

South West Simulation Network Minutes

Date: Tuesday 6th October 2020

Time: 10:30 – 1200

Venue: MS Teams

Present:		Apologies:
Daniel Freshwater-Turner (DFT)	Wai Tse (WT)	Steve Harris
Chair	Kate Thomson	Kieran Huddy
Oliver Colbourne-Laight	Dawn Fairclough	Simon Kersey
Tom Jerrom	James Goodliffe	Liz Berragan
Indrani Mukherji	Maria Smith	Lorraine Whatley
Ben Hester	Ross Thomson	Rebecca Winterson
Lynn Garland	James Clark	Debi Reilly
Annelena Sacher	Julian Wright	Maria Wallen
Charlotte Ryan	David Bartle	Paula Windsor
Michael Natarajan	Leigh Beard	Susanne Smith
Rozz McDonald	Gus	Sara-Catrin Cook
Bill Wylie	Simon Hall	Kim Sleeman
Alex Clark	Wayne Evans	David Grant
Cristina Diaz-Navarro	Curtis Whittle	Claire French
Viky Hanford	Nicholas Peres	
Samantha Kier	Abi Bartlett	
Laura Harrison	Lucy Watkins	
Kate Thomson	Daryl Thorp-Jones	
Alexander Aquilina	Alexander Aquilina	
Alison Potter	Alison Potter	
Jay Over	Giovanna Edwards	

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Becky Brannigan Lewis Connolly Alison Cameron Chrissie Smaldon (CS) (Minutes)	Rob Lutyens	
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Agenda Point	Agenda Item	Notes		Action Point Owner
1	Welcome and apologies	DFT welcomed everyone and read apologies Welcome to Cristina Diaz-Navarro representative from Health Education and Improvement Wales		
2	Minutes of the last meeting	Minutes were taken as read		
3	Actions arising from last meeting:	<p>SIM Funding DFT – A bid for project funding was not submitted this year due to COVID19. Funding bid planned for Spring 2021.</p> <p>Funding available to the network for 1 or 2 Fellowship posts; open to people within the network or SW medical trainees with a view to developing new and innovative methods of delivering simulation/TEL training or assessing efficacy of simulation education models; bought on by COVID-19 and need to reduce face-to-face contact. Posts will run for 1 year initially, and will fund a locally suitable higher education qualification. Job description has been discussed and drafted. Further discussion required about application audience, whether this is doctors in training or whether the job description is broadened to allow greater application opportunity. Network attracts non-medical practitioners and clinicians.</p> <p>0.5 whole time equivalent suggested as opposed to 1 day per week which would offer smaller scope and scale.</p>		

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		<p>Role would be a secondment; OOPE if trainee</p> <p>Job description to be advertised in the near future.</p> <p>A 3 month negotiation period would be advised with clinical setting, with a view to commencing August/September 2021 (this is a more realistic timescale if trainee recruited as rotations generally in August or September)</p> <p>GE – if more than 0.4 WTE on simulation, TPGD approval would be required due to the impact on training time and requirements. WT pointed out that up to 0.5 WTE is allowed and trainees must have 1 year of training contract remaining and same applies to non-medical practitioners.</p> <p>12 week notice prior to commencement required; this is code of practice requirement Appointment would need to be made within this financial year, as post April funding will be lost.</p> <p>Discussion around whether non-medical recruitment would affect funding in terms of hours / hourly rate/ amount of posts</p> <p>Twitter Account DFT - Outstanding action for DFT to share log in details enabling those willing to tweet on behalf of the network to do so.</p> <p>Discussion around guidance for Twitter use / SOP's/ need for moderator</p> <p>CDV explained that Foundation Clinical briefing twitter account use has found that guidelines are required</p>	<p>JD to be confirmed and advertised</p> <p>Those who want to have Twitter details to express interest</p>	<p>DFT, WT & GE</p> <p>All / CS to collate interest</p>
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		<p>DFT suggested that this is discussed separately along with the workstream planning but recognises that there is a need to monitor and review with a potential need for a moderator however there is more to gain from publicising the network than there is to lose.</p> <p>Innovative Ideas DFT – At the last meeting there was a request for members to share innovative ideas that have come to fruition during pandemic</p> <p>LH – shared community ideas; 4 virtual sessions, one of which was ran last week. Good feedback has been received. Use of a pre-recorded Sim with discussion to follow.</p> <p>DFT – there is an opportunity for suggestions and ideas to pivot into guidance. Invited network to suggest whether they would like information to be formally shared or whether happy to continue to share via meeting minutes (following capture within discussion or meeting chat)</p>	<p>Network members to express interest if they would like these suggestions to be formalised, rather than being shared informally in the minutes</p>	<p>All/CS to collate opinions</p>
4	<p>Projects Update from 15/09 meeting</p>	<p>DFT – minutes from project meeting 15/09 circulated.</p> <p>Any projects that received Sim funding prior to COVID please share reporting and thoughts as to how projects will recommence. Projects are reminded of the standard reporting schedule and requirement to submit quarterly reports. This is necessary to demonstrated to HEE the impact / patient benefit and to support continued funding.</p>	<p>All project leaders to ensure reports are submitted in timely manner</p>	<p>All funded project leads</p>

5	<p>Work streams and how to proceed</p> <ul style="list-style-type: none"> • Multi-agency • Research • Technicians • Innovations 	<p>1. Simulation Technicians Workstream: as a new and growing group of professionals with a varied and diverse range of backgrounds, the Network agreed it would be beneficial to have a work stream dedicated to Sim Technicians. Suggested areas of activity include training, mentoring and support networks and sharing of expertise and resources.</p> <p>2. Multi-agency Simulation Activity Workstream: There was enthusiasm to develop larger-scale simulation events and activities, involving several agencies/Trusts/organisations working together. This workstream would aim to build support for this to happen, by developing guidance on how this could be achieved. This would not necessarily involve designing or delivering the actual events, but rather supporting the agencies as and when they developed their events.</p> <p>3. Research Workstream: All in the Network agreed that our activity was worthy of publication and that we should be aspiring towards developing prospective research within the region. This workstream would develop the infrastructure to facilitate this, for instance by developing links with Universities and researchers inside and outside the region and creating links with other Simulation Networks where research activity is already well established.</p> <p>4. Innovation/ Telemedicine / TEL workstream: there has been increased innovative ways of working / innovation in practice / new ways of working</p>		

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		<p>and it is recognised that Simulation activity across the region has been ground breaking / leading the way both nationally and internationally. There is a potential possibility to tie in with Sim fellowships</p> <p>Discussion around how to bring those who have expressed an interest in involvement with the groups together. Virtual meetings are proposed; membership of each group will be collated and contact details shared via email with the request that each group set up contact or a WhatsApp group and decides when and how they will take their respective groups forward. WT and / or DFT can attend if this is helpful.</p> <p>Groups are asked to provide the network with regular updates. Smaller more agile groups will be created with support from the wider network.</p> <p>Social media / Twitter group Membership of this group will be shared in the same way as the workstream groups and the group can then discuss guidelines and formulate a SOP for Twitter account / Twitter use</p>	Share group membership contact details	CS
6	New trust/project update	<p>AA – project focusing on patient education tool using a VR platform has been paused due to COVID. Feedback from patients with focus groups still needs to happen. Focus has been on trialling teaching supporting innovative education to community during pandemic, i.e. safe handwashing etc. Introduced at weekly T&O registrars teaching; there is discussions with TPDs and HoSs about rolling this out to surgical trainees.</p> <p>Alison Cameron Radiotherapy contouring to improve training. Funding received in January and has been impacted by COVID, but this has been taken as a positive as it has given longer to prepare. IT platform has been created, with contours</p>		

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		<p>for 27 different tumours which can be added to the normal contour platform providing metrics for comparison. This goes live this week. 3 cases are given at the beginning, middle, and end of increasing complexity and equating to 27. The challenge is simulation is no good without achieving a level - how do you implement a level? There has been interest from London about use in the developing world. Keen to secure IP.</p>	IP UHBW information	DFT
7	AOB	<p>LG – Executive Group; is this continuing? Discussion around defining expectations of the executive group which was originally created as a smaller group to progress the activities of the network, i.e. creation of the TOR, standards appropriate to Sim delivery; creation of a slide set for train the trainer, interviewing for projects etc. Agreed that MDT representation giving strategic planning and focus is beneficial.</p> <p>Discussion about workstream groups being equivalent to special interest groups, reporting to main network.</p> <p>JW – B6 FT post as educator; under / post graduate medical sim and acute sim, vacancy at Torbay</p> <p>Sim technicians update; no further news from ASPiH re. apprenticeships</p>	<p>Contact Exec membership (time / commitment discussion)</p> <p>Short executive meeting prior to next meeting</p>	<p>DFT / WT</p> <p>CS calendar invites</p>

Next meeting:

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1st December –Project meeting

19th January 2021- Executive and Network meeting

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