

**CLINICAL SKILLS NETWORK MEETING  
DONCASTER AND BASSETLAW HOSPITALS NHS FOUNDATION TRUST  
16 JUNE 2010**

**Attended:**

Joanne Barrott	Leeds Metropolitan University
Heidi Collishaw	University of Leeds
Gillian Hinton	Doncaster and Bassetlaw Hospitals NHS Foundation Trust
Michelle McKenzie-Smith	Montagu Clinical Simulation Centre
Mandy Motley	Sheffield Hallam University
Jane Nicklin	University of Leeds
Julie Scurrah	University of Sheffield
Gina Senior	NHS Barnsley
Karen Shaw	Rotherham Foundation Trust
Ann Sunderland	Leeds Metropolitan University
Esther Taylor	York Hospitals NHS Foundation Trust
Joanne Whitehead	Scarborough and North East Healthcare NHS Trust
Linda Dunlop	York Hospitals NHS Foundation Trust
Mary Curtis	NHS Rotherham
Michelle Chappell	University of Huddersfield
Claire Walsh	Sheffield Hallam University
Steve Hancock	Sheffield Children's Hospital
Debbie Clark	Sheffield Hallam University
Tahzim Amjid	Bradford and Airedale Community Health Services
Jen Smith	NHS Hull
Dawn Ibbotson	Doncaster and Bassetlaw Hospitals NHS Foundation Trust
Tanya Ralph	Sheffield Children's Hospital

**Video Conference with Rona Patey – Scottish Clinical Skills Network**

**Key Points**

- The Scottish Clinical Skills Network was established 10 years ago. Established because there are a lot of people in isolation and some were in developmental stages and didn't know where to go for advice. Jean Kerr, the Clinical Skills Director wrote to everyone who may be interested in setting up a network for those involved in Clinical Skills.
- The Scottish CSN now has around 200 members, of which 100 are active.
- At the start there was no formal structure for the forum but the Network has been around for 10 years now and is more established. It has now a voting system for the steering group members and has established a constitution. RP emphasised that clear roles are vital for the network to work, as is full representation.
- There were initial difficulties finding a committed group, less than 10 were committed to the network. The SCSN now have a large steering group – 16 members, with representation from a number of professional bodies. Ten of these members play a very active part.
- The network is now fee paying currently £40 but initially £25.
- These funds have now been used to fund and appoint an administrator who runs the Network. This has greatly enhanced the forum.

- The benefits for professionals and trainers are mainly that they get to network with people in same role they wouldn't normally see. RP emphasised the importance of the conference having networking time.
- The CSN helped a number of projects, including looking at how they can demonstrate to the GMC how med students training is quality assured.
- Now have an Annual conference. Workshops at conference are free to members, non-members it is £150.
- The network has lobbied national bodies to glean a strategic approach to leading clinical skills; as a result there has been a national review of clinical skills in Scotland.
- They have considered a clinical skills passport but decided against it. There are local ones but these are more a record for achievement. They decided to go down quality assurance process of teaching rather than focussing on a passport.
- There is also now a clinical skills mobile unit.
- Sharing of information regarding equipment and how money is spent is important and taking a national approach helped deliver the best results for that.
- There is no formal library but they do have an awareness of what each other has. However there is informally a loan process between Aberdeen and Robert Gordon university. They share a sim man and a baby.
- To support the further development of clinical skills they are now looking at how long manikins are lasting in order to project their budget better.
- They have recognised difficulties around who pays for consumables and maintenance when loaning and delivering clinical skills to those external.
- Regarding a Clinical Skills Strategy – Scotland has two levels. The network put together a blueprint document about how Clinical Skills should be developed. Then the health board sent in their strategy for the documents.
- RP emphasised that a definition of Clinical Skills is important as other people have different views of what this covers.
- The strategy also helps people to set up Clinical Skills centres. Some funding became available and the strategy helped highlight how to spend the money. The Managers Educational Network acquired funding for a Director and to look at quality assurance processes.
- Engagement is required at a high level to work, have members from CE group, the deanery and skills for health. The minister for health launched the strategy which assisted in getting engagement at higher level. It is vital to get that buy-in.
- The CSN found getting AHP's to join in was difficult, needed to get the right person on the steering group who could go in and get people engaged. The CSN sent invites to local people who lead education in AHP to see what they thought and kept going until they got engagement.
- RP recognised the network also includes people from voluntary sector and membership is a lot more diverse.
- RP recognised that a lot of people are doing good teaching but have no way of showing that it is to a set standard. She suggested the quality assurance framework would assist with this. This was difficult to achieve but now people have a framework to work towards.
- Regarding standardisation of teaching – the Manager Educational Network devised a quality framework – standardising the process for teaching – with a checklist. A policy document has been established in Aberdeen that promotes the process. This will be a long-term process. Jean Kerr will present an update of the Managers Educational Network and the link with the SCSN at the conference.

KS is reassured that things take time, and that we are on the right path.

RP advised that any questions, could be sent via e-mail. RP will also send out a bullet points of the items discussed this morning.

## **GROUP MEETING**

The group discussed the concept of being a fee paying forum and other issues raised by Rona. The group agreed / discussed / questioned that

- it is a small cost to pay.
- That group would need to decide who holds the money and how is it set up?
- Does organisation fund membership or individuals?
- Fee paying helps commitment.
- The CSN Forum has admin support and cover for drinks at meetings, but don't know how long it will last.
- The SHA funds the conference currently so that members do not have to pay.
- Membership fees paid mean members must get a good return on their fees; people need something out of that payment.
- Do members need to get something from the meetings other than just networking?
- The information must be put together so that organisations can see the benefit.

The group discussed collaboration with the Clinical Simulation Network. People may mistake Clinical Skills for simulation. However, a CS and Simulation Network may be the way forward, especially with funding going into simulators from the SHA. It was pointed out that CS is teaching a new skill, and simulation is training people with current skills and enhancing – it can be difficult to teach a new skills via simulation? The group agreed that they are the same spectrum and do link in some ways.

Another idea is to join the national CSN, who are rumoured to be joining NAMS, but there have been difficulties in getting in contact with them for initial discussions.

The group discussed the proposed CS strategy and agreed that the CS Strategy should have feedback from HR and nursing groups. It was highlighted that the strategy is only in draft and will go to the CSN Executive Group for ratification.

The conference in November will serve to inform the network what we have achieved during the year, with passports and strategy etc. JS will contact Rona to discuss passport.

Website – The group was informed of the plan to develop a new website for the network and that the conference will be used to gather information required for the website. It was acknowledged that there is a lot of restriction with regards to what can go on the site and how it looks for the SHA website,. The new website will need a domain name.

KS informed the group that the steering group wants to direct the forum meetings, and are currently in the process of putting together a TNA for the Network in order to provide useful meetings. It is vital that the Network directs where it is going, feedback from members is essential for the network to prosper.

## **EXECUTIVE GROUP MEETING FEEDBACK**

The group was informed that there is unlikely to be funding available for large bids like last year, but it may be possible to put a call out for bids <£25k should funds become available. DI will advise the group if and when this happens. People should prepare bids ready for when the pro-formas are on the website.

## **AOB**

Scottish CSN are hosting their conference on 9 & 10 September in Dundee should anyone be able to attend.

Thanks to Gill Hinton to host meeting at short notice.

## **PRESENTATION – MANDY MOTLEY, SHEFFIELD HALLAM UNIVERSITY e-Learning resources for healthcare students between HEI's and Clinical Practice**

Claire Walsh, Mandy Motley and Debbie Clark presented a project they are doing around e-learning. Presentation attached (appendix 1).

Nottingham University have a large range of resources that are available to anyone. Xerte (type the name into google and it will take you to Nottingham University's site) enables you to create a learning object and publish it – free of charge. Can include videos, pictures, slide shows, online quizzes, hot-spots (identifying danger), label, match up pairs – it is interactive and good for summative assessment. Takes 2-3days to create one package once the system is familiar.

## **SHEFFIELD CHILDREN'S HOSPITAL**

Sheffield Children's Hospital invited all to an event on Thursday 24 June at 1pm in Lecture Theatre at the Children's Hospital. Point of care simulation a new paradigm in paediatric education and research. Advert/Presentation to be sent out to Network by DI.

## **JOANNE BARROTT – REGIONAL CLINICAL SKILLS MANAGER Quality Framework & Project Workers**

Quality Framework document was sent out to Network (appendix 2). The Montagu Clinical Simulation Centre (MCSC) is a regional centre and it has identified a need for a quality framework for the centre. It was decided that such a framework would be beneficial to all centres, and was shared at the Clinical Skills Executive group for a regional perspective. The MCSC is now looking for feedback from the Network. It is not about telling you what to do, it is more to allow others to benchmark themselves against a framework. It can also assist those looking to develop their service. It could be amended to fit individual organisations, the framework is there and you can pick the parts out that are relevant to your own organisation, as everyone is different.

They are looking to have examples within the document to help individual practitioners and organisations identify what is best for them in order to provide the quality of service. It

was suggested that core elements to the strategy that all organisations need to do, where other elements are optional. If the CSN forum could suggest what parts should be core for all and incorporate this into the document. The document has lot of good practice that people can aspire to. It is assuring quality and recognising where things are, not necessarily in the same place but accessible. There is no money available to develop clinical skills in the region, so now looking at ways to develop without the need to spend. Any comments send to DI to collate for incorporation in the final version.

SCH are just setting up their centre, and don't have what the MCSC have – it will be a useful document to help when they set up from start.

The Clinical Skills Project Team consists of Clinical Skills Regional Manager and 6 project workers. They will be looking at taking the Clinical Skills Strategy forward across the region. Starting on 1 July 2010 with a months Induction and then they will be out on the field. DI to send out further information as it becomes available – such as geographical coverage. The strategy is a five year span, but the project workers are in post for 3 years.

**Jen Smith**  
**Clinical Skills Passport Project**

A paper passport was piloted in February 2010, and undertook an evaluation. People saying that it needs to be electronic so JS is contacting web designers to look at developing this and there are a number of options. JS met with the Executive Group's QA working group to link in with the passport. They are currently looking at assessment protocols where the delivery style is up to the trainer, so long as certain aspects are covered. JS is currently writing a report to present to the Executive Group in July. There are 5 organisations across the region who are happy to pilot an electronic version of the passport.

Organisations included in the paper pilot are:

Karen Shaw  
Rotherham NHS Foundation Trust

Tracy Latham  
Leeds Teaching Hospitals NHS Trust

Deborah Robinson  
University of Hull

Jen Smith/Neil Pease  
NHS Hull

Melanie Barnard  
Humber Mental Health Teaching NHS Trust

Louise Metcalfe  
NHS Leeds

Lynda Whincup  
City Health Care Partnership

Regarding the evaluation, some doctors see a need for it but others don't want to repeat recording in two places. You can't have one-size fits all passport because all organisations are different. It may be that the passport is more like a concept rather than a solid document, more of an understanding between organisations that standards are accepted across the region. Full sign-up within the region is required in order to make the concept work.

### **ANY OTHER BUSINESS**

Val Kellett has been appointed at SCH to deliver clinical skills. She is now a member of the Network and will be attending meetings. This is a brand-new post and will be starting from scratch, so if anyone does any paediatric clinical skills training, to let Tanya Ralph have their contact details for discussions with Val.

### **DATE AND TIME OF NEXT MEETING**

19 November 2010  
3<sup>rd</sup> Annual Conference  
Doncaster Racecourse

8 December 2010  
09:00 am  
York Hospital