review of the STN and regional networks was carried out in 2023/24, which will help inform future work of the network.

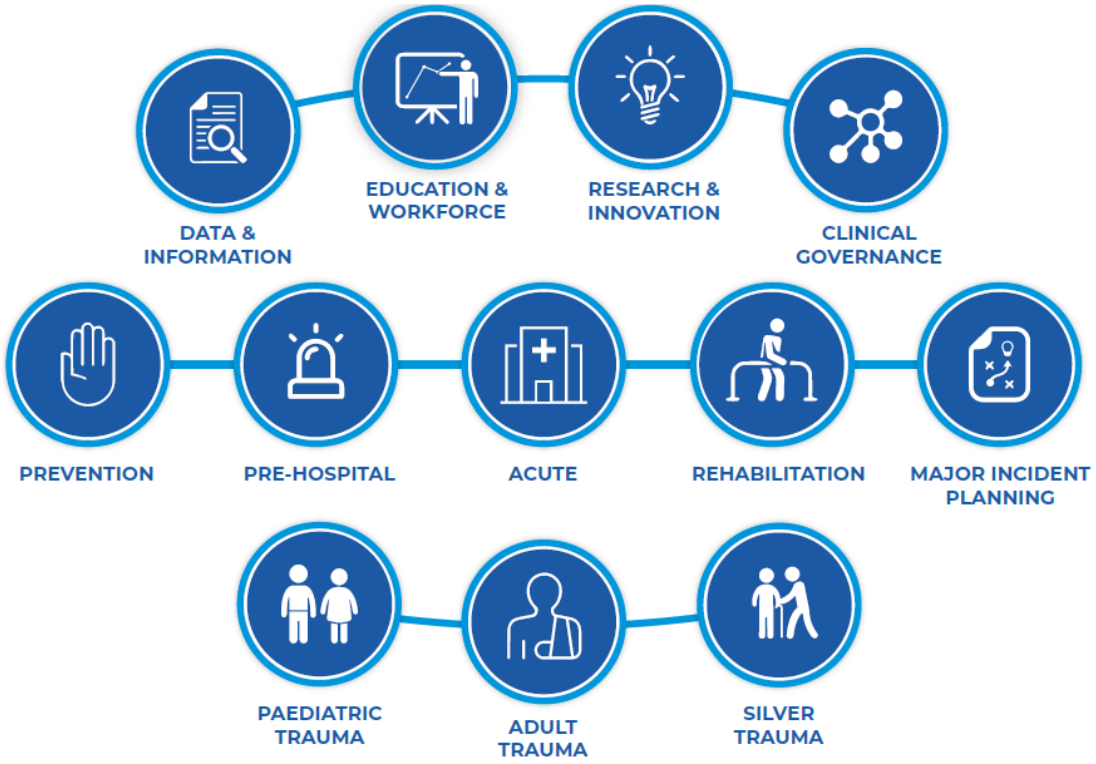
Data from the Scottish Trauma Audit Group (STAG) is published in the STAG Annual Report each year, and can be found on the STAG website.

Scottish Trauma Network Network

Governance Diagram



Facet Diagram



Work Plan 2023-24

Deliverable	Progress/Next Steps	Benefits
Develop and deliver an action plan to meet recommendations from the review of the network carried out by NSD.	Action plan developed and working through recommendations. Network peer review encompasses several recommendations. Longer term recommendations still to be actioned.	The network will have clear targets to meet the recommendations of the network review and continue to support the delivery of trauma care in Scotland.
Finalise EMRS East business case for submission through SAS, SEAT and Scottish Government governance structures.	EMRS SBAR submitted to Scottish Government (SG) in June 2023. Following approval from SG, SAS have started work on a fully costed business case, which is hoped to be complete by the end of 2024.	A clear proposed plan will be in place to replace the current, unsustainable services being delivered through NHS Tayside and NHS Lothian.
Continue to scope data available to support benefits realisation of the network. Note that creating a data platform is the preferred solution of the network.	Resource from NSD IMS secured to develop user stories following stakeholder engagement which has been incorporated into the network strategic framework.	Allow data to be accessed in one place. The network can start to show value for money and assessment against the network aims and objectives. Telling the Story using data.
Review financial sustainability across the network considering current financial climate	The peer review highlighted areas that are less sustainable, and action plans will look at how these might be improved.	The network will continue to deliver good value for money for Scotland, with capacity to deliver against key priorities.

Work Plan 2023-24

Deliverable	Progress/Next Steps	Benefits
Support delivery of the Major Incident Exercise in 2023	The STN engaged with Scottish Government Safe Hands Exercise planning. The exercise successfully took place in April 2024.	STN continues to be involved in Major Incident planning, and is best placed to support review of the Major Incident with Mass Casualties Plan.
Finalise and implement peer review process for Major Trauma Centres and wider service.	Peer review of the STN conducted via both remote review and in person visits to each Major Trauma Centre between December – March. A final report will be published in 2024, with action plans being developed.	The trauma care system in NHS Scotland will have a clear process for auditing and supporting best practice, ensuring the best outcomes for injured people in Scotland.
Implement monitoring and review of use of education resources and development framework.	The major trauma development framework for HCSWs was published in July 2023. Build on implementation of frameworks to support regional work	Frameworks support staff delivery of MT care by underpinning education resources, they will be reviewed in accordance with NES principles for NMAHP frameworks
Develop a catalogue of education programmes and resources available across Scotland, including sim scenarios to support local training. Linking with CSMEN.	CSMEN published a skills and simulation report that the STN will collaborate on and promote throughout the network Create library of simulation scenarios and consider an approach to a Scotland MT education programme	Clearer and more equitable access to education resources for staff across NHS Scotland.

Finance

All network funding spent on projects agreed through network governance. In addition to regular agreed staffing and expense spends, this included:

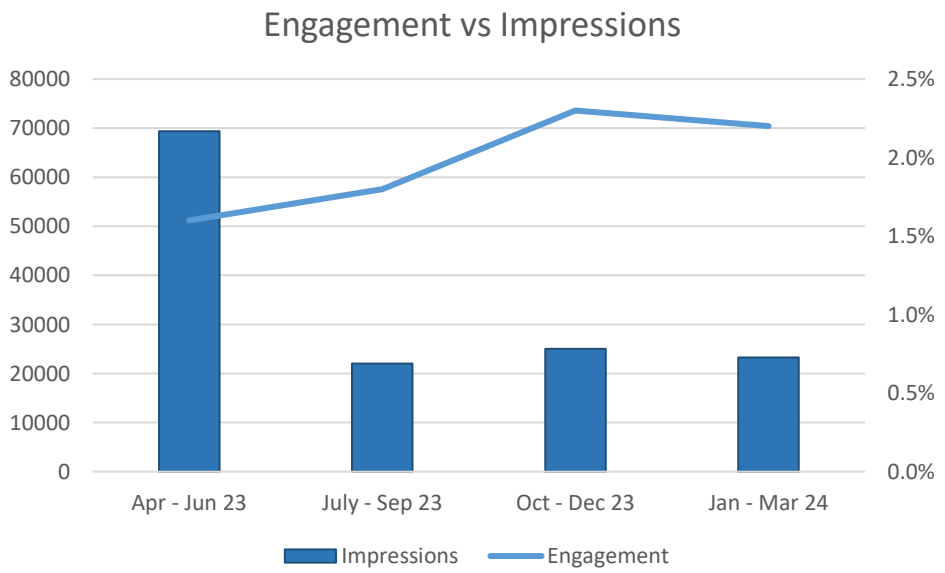
- *Initial scoping for EMRS East business case*
- *Travel and accommodation for members of the STN peer review panel*

Social Engagement *(April 23 – March 24)*

4,387 X followers (168 increase since 2023)

2.0% Average Engagement per Tweet

Increased Engagement in May due to Rescue: Extreme Medics series. Impressions increased in Q3 due to advertisement for new clinical lead posts.



1.429 Returning Users (10.5%), 12,151 New Users (89.5%)

77.6% of users are from Organic Searches, 14.2% Direct Searches, 6.1% Referral and 1.4% Social Media

WoS Network Deliverables

Deliverable	Progress/Next Steps	Benefits
Improved access to multispecialty trauma care.	Gap analysis progressing for patients not admitted into MTC under major trauma service/review of coordination of care for those not receiving care in MT ward. Major Trauma Ward Consultant rota – fully staffed July 2024. 6 Hyper Acute specialist rehabilitation beds ring fenced in major trauma ward – staff recruitment Further extending timeline for patient follow up to support any additional rehabilitation requirements	Patients have access to the right staff at the right place/time where the ethos of care supports meeting the aims of the network of both Saving Lives and Giving Life Back. Beneficial outcomes observed by staff, families and patients. Ensuring equity of care of access to services for patients not admitted into major trauma ward
Education and shared learning	MT ward nursing protected time weekly (ward covered by MT AHP service) MT Ward OD Event access to local and national training/education programmes for all of the multi-disciplinary teams All sites/areas have access to in-house education and training – shared videos across network	Professional development and sharing of best practice. Well trained confident trauma workforce – supports staff satisfaction and retention
MTC Developments	Stakeholder reference groups to develop SOPs for specific pathways e.g. Head Injury; Spinal ; elderly trauma and palliative care Further development of specialist rehabilitation service – all sites now using the rehab complexity scoring system Review of network governance structure Prepare 3 year strategic framework in line with STN and Peer Review recommendations	Assurances for quality of care. Continuity of care and improved specialty communication; Improved patient outcomes; Improved management of complex patients.

SEoS Network Deliverables

Deliverable	Progress/Next Steps	Benefits
Ensuring continuity of care across the major trauma pathway	Increased medical cover on the MTW – 24/7 Clinical Fellow Cover & 7 day Major Trauma Consultant cover now established. Proposal developed for the establishment of a supported discharge service for NHS Lothian MTC patients. Telephone follow-ups being delivered to all major trauma patients admitted to or repatriated back to a trauma unit. Undertaking an audit of pathways for 'outlier' patients – i.e. those not admitted directly to the MTS to ensure equity of care. Robust processes in place to ensure early communication established for those moving between services/sites as part of their pathway.	Patients are able to access the right services and expertise across the entire patient pathway. Improvements in continuity of care. Maintaining intensity of rehab so patients can achieve their goals. Ensuring equity of care for all major trauma patients, even those not admitted directly under the major trauma service.
Ongoing staff training and education	Paediatric MTC Educator delivering regular educational outreach sessions to the TUs & LEH. Paediatric MTC delivering STN Paediatric education Day in June 2024. Continuing to support staff to attend externally run training courses. In 2023 this included attendance at HECTOR, ATLS, DSTS & TCAR courses. All sites delivering regular in-house training and simulation programmes. MTC has established weekly 'Trauma Tuesday' education sessions. Robust governance systems established across the SEoS network. All sites have regular M&Ms where learning is recorded and shared.	Confident and well-trained workforce. Supports workforce retention and staff wellbeing. Ensures best practice and learning is shared across sites.
Delivery of person-centred care and rehab	All sites now collecting rehab complexity scale data (RCS) to help identify and measure an individuals rehab need. Rehab plans continuing to be reviewed & updated. Intention to ensure this is provided to all patients upon discharge. 'Return to school' recommendations note developed for paediatrics Paediatrics reviewing trauma pathway for neurodivergent children & young people Network plan to review guidance for management of elderly trauma and palliative care.	Ensures patients can set and achieve their own meaningful goals. Access to care at the right place at the right time.

EoS Network Deliverables

Deliverable	Progress/Next Steps	Benefits
Remobilisation: Creation of dedicated MT Rehab and Psychology space within the MTW. Further engagement and support with the EoS Paediatric Trauma Unit.	Project design work has started on the EoS TN Offices/Hub/Training facilities. Discussions are ongoing regarding the implementation of the Trauma App. Supporting Paediatric TU on a regular basis with a platform and representation at a regional and national level.	Improves the patient pathway and provides an enhanced level of care and experience to patients best managing their physical and mental needs.
Implementation of the Lead TANP Nursing model for the MT ward in place. Improvements to the continuity of rehab provided across the patient pathway inc rehab patient database. Ribs Fixation Service has been implemented into the EoS TN.	Review of the current ward admission criteria and medical model. Capturing MT patients that do not come in through the traditional pathways. Telephone follow-ups being delivered to all major trauma patients. Rehab staff and pathways have been redefined. Additional domains have been added to the rehab database to gather data for STAG National KPIs.	Patients are able to access the right services and expertise across the entire patient pathway. Maintained continuity and intensity of rehab supports improved patient recovery and achievement of rehab goals. Initiation of this pathway will ensure that chest trauma patients benefits from input from Major Trauma Service independent of where they are admitted with an overall reduction in mortality and morbidity.
Governance: Continued development and review of major trauma policies/protocols. Continued Monthly M&Ms, Weekly MDTs, compliance KPIs. STAG completion of Data. Peer Review has been completed with excellent feedback of significant achievement and good practice with recommendations already having full Improvement plans.	EoS MTN Governance structure to be established as its own entity. Development of Governance tracker and relevant supporting documentation. Improvement plans in place to support KPIs and recommendations.	Effective governance contributes to the safety and quality of care, identifies risks or concerns to ensure these are mitigated. Visibility of trauma care within organisational structures and education and awareness for all will enhance patient pathways. Strong compliance with KPIs illustrates delivery of high quality and equitable care for patients across region.
Training and Education:	EoS MTN awareness and simulation training sessions to start along side an EoS TN rolling Training and Education program. Creation of education champions in each section of the MT pathway within each staff type.	Professional development and sharing of best practice. Well trained confident trauma workforce. High Moral amongst staffing.

NoS Network Deliverables

Deliverable	Progress/Next Steps	Benefits
Agree and implement action plans to improve the time to report on CT head scans for patients with a GCS<13 or intubated and those with a GCS 13-14	Audits and actions plans have been put in place in Aberdeen Royal Infirmary and Raigmore Hospital and monitored at local and network level. To continue into 23/24.	Patients with potential head injuries are identified in a timely manner and appropriate care and intervention made to increase mortality and recovery .
Continued delivery of effective clinical governance systems across the Network	Development of MTC Clinical Guidelines. Implementation of quarterly Network audit of major trauma patients not transferring to the MTC.	Patients will receive evidence based trauma care resulting in the best possible outcomes for themselves.
Continued implementation of communication plan	Trauma Unit staff delivering road shows at local hospitals and community settings. Network newsletters, social media, annual report and Strategic Review published. To continue into 24/25.	Increase awareness of the trauma network, trauma services, roles of the trauma team, developing relationships across the north and an understanding of the priorities of the network.
Continue to deliver comprehensive education programme	Monthly paediatric Teams education sessions. Paediatric training programme for remote and rural sites implemented across the north and paediatric trauma skills passport developed for the MTC. Skills training for rib fractures, nursing, and AHPs delivered alongside participation in HECTOR (silver trauma) . To continue into 24/25.	Increased trauma skills, and confidence to apply them, will lower mortality and increase better outcomes for patients who have experienced trauma.

SAS Network Deliverables

Deliverable	Progress/Next Steps	Benefits
Develop the clinical structure of the Advanced Practitioner in Critical Care (APCC) team	A new role of Advanced Practice Clinical Lead (Critical Care) has been developed within SAS. Recruitment to this post is planned for the summer of 2024.	This national post will provide peer led professional leadership and development of the APCC team, Complements the introduction of the APCC competency framework and will allow the development of an appraisal structure for APCCs Will aid the provision of a robust, well governed and sustainable yellow tier of response for major trauma patients in Scotland
Review and update the clinical governance structure of pre-hospital major trauma care	An updated pre-hospital clinical governance structure is being devised with the views of the appropriate network stakeholders. The aim is to implement this in late 2024.	Will provide a robust structure to allow clinical governance within the three tiers (green, yellow, red) of pre-hospital trauma care. Promotion of cross working and learning across all organisations that provide pre-hospital trauma care Will align with the current STN regional clinical governance structures
Paramedic/Technician (green tier) trauma care review	Engage with SAS clinicians to seek their views on the provision of major trauma care and what they need to develop clinically	Improved engagement with SAS clinicians Improved 'green tier' trauma care
Major incident and Mass Casualty Planning	SAS have agreed to implement the new 'Major Incident triage Tool' and 'Ten Second Triage Tool' and are currently planning its implementation. Currently reviewing and responding to recommendations from the Manchester Arena Enquiry	Improved, simpler, evidence-based triage tools and processes for major incidents and mass casualty incidents. A UK wide standardised approach in relation to major incident triage

STAG Network Deliverables

Deliverable	Progress/Next Steps	Benefits
Write a report which includes six years of data on children and young people with severe injury	Severe injury in children and young people, NHS Scotland, 2018-2023 is due to be published on the 04 June 2024.	This reports represents the first comprehensive analysis of trauma data for children and young people under the age of 16 in Scotland. It provides a reference point that spans the implementation of the Scottish Trauma Network (STN) and can advise its next phase to ensure that Scotland's children continue to receive the highest standard of trauma care. It will also inform injury prevention
Support the regional networks with data to support the STN external peer review process.	STAG were involved with all peer review visits and supplied and advised on data requirements prior to these visits.	Ensuring that data was accurate and interpreted correctly.
Collection of the rehabilitation minimum data set	This information is now in eSTAG and data collection has started in the adult major trauma centres (MTCs). The next stage is role out is to paediatric MTCs and trauma units.	Ability to measure a new KPI measuring time to specialist care to identify information on length and cause of any delays. To better understand what type of injuries, require ongoing rehabilitation, where this is best met and any gaps in service.

Workplan 2024-25

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SCOTTISH TRAUMA NETWORK

Work Plan 2024-25

Deliverable	Progress/Next Steps	Benefits
Finalise EMRS East business case for submission through SAS, SEAT and Scottish Government governance structures.		A clear proposed plan will be in place to replace the current, unsustainable services being delivered through NHS Tayside and NHS Lothian.
Continue to scope data available to support benefits realisation of the network. Note that creating a data platform is the preferred solution of the network.		Allow data to be accessed in one place. The network can start to show value for money and assessment against the network aims and objectives. Telling the Story using data.
Develop a strategic framework for the network and produce action plans to begin implementing short term aims.		A defined multiyear strategy will allow the network to have clear objectives and action plans in the coming years.

Work Plan 2024-25

Deliverable	Progress/Next Steps	Benefits
Develop a catalogue of education programmes and resources available across Scotland, including sim scenarios to support learning across the network. Joining up regions and linking with CSMEN.		Transparent and equitable access to major trauma education resources for staff across NHS Scotland.
Develop and deliver an action plan to meet recommendations from the peer review of the network carried out in 2023/24		The network will have clear actions to meet the recommendations of the peer review and continue to improve and support the delivery of trauma care in Scotland.
Deliver action plan to meet long term recommendations from the review of the network carried out by NSD.		The network will have clear targets to meet the recommendations of the network review and continue to support the delivery of trauma care in Scotland.

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SCOTTISH TRAUMA NETWORK

Stakeholder Feedback

I was not disappointed to see how all of the diligent planning of the STN has translated into a well-coordinated Major Trauma Service composed of the four regions, each unique in their population, and geographical needs but all of which have adapted solutions that quite clearly deliver high quality care for all patients who have suffered Major Trauma.

Chair of Peer Review panel

If Carlsberg did Major Trauma Centres…. You'd still be better!!

Major Trauma Patient