



The Royal College of Emergency Medicine

Patron: HRH The Princess Royal

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The Minutes of the meeting of the **Quality in Emergency Care Committee**, held in the Council Room at 7-9 Breems Buildings on Thursday, 4 February 2016

In attendance:

Name		Position in Committee
Adrian Boyle	AB	Chair
Jeff Keep	JK	Standards & Audit
Kevin Mackway-Jones	KMJ	GEMNet Chair
Derek Prentice	DP	LAG Representative
Emma Redfern	ER	Safer Care
Simon Smith	SS	Chair, Best Practice
Mary Dawood	MD	Safer Care
Jon Jones	JJ	Major Trauma
Sam McIntyre	SM	Administration

Apologies received from:

Niall Collum

Minutes

1. Welcome, apologies and declarations of conflicts of interest

AB declared a new Col having recently formed a new company providing ED crowding analytics. No other Col were declared.

2. Previous minutes and updates on action points not covered in elsewhere

Title for the study day previously referred to as "tricky patients" corrected to "challenging patients".

Work stream	Action	Action by:	Progress:
Best practice	Review and revise MH toolkit as necessary next year – MU to send a reminder	AH & SS	→ AH asked to schedule review dates for 2016
Best Practice	Early pregnancy bleeding statement – check progress with RCOG endorsement and publish	SM	In progress → SM to follow up with David Richmond at RCOG - ASAP
Best Practice	Make final edits in liaison with JF before publishing RCEM Acute Ischemic Stroke and Intravenous Thrombolysis position statement	AB	Done
QEC	Resend link by email for the Delphi study on NICE topic prioritisation and all members requested to participate.	KMJ	Sepsis, frequent attenders and crowding suggested. → All Chairs to discuss with their committees and feedback at the next QEC. Done → SM to add to April agenda
Safer Care	Initiate discussions with Safer Care in anticipation of request by NCEPOD next year for the suggestion of further topics	ER	Suitable topics include condition-specific problems leading to morbidity or mortality → Ongoing
QEC	Lead the design of a study day focussing on Challenging patients , with support from SM/MU	FW	→ FW to organise for 2017.

QEC	Promote mental health toolkit by podcast/vodcast – AB to speak with AH and Simon Laing	AH	Done
QEC	Development a short course in interventional psychiatry for trainees , with potential for consultants to also attend	KMJ & AH	KMJ looking at launching at a conference later in 2016. → KMJ to keep RCEM updated on progress.
S&A	Draft business case and technical specification for rapid cycle audit	JK	→ JK to draft for next meeting
S&A	Review committee membership (SM to provide membership information and attendance record)	JK	Next meeting
QEC	Send AB more information about the Winter Flow project so that appropriate assistance and support may be arranged	SH	DONE
QEC	Add link to BMJ QI webpage from the RCEM QI webpage, publish QI page	SM	DONE
QEC	Ask Jason Kendall to provide progress report on updating guidance on the transfer of brain injured patients (trauma and stroke)	MU	In progress 6/11/15
QEC	Inform Connecting with People that RCEM does not wish to become involved in further development of the document 4 areas approach: suicide	SM	DONE
QEC	Supply copy of the All-Party Parliamentary Group on Alcohol Harm inquiry report on 'Impact of Alcohol on the Emergency Services' to Quality Team to make available on the QEC webpage	SM	DONE www.rcem.ac.uk/Shop-Floor/Clinical%20Guidelines/External%20Guidelines
QEC	Create a Drugs and Alcohol page on the RCEM website, include the toolkit and ABD	MU / Sarah Finlay	DONE www.rcem.ac.uk/Shop-Floor/Clinical%20Guidelines/College%20Guidelines/Drugs%20and%20alcohol
SDDC	Inform SDDC about it now being responsible for the crowding guidelines , inherited from the QEC	MU	DONE
JLA	Circulate JLA web link to membership and all are requested to submit potential research questions	MU	DONE
QEC	Prepare Mental Health Capacity assessment document, along with a covering letter, for submission to the relevant DoH committee, which will need prior approval by AB and Cliff Mann	DA	30/11/15
QEC	Supply AB data on mental health patients for presentation at the Concordat – AB will email, detailing specific data requirements	All	DONE
Safer Care	Submit comments on NICE document Preventing excess winter deaths and morbidity	ER	DONE
Safer Care	Produce Safety toolkit podcast	ER	DONE
S&A	Submit suggestions for future audit report formats	All	30/11/15
Best Practice	Liaise with Chris Walsh and produce podcasts , prioritising the Alcohol, Mental Health and the MCA toolkits	FW	Next meeting
Best Practice	Liaise with AB to run a sponsored study day to attract alcohol champions	FW	Next meeting
Major Trauma	Suggest items for the Major Trauma Subcommittee workplan	All	DONE
Major Trauma	Provide a list of 'differences' between APLS and ATLS for AB to raise with Major Trauma for advice on RCEM position	MJ	30/11/15
Toxicology	Contact Sarah Finlay if interested in getting involved with the general work of the Toxicology subcommittee or the MSc Emergency Medicine	All	

	Toxicology course		
Toxicology	Edit the Toxicology subcommittee workplan to make it more College-relevant	SF	30/11/15
QEC	Consider rescheduling future meetings to avoid clashing with school holidays	SM	Next meeting
QEC	Submit ideas to Zul Mirza to include in careers talk to potential emergency medicine recruits	All	DONE

3. Discussion items

a) CLEAR campaign

The [CLEAR campaign](#) has been endorsed by the Royal College of Psychiatrists and published. The publication attracted some media interest, including a blog by Inspector Brown. Committee discussed and reinforced support for all five campaign points.

b) Overview of discussion with Baroness Finlay - Section 136 reports, the NW CPH report and the CLEAR campaign

Baroness Finlay is leading a new working group on the Mental Capacity Act (MCA), with advice from AB and DA on emergency medicine aspects. RCEM are running a survey on MCA to support this work (see item 3d).

Key areas of discussion included capacity, and interplay challenges with the Mental Health Act for certain patient, e.g. overdose.

Suggestions to support this work included using audit data, exam answers and pass/fail rates, and current research. NHS England's Safer Care group had previously raised awareness of a case where an ambulance crew had handed over a patient as confused but no capacity assessment had been performed.

ACTION: all to send comments on MCA to AB to consider for inclusion in report to Baroness Finlay.

c) Clinical audit reports

Discussed the three draft clinical audit reports. These are due to be published in May 2016.

ACTION: all to send comments on the three draft clinical audit reports to SM

- i. Potential involvement of RCoA in Procedural Sedation audit report writing

Decision taken not to seek RCoA endorsement of the sedation audit.

ACTION: SM to send final procedural sedation report to RCoA for information only.

- d) Survey of MCA awareness (DA/AB)

RCEM are currently running a survey on MCA to support Baroness Finlay's working group.

- e) Mental Health toolkit (AH/SS)

ACTION: Anne Hicks to lead on reviewing and revising the mental health toolkit in Spring 2016 with support as necessary.

- f) Near miss – paracetamol OD proforma

The College have been contacted about a near miss occurring whilst using the paracetamol overdose proforma on the website.

ACTION: Sarah Finlay to respond and notify SM of any edits required to the website or documents.

- g) NICE consultations – currently active:

- i. Cirrhosis (deadline 10 Feb)

ACTION: JK to submit comments to SM

- ii. Bronchiolitis (deadline 22 Feb)

Discussed the possibility of bronchiolitis as a future audit topic

ACTION: all to submit comments to SM

- iii. Transfusion (deadline 2 March)

ACTION: AB to nominate someone to comment

- iv. Stakeholder registrations

ACTION: AB to advise SM on the topics for stakeholder registration

4. Updates (for info only)

- a) QEC update

The Service Design and Delivery Committee (SDDC) will now be represented on the RCEM Council. The potential new premises for RCEM headquarters were discussed, including a request for any fundraising ideas. An increase in the price of the audit programme in line with inflation was agreed.

GEMNET is due to produce guidance on abdominal pain in 2016/17, with a budget of £8k.

ACTION: SM to check budget value (update – there is no budget for GEMNET work in 2016, SM is investigating the possibility of using the 2015 underspend)

b) Safer care update

Safety leads: Work continues to identify and support local safety leads in each ED. Regional meetings for safety leads have been run in the South West and South Central to address regional issues and training.

NatSSIPS: Medical Directors were contacted regarding NatSSIPS in October. It is anticipated that this will lead to a checklist for all invasive procedures including post-procedure feedback. Any future procedure-focussed clinical audits will need to ask about checklist use. A podcast on NatSSIPS is due to be produced.

DP flagged up the Bowtie risk assessment system for determining what should be included in a checklist: www.cgerisk.com/knowledge-base/risk-assessment/closing-the-loop-risk-assessment-and-management-system

ER has developed and piloted a universal checklist for her ED, which has received positive feedback.

ACTION: ER to circulate checklist with an explanation of relevant procedures

ACTION: SM to add ER's checklist to website and publicise

c) Standards & Audit update

The clinical audit programme is planned to be converted to a rapid cycle methodology.

ACTION: JK to compose business case and project plan

The three topics selected for 2016/17 are: sepsis in adults, asthma (adult and paediatric), and consultant sign-off.

The 2017/17 topics are due to be decided at the October QEC meeting. All committees to discuss potential audit topics.

ACTION: SM to add to October QEC agenda

ACTION: all to discuss potential audit topics at next committee meetings

d) Best Practice

i. Patients in police custody guidance

This guidance was revised at the request of the College of Policing (CoP) and the Faculty of Forensic and Legal Medicine (FFLM). Discussed including a template or proforma to standardise handover. Guidance is now ready to be published once formatted correctly.

ACTION: SS to proof for formatting

ACTION: SM to get CoP and FFLM endorsement

ACTION: SM to publish (once formatted)

ii. Pharmacological Agents for Procedural Sedation and Analgesia

The committee recommended that the guidance is shortened.

Checklist and proforma to be published to coincide with the publication of the procedural sedation audit report in May.

ACTION: SS to shorten guidance

ACTION: SM to publish to coincide with procedural sedation audit report (May 2016)

iii. Redundancy guidance

Committee approved the redundancy guidance for publication.

ACTION: SM to publish and promote on social media

ACTION: AB to contact Chris Walsh about adding to FOAMED

ACTION: SM to notify AoMRC choosing wisely team

iv. Referral standards

References to 'referring doctor' should be amended to 'referring clinician' to include consultant physicians, advanced clinical practitioner and other relevant staff.

SBAR suggested as an additional item to include.

ACTION: SS to amend 'referring doctor' to 'referring clinician' and table at next meeting.

e) Lay Advisory Group

Four new LAG members have been appointed, with diverse backgrounds including business, social work, law and healthcare charities. The first meeting including the new members is March 2016. The committee were pleased to hear DP intends to remain on QEC and will continue to cascade information to LAG.

f) Major Trauma Committee

The committee recently contributed to the NICE trauma consultation. See the tabled Trauma committee update form for further details of recent work streams and progress.

i. Paediatric trauma - stabilisation of the cervical spine

C-spine immobilisation in children to be published in best practice template once revised.

ACTION: JJ to revise RCEM position statement on c-spine immobilisation in children for AB to approve

g) Information sharing to prevent community violence

No update given.

h) Toxicology

Discussed paracetamol overdose near misses (see item 3f).

RCEM have been involved in a work stream on novel anticoagulants, we are supportive but are unable to recommend any specific anticoagulants.

FFLM endorsement needed for Acute Behavioural Disturbance

ACTION: SS & SF to request FFLM endorsement for ABD guidance

5. Feedback from external activity

a) Mental Health

Joint one-page guidance on section 136 to be developed between RCEM and CoP.

ACTION: AB to discuss progress with AH

b) Alcohol

c) House of Lords Select Committee on Mental Capacity Act

d) RCUK Working Group on CPR decisions form

No update from Catherine Hayhurst.

6. Study days

Discussed the possibility of filming or live streaming the mental health and QIP study days to increase the audience reach and impact. QEC has £4k budget to support this if possible. Materials and presentations from study days to be made available online.

ACTION: SM to investigate possibility of filming [update: the events manager advised that filming is not possible at this time]

a) Mental health – 22 February 2016

b) Crowding regional events – Wales 12 February 2016

c) QIP – 13 April 2016 at RCEM

d) Adolescent services – 11 April 2016 at RCEM

e) Trauma study day – 28 November at RCEM

7. Future meeting dates:

a) 21 April (Subcommittees 1000-12.00, large QEC 13.00-17.00)

Small QEC meetings to start at 11am instead of 10am in future. Large QEC timings will remain the same.

ACTION: SM to edit small QEC meeting start time.

8. AOB

We have been asked by the National Institute for Health Research to suggest an area of EM research that requires a focussed and more comprehensive evidence review. Suggestions for research were:

- Benefit of elderly and trauma networks
- Evaluation of safety interventions (e.g. huddles)
- Emergency psychiatry
- Capacity assessment in the ED

ACTION: SM to feed back to Suzanne Mason [update: done]

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QEC	All to send comments on MCA to AB to consider for inclusion in report to Baroness Finlay	All	ASAP
S&A	All to send comments on the three draft clinical audit reports to SM	All	31 March 2016
S&A	SM to send final procedural sedation audit report to RCoA for information only	SM	May 2016
QEC	Anne Hicks to lead on reviewing and revising the mental health toolkit in Spring 2016 with support as necessary.	AH	Spring 2016
Tox	Sarah Finlay to respond to paracetamol near miss notification and notify SM of any edits required to the website or documents	SF	ASAP
QEC	NICE consultations: <ul style="list-style-type: none"> • Cirrhosis – JK to comment • Bronchiolitis – all to comment • Transfusion – AB to nominate lead commenter • Stakeholder registrations – AB to notify SM of the relevant topics 	JK All AB AB	ASAP
QEC	SM to check GEMNET budget	SM	Done - No budget allocated in 2016, to revise at budget review or submit business case for funds
SC	ER to circulate checklist with an explanation of relevant procedures	ER	Done
SC	SM to add ER's checklist to website and publicise	ER	Done
S&A	JK to compose rapid cycle audit business case and project plan	JK	ASAP
S&A	SM to add to October QEC agenda		Done
S&A	All to discuss potential audit topics at next committee meetings	All	21 April 2016
BP	SS to proof Patients in police custody guidance for formatting	SS	ASAP
BP	SM to get CoP and FFLM endorsement for Patients in police custody guidance	SM	ASAP
BP	SM to publish Patients in police custody guidance (once formatted)	SM	ASAP
BP	SS to shorten Pharmacological Agents for Procedural Sedation and Analgesia guidance	SS	ASAP
BP	SM to publish Pharmacological Agents for Procedural Sedation and Analgesia to coincide with procedural sedation audit report	SM	May 2016
BP	SM to publish Redundancy guidance and promote on social media	SM	Done
BP	AB to contact Chris Walsh about adding Redundancy guidance to FOAMED	AB	ASAP
BP	SM to notify AoMRC choosing wisely team about Redundancy guidance	SM	Done
BP	SS to amend Referral standards 'referring doctor' to 'referring clinician' and table at next meeting	SS	21 April 2016
Traum a	JJ to revise RCEM position statement on c-spine immobilisation in children for AB to approve	JJ	ASAP
Tox	SS & SF to request FFLM endorsement for ABD guidance	SS & SF	ASAP
QEC	AB to discuss one-page guidance on section 136 progress with AH	AB	ASAP
QEC	SM to investigate possibility of filming study days	SM	Done - The events manager advised that filming is not

			possible at this time
QEC	SM to edit small QEC meeting start time to 11 am	SM	Done
QEC	SM to feed back NIHR research suggestions to Suzanne Mason		Done
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