

# East of England Neonatal, Paediatric Critical Care & Surgery in Children ODN's Newsletter



Meet the ODN teams. The East of England Neonatal, Paediatric Critical Care & Surgery in Children ODN's work collaboratively together.

Read the bio's of all team members and find out how we can help our units



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- *Each member of the ODN has written an update*

## Contact us

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**Liz Langham**

**Director**

**Neonatal, PCC & SiC**

I am a neonatal nurse by background with 30 plus years' experience working in both tertiary and local units. I became the director for the neonatal ODN in 2017 and have subsequently taken on the role of director for both the paediatric critical care and surgery in children ODN's.

The development of the 3 ODN's continues with opportunity to collaborate on projects and learn from each other, whilst understanding the differences and specific challenges. Patients and families continue to be at the heart of what we do and my experience as a neonatal nurse, as a parent and grandparent support this.

I am proud to be part of the ODN team and continue to be amazed by the dedication of the staff and families I have the privilege to work with.



**Matthew James**

**Lead Clinician**

I have been medical lead for the East of England Neonatal network since April 2019. I am committed to making the neonatal services in the East of England the best in the UK and maintaining and improving standards, working with all the 17 neonatal units and maternity teams.

I was appointed Consultant Paediatrician at Ipswich December 2000 and have been neonatal lead at Ipswich since 2003. We promote kindness, caring and compassion on the unit. I have participated in the neonatal network since its conception in 2003 helping with the establishment and teaching on the UEA enhanced neonatal nurse practice course and ventilation courses for the neonatal network.

I am also proud to have been between 2011 and 2016 training programme director responsible for organising the training and chairing the recruitment committee of paediatric doctors to all the East of England. Many excellent doctors who are now consultants were trained and it was excellent to see their progress

I have two children , I love cricket and still regularly play and watch. I also enjoy football and for 7 years was manager of a local youth football team in Ipswich competing in the Suffolk junior football league. I feel very lucky to live in Suffolk which is fortunately a forgotten part of the country and enjoy the many beautiful beaches and walks which Suffolk offers



**Claire O'Mara**

**Lead Nurse for Education & Workforce**

My nursing career started in 1987 when I began my training as a Registered General Nurse in Manchester, once qualified I commenced my first role as a registered nurse at CUH on the Head Injury/Trauma ITU. After a period of consolidation I then went on to train as a midwife at Homerton College and that is when I developed an interest in caring for neonates. With my previous ITU experience and my midwifery qualification it seemed like the most natural career move.

I worked for many years on the NICU at CUH, training as an Enhanced Neonatal Practitioner and progressing to Senior Sister. In 2010 I took up the regional role of Lead Nurse for Neuroprotection which then led to me becoming Lead Nurse for the ODN, a role I have now been in for over 10 years.

More recently I had the privilege of being Chair for the Neonatal Nurses Association for 3 years. This gave me the opportunity to represent neonatal nursing at many national meetings, raising the profile of neonatal nursing and empowering the neonatal workforce. I am also a qualified

Executive Coach and member of the Institute of Leadership and Management.



**Katie Cullum**

**Lead Nurse for Quality Improvement & Innovation**

Hi I'm Katie Lead Nurse for Innovation and Quality Improvement at the East of England Neonatal ODN. I have been in this post since 2021. I was first employed by the ODN in 2020 as Nurse Education Programme Lead to implement the development of the EoE Neonatal Transitional Care Programme. During this time I also took on the additional role as Lead Nurse for Neuroprotection before welcoming Wendy to this post.

I originally trained as a Paediatric nurse at the University of East Anglia. I completed my BSc in Children's Nursing in 2005 and begun working in the Neonatal Intensive Care Unit at the Norfolk and Norwich University Hospital NHS Foundation Trust (NNUH). In 2006 I moved to Scotland and started working at the Princess Alexandra Hospital in Paisley. Here I carried out the 405(QIS) course at the Glasgow Caledonian University before returning to work at NNUH NICU a few years later.

At NNUH I carried out the 998 mentorship preparation course and Enhanced Practice Course before commencing a MSc in Advance Practice at Southampton University. I qualified as an Advanced Neonatal Nurse Practitioner in 2011 and begun working with the established team of ANNPs at NNUH within the medical rota. Keen to improve quality, I took on the role of staff governor, Freedom to Speak up Guardian, undertook a PG Cert in Clinical Education at Edinburgh University, and carried out NHS England's Quality, Service Improvement and Redesign practitioner training.

I have always enjoyed teaching and have been an associate lecturer at the University of East Anglia and University of Bedfordshire on a range of midwifery and nursing programmes.



I'm currently a member of the BAPM quality steering group and am also a Florence Nightingale Alumni Champion after completing the Mary Seacole Leadership Scholarship in 2022.



**Julia Cooper**

**Lead Care Coordinator**

Following a dedicated career of >30 years in neonatal nursing, I have had a focus in family care including the concept of family centred and integrated care (FiCare) with sustained experience in the coordination of clinical care from admission through to discharge. In my previous role as neonatal lead nurse I coordinated the multi-agency team surrounding the family including setting up and embedding Transitional Care within Neonatal and Midwifery services. To this regard, I have been invited to speak at conferences and teach within the university setting. I have also previously been the feeding lead for neonatal services and am trained by UNICEF in the Baby Friendly Initiative to trainer status.

In my current role, I now assist and support Neonatal Units across the region, leading a team of care coordinators to develop, improve and enhance family care across the perinatal pathway, ensuring families of sick/preterm infants are supported through neonatal services.

In collaboration with ODN colleagues I have implemented various initiatives that have made a real difference to the support of parents; namely, a FiC benchmarking tool, parent passport, parent information resources and feedback surveys in conjunction with BLISS. I have supported units to achieve their highly valued BLISS Baby Charter accreditation and lead on the well-evaluated EoE 'FiCare' Study days both for the Transitional Care National programme and within the university setting.

I am vice-chair of the EoE regional group for the UK Neonatal Nurses Association, representing neonatal nurses and the parent voice, a voluntary role. I networks with a range of other professionals nationally such as Bliss, UNICEF Baby Friendly Initiative teams and the National Care Coordinator group, to share learning and work across all Networks.



**Rebecca Chilvers**

**Lead Clinical Psychologist**

I am a Consultant Clinical Psychologist with over 20 years' experience in helping adults, families and children in the NHS in physical and mental health settings, spending the last 8 years working in neonatal care. As well as working for the EOE ODN, I am involved in a range of teaching and training, work with various neonatal charities and represent Neonatology on the BPS Faculty of Perinatal Psychology



**Laura Baird**

**Lead Speech & Language Therapist**

I am the lead SLT for the Neonatal ODN having started the role in March 2022. I also continue to work clinically in a level 3 neonatal unit and in an acute paediatric team. My specialist interests outside of Neonates includes instrumental assessment of swallowing and I support this service in my clinical role.

I trained in New Zealand and have experience working in special school and community child development. Since arriving in the UK I have worked exclusively in NICU and acute paediatric teams.

I have a passion for delivering education and supporting teams to understand the role of the Neonatal SLT. I currently teach on the QIS training at Bedford as well as delivering education regularly for the ODN and in my clinical role. I have presented at a number of conferences over the years, as well as for TOFS UK. I have been involved in writing the HEE Enhanced Modules for Neonatal SLTs as well as providing other education packages available on e-Learning for Health.





**Lynne Radbone**

**Lead Dietitian**

I am a Paediatric/Neonatal Dietitian with 38 years' experience of working within an acute hospital environment. My clinical focus has always been within critical care, with particular focus on neonates and the nutritional management of preterm infants. Since 1996 I have been responsible for the overall delivery of dietetic services to the NICU at the Rosie Hospital - firstly as the clinical dietitian then taking a more strategic role in later years as the neonatal dietetic team developed and expanded. Alongside my clinical role I have been involved in the development and delivery of national neonatal nutrition education strategies, including the UK's only neonatal nutrition Master's module, and have worked with NICE, NHSE, the Department of Health, the British Dietetic Association and the British Association of Perinatal Medicine to develop national neonatal standards, competencies, frameworks for practice, guidelines and toolkits.

Prior to formally joining the ODN team I worked with them, on an adhoc basis for 10 years, on a number of projects including the development of our now established and embedded standardised enteral and parenteral feeding guidelines. Subsequent work with the East of England Collaborative Procurement Hub to develop a new regional parenteral nutrition tender framework received a Health Services Journal Award and has been used as a model by other networks for the implementation of standardised parenteral nutrition practice for neonates.

In recognition of this work I was honoured to be awarded an MBE for services to sick and preterm infants in the 2022 New Year's Honours List. This coincided with my decision to leave the post of Principal Paediatric Dietitian at CUH in order to join the East of England Neonatal ODN as the Lead Neonatal Dietitian for the network. Since then I have been able to devote my time to working with everyone within the network to develop additional nutrition related resources, offer educational opportunities and start to build a supported community for the increasing number of neonatal dietitians joining our teams following the release of the Ockenden AHP funding earlier this year.



**Rachel Stamp**

**Lead Physiotherapist**

I joined the East of England neonatal ODN as the Lead Neonatal Physiotherapist in March 2022. I am a Chartered Physiotherapist and a member of the Association of Paediatric Chartered Physiotherapists (APCP) with over 20 years' experience in paediatric and neonatal Physiotherapy. Alongside my network role, I continue to work clinically in a tertiary neonatal unit within the East of England and participate in the delivery of the neonatal neurodevelopmental follow up service.

I have undertaken a variety of training to further my specialist neonatal knowledge including the Neonatal behavioural assessment scale (NBAS), Bayley scales of infant development and General Movement Assessment (advanced level). I am involved with teaching including the QIS course at Bedford University in addition to participating in delivery education in both my network and clinical roles and I have presented at the EoE regional conference,.

My passion is working with families to provide specialist early intervention and follow up for high risk infants and striving to provide gold standard care both on the neonatal unit and the follow up service.

I am delighted to be part of the neonatal network team developing the neonatal physiotherapy workforce in the region with the ultimate goal of improving longer term outcomes for babies and their families.



**Jane Fenton-Smith**

**Lead Occupational Therapist**

I joined the ODN team in the role of Lead Occupational Therapist March 2022. I have specialised as a paediatric Occupational Therapist from 2004 and have worked in community health, education and acute services. I have had significant experience working with children with developmental, neurological, and sometimes life limiting conditions. I have completed higher level training in neurodevelopmental treatment, sensory processing and early Intervention.

Since 2012 I have delivered Occupational Therapy services to the Level 3 Neonatal Unit at the Rosie Hospital, CUH, and continue to do so alongside my ODN role. I have attended specialist training specific to the Neonatal role including FINE Level1, Sensory Beginnings, Bayley III, and EISMART. I am certified in the use of Prechtl's General Movements Assessment, and Brazelton's NBAS and NBO Assessments.

As I have gained more experience in the neonatal role I have become passionate about promoting developmentally supportive care, facilitating positive sensory experiences, and supporting families and other professionals to understand infant behaviour as a key element of early intervention.

With an Occupational Therapy theoretical background I have a deep understanding of the benefits of empowering parents and supporting 'parental occupations' on the NICU and the impact this has not only on infant physical development, but also infant and parental mental health.

I continue to work regionally and nationally to support the development and promotion of the OT Neonatal role. I look forward to supporting other OTs, professionals and families across the network to develop and improve outcomes through education opportunities, family integrated care practices, and early-intervention.



**Wendy Rogers**

**Lead Nurse for Neuroprotection**

I have had the privilege of working within the field of neonates for over 30 years. I started my career as an Enrolled nurse and worked my way through many different titles along the way. As part of this career pathway, I worked as a PDN to support the professional development of staff and promote local and national initiatives to improve neonatal care. This led to becoming an advanced nurse practitioner, a role I enjoyed, but supporting local and regional development of our staff and service, is where my heart lays. I have always worked hard to improve the care we give to our babies and their families, both locally and regionally. This has provided me with the opportunity of meeting and working with many likeminded professionals over the years. Their knowledge and commitment to neonatal care is outstanding and motivates me to continue to work hard within this field.

I stepped into this role of Lead nurse for Neuroprotection at the beginning of 2022. It was originally set up to embed cooling within the region. Due to the support and commitment of all, this is now embedded into our daily practice, which we continue to monitor to ensure we are maintaining a high quality service. With babies surviving at an earlier gestational age, new priorities have been emerging to support the healthy development of the preterm brain. With this in mind, we are now expanding this role into the wider field of neuroprotection. As new data becomes available, we can disseminate these findings and use it to look at our care to help minimise the potential harmful effects of neonatal procedures.

As the ODN lead for Neuroprotection, I am looking forward to continuing to work with you all to support and assist with existing and new practices and welcome any ideas you may think of to improve neuroprotective care. Together we can make a difference.



**Teresa Berry**

**Lead Practice Development Nurse**

I have been in neonates for 15+ years and have worked on both Level 2 and 3 units (EoE and London) as well as spending 5 years working for the EoE Neonatal Transport Team where I completed my ENP training. I have spent the last 5 years working as PDN at NNUH.

I am an NLS and simulation instructor so bring a wealth of educational experience with me





**Paula Peirce**

**Care Coordinator**

My role as Care Coordinator is to promote and support the neonatal partnership between families and staff; as our shared goal is to achieve the best possible outcomes of care, not only for the present; but for future development.



*2 - Polly Basak*

**Polly Basak**

**Project Manager**

Polly joined us as Project Manager on the Neonatal ODN in September 2021. She has an extensive background in managing health related projects.

Polly is currently on maternity leave and will return in the spring of 2024.



**Ian Long**

**Data Analyst**

My name is Ian and I am the Data Analyst for the East of England Neonatal ODN. I have been in the role since 2012.

I am responsible for all things data, including preparing monthly, quarterly and annual reports, responding to specific data requests from the Team and from hospitals across the region. I also help our hospitals to identify incorrect or missing data among other things.

I enjoy regular long dog walks and keeping fit.



**Kelly Hart**

**ODN Office Manager****Neonatal, PCC & SiC**

I joined the ODN team in 2018 as the ODN Administrator. After 3 years within the team I became the ODN office Manager.

I work across all 3 ODN's-Neonatal, Paediatric Critical Care & Surgery in Children

Prior to joining the ODN I was a ward clerk on trauma & orthopaedics, ENT and elective surgery. I have worked for the NHS for 16 years.

In my spare time I enjoy being cuddled up with my dog and a good book.

**Jemima Morroll****Administrator****Care Coordinator & AHPP Teams**

I am Jemima, Administrator to the Care Coordinator Team and the Allied Health Professionals and Psychology Team. I joined the Neonatal ODN in March 2022, with a background in business management, training and recruitment.

As an administrator, my main role is to ensure the smooth and efficient operation of the team. I enjoy providing admin support to ODN Study days.

In my spare time, I cherish every moment spent running around after my children.



**Kelly Phizacklea**

**Chair**

**Parent Advisory Group (PAG)**

I'm Kelly and have stepped up to the Chair of the East of England Neonatal ODN Parent Advisory Group in March 2023, after being Vice-Chair since September 2020. I am very fortunate to have other roles as a Neonatal Service User Voice Representative at local, regional, and national levels. These include; Co-Chair of Rosie Maternity and Neonatal Voices Partnership, member of the East Genomic Medicine Service Alliance, and Neonatal Service User Representative for the NHSE Maternity and Neonatal Delivery Programme, NHSE Neonatal Critical Care Clinical Reference Group, and Health Education England (Now part of NHSE).

I have been involved in neonatal services since 2020 following my daughters 3.5 month stay in the neonatal intensive care unit due to having a major exomphalos, congenital scoliosis, and a ventricular septal defect. I am passionate about embedding neonatal service user voice at a local, regional, and national level and feel it is essential to collaborate with staff and services to focus on the neonatal families 'whole journey'. I continue to strive to improve experiences for neonatal families and ensure the care they receive is equitable.

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**Catherine Rickman**

**Vice-Chair**

**Parent Advisory Group (PAG)**

I'm Catherine and I'm the mother of two children conceived via IVF. My daughter is my eldest and she was born at 28 +2 weeks and spent 79 days in the Norfolk and Norwich NICU. I work part time as a primary school teacher but since my daughter's NICU journey I have felt very passionately about all things NICU and wanted to somehow get involved, therefore I am now the Chair of the Norfolk and Norwich Neonatal Voices Partnership and have recently taken on the role of Vice Chair of the East of England Parent Advisory Group.



## Neonatal ODN Team Updates

**Liz Langham**

The summer is hopefully here soon and there may be some time for you all to spend time with family and friends and recharge. There has been a lot going on nationally and a continued focus on neonatal care which at times feels uncomfortable but has brought about some changes and funding.

The ODN team has continued to grow and develop and embed our new team members into the team. We are starting to see the green shoots of improvement in AHP staffing which is so positive and is a great starting point with more work to do.

The ODN education team have welcomed a new team member in Teresa Berry who has stepped in to replace Sara who has moved on to pastures new. Teresa joins us with a wealth of experience and I know is getting to know you all.

We are going to be seeing some changes with our care coordinator team and wish Claudia all the best with her new challenges. Across the region we have seen a lot of changes with our lead nurses and are always humbled by how supportive you all are with the ODN but also each other.

We are continuing with our peer review schedule and as always are looking forward to coming and visiting teams face to face. The care coordinator team continue to champion BLISS and BFI and as teams you have achieved such amazing progress. We continue to work closely with the ODN PAG and hope to see this increasing and moving closer to our overall aim of coproduction. Kelly Phizacklea our new PAG chair continues the great work Emily started and is a champion of parent voices.

Our working relationship with maternity continues to improve and grow and we have just started our joint project on Transitional care which we hope will be the first of many.

We are looking forward to seeing you all in September at the next face to face COG. Covid has improved how we can work virtually however face to face meetings continue to be important to encourage that networking discussions which do not always take place virtually. We hope as an ODN we are striking the right balance between virtual and face to face.

There is so much work going on it is not possible to mention everything except to say that your continued support is vital to continue this work and to improve services for our babies and families.

So in conclusion I would like to thank both ODN and trust teams for your continued engagement with the ODN. I continue to be proud to work within the ODN team and wider network and I am always amazed by what can be achieved with a network approach.

Liz x

**Matthew James**

We care for with parents their babies at a very vulnerable time. This is a privilege and we all do this with kindness, caring, compassion , creating a safe caring environment where we can share care with families , allowing them to trust us and their babies thrive. It has been a shock over the events of the last few week with the conviction of Lucy Letby for the murder of seven babies and attempted murder of 6 other babies. Inevitably some families will find trusting us more challenging and it has also caused staff within the neonatal community immense distress.

We all have been supporting parents and staff through this difficult time and the Neonatal ODN is there to help support you. Please contact us if you need any more help.

Even more distressing is the fact that staff weren't listened to over concerns. We should be creating a culture where all staff should be able to voice their concerns and be listened to. I would hope that there are systems in place, Neonatal safety champions, Maternity and neonatal safety committees, MBBRACE, Local and Regional mortality review , external mortality review and the Child Death overview panel would make it very difficult in this region for this to happen and the Neonatal ODN is always there to help if you do feel there are issues which are not being taken seriously.

NHS England is offering all trusts the Perinatal Culture and leadership programme to all maternity and neonatal leadership quadrumvirates to help improve leadership, safety and culture within organisations by April 2024 (Three year delivery plan for Maternity and neonatal services.)

### **Claire O'Mara**

Nearly half way through the year, where does time go?

We have seen some changes to the team over the last 6 months, Sara went off to pastures new and we welcomed Teresa to the team as Lead PDN for the ODN. Teresa has a wealth of experience and we are very glad to have her on board. We have had two 'little' additions to the team, Polly (Project Manager to the ODN) safely delivered twins a little boy and a little girl, all 3 of them are doing well. We shall look forward to welcoming Polly back from her maternity leave next year.

More recently Claudia (Care Coordinator) has been successful in being appointed as the new Matron for CUH, we are very excited for Claudia and wish her well – such an amazing achievement. With the post now vacant we had the opportunity to look at how we could best utilise this funding, as a result we will be advertising the Care Coordinator role at 0.6 WTE and with the remaining 0.4 WTE hours we are hoping to appoint a Family Engagement Lead Band 7. This post still needs to go before the AfC for panel for banding so we won't be advertising for a few months yet.

As part of the funding allocation from NHSE to support the recruitment of Governance Lead Nurse roles in all of our neonatal units we also secured funding to appoint an ODN Pharmacist Band C, as with the Family Engagement Lead this post still needs to go before the AfC panel before we can recruit.

The ODN made a successful bid to secure a £20,000 Innovation fund to support education and training from HEE earlier this year. The funding supported the provision of 50 free Transitional Care online modules for non-QIS nurses, midwives, nursery nurses and maternity support workers. We

also funded x3 Master modules for 3 dietitians, numerous Fine 1 places, x1 FINE 2 place, ventilation study day for an ANNP, GIC training and the 3 Clinical Psychologists from the EoE, West and East Midlands held a joint study for Trust level Clinical Psychologists which was a huge success.

We are currently in the process of formulating another successful bid for £20,000 which must be spent by March 2024.

There has been a national drive to review the way we collect neonatal nursing workforce data, currently all 10 ODN's gather this data once a year in April/May. There will now be a move to collect this on a quarterly basis, this will help inform the funding of neonatal nurse recruitment going forward. The workforce 'booklet' will be much more comprehensive and include leavers, new recruits, age profiling and maternity leave amongst other things. I appreciate there will be some anxiety as with all things new but rest assured both Ian and I will support you all with the completion of this new tool, I believe it will very useful for you all.

Once again thank you to all of you for your ongoing support, you are a great team.





**Katie Cullum**

I'm please to say that littlejourney will be launching in CUH in September. Staff at CUH have been busy familiarising themselves with the app over the summer so they are ready to support parents to use this once it launches in September. All other trust involved in the pilot are now ready to soft launch the app to staff before further role out to families.

I would like to invite you all to have a play with the app using the QR code below. The current price of this app per year is £300 if you have Little Journey already within your trust (for surgery, MRI, Blood taking or research etc.) or £1020 if you don't currently use little journey. Contact [asyah@littlejourney.health](mailto:asyah@littlejourney.health) if you would like to know more. It's important to note that this app can be adapted by trusts to have individualised appointment, feedback and research mechanisms. This would require discussion with little journey at a trust level and may incur a further cost.





## Coproducting a digital support tool for Families of infants admitted to Neonatal Units including Transitional Care

Families reported feeling overwhelmed by NICU environment and said better preparation could help

This app introduces the environment, equipment and sounds families may encounter using virtual interactive 360 tours of all areas.

Families whose babies underwent hospital transfer requested better information regarding logistical things such as parking, what they needed to take and where they needed to go. They stated not having access to this information led to additional unnecessary stress.


The app includes information articles, a checklist of what to bring, car parking details, direct telephone numbers and virtual tours of the neonatal transport ambulance and family facilities within each hospital.

**East of England**  
**Preterm Antenatal Counselling Workshop**  
 Date 3rd November, 09:00-17:30, Belfy Hotel, Cambourne




This full day workshop, facilitated by neonatologists, obstetricians, parent partners, and clinical psychologists from the EoE, aims to;

- Review the BAPM framework of perinatal management of extreme preterm birth and putting it into practice
- Look at a suggested structure for antenatal counselling for extreme preterm birth with provided examples
- Provide an opportunity to practice preterm antenatal counselling in role play scenario with actors

Booking form found at:



Midwives fee £50 Paediatric Consultants with an interest in neonatology and Obstetrician fee £125

I'm excited to also announce that we will be hosting a face to face training day for preterm antenatal counselling on the 3rd November. We are keen to get Neonatal Consultants alongside Obstetricians and Midwives to be the first attendees of this day.

Our plan is to host this F2F training every 4-6month, if possible, dependent on feedback and attendance. This day that has been developed in Oxford University Hospital and has been adapted in the EoE with senior clinicians', parent partners, and regional lead psychologists. This day is hosted in response to feedback from families brought to the network mortality meeting. It's important also to note BAPM are working with Dr Katherine Woods (Neonatal Consultant at L&D) who has previously delivered this workshop at Oxford University Hospital to put this forward as a national framework for training.

### Neonatal Transitional Care



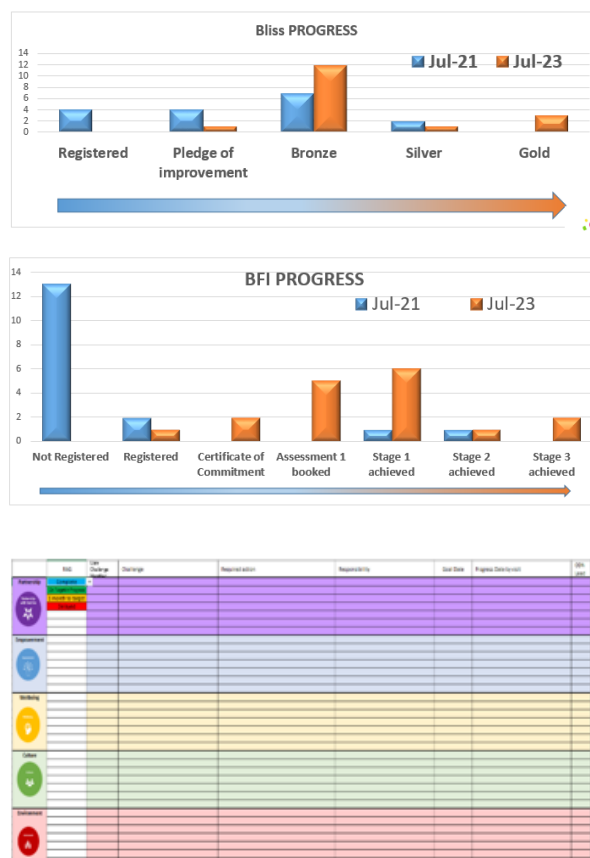
We had a brilliant Neonatal Transitional Care Learning Event back in May with the Regional Maternity Team. Our agreed work streams from this event are as follows:

1. Admission and Discharge Network Guidance- Consultant Lead Dr Sakina Ali and ODN Lead Katie Cullum
2. Regional Transitional Care Family Information Leaflet- Regional Maternity Team Lead Christina Massey, PAG Lead Kelly Phizacklea, and ODN Lead Julia Cooper
3. Workforce- ODN Lead Claire O'Mara
4. Regional TC Community of Practice drop in- Maternity Team Lead Christina Massey and ODN Lead Katie Cullum

Please do get in touch if you would like to be part of any of the working groups.

### Julia Cooper

The Care Coordinator team have seen great changes during the spring and summer as units are supported to progress with Family Integrated Care (FIC), using the tools of Bliss and BFI. The publication of the Three Year Delivery Plan further supports the requirements of neonatal units to achieve accreditation for both Bliss and BFI. It is evident through the traffic seen on WhatsApp and MS Teams that networking is adding an extra layer of support, encouraging and enthusing units to move forward with their achievements. Here's a snap shot, how far you have come?.....



The BAPM integrated Care Framework is the benchmark we use to evidence progress seen. These actions are embedded into each NCCR action plan and highlight where additional support maybe

needed in order for us to move forward with Family Integrated Care. Each unit has their own individualised action plan to guide them.

In May the EoE CCt hosted the National Care Coordinators conference and it was an amazing success with fabulous feedback from all those attending. It gave us the opportunity to showcase the work that all have you have been doing as well as hearing from quality improvement initiatives from across the country.

We have also held the first of hopefully many face to face MDT feeding lead meetings which facilitated networking and allowed successes and challenges to be shared. This is in addition to the study days we have facilitated to raise awareness of FiCare, the reason why it is important and the need for an embedded cultural change. We continue to work closely with service users through the PAG and MNVP', to enhance family experience and are keen to emphasise the importance of hearing the experience of service users'.

- Over the next few months we are going to be focusing and building on service user feedback, developing a Parent Portal for feedback, information for families and sharing Neonatal journey's. The sharing of journeys will be both for veteran parents to support current families, as well as for staff to hear what matters to families and be used as a library for staff to access and use in teaching if they wish.
- Repatriation/transfer – The launch on the 4th October will be the beginning of the regional QI, creating a safe and seamless transfer for families around the region. This will improve family experience and create an improved flow to help increase capacity with babies and families being closer to home and reduced parental anxiety.
- Scope of accommodation looking at national recommendations and provisions versus actual everyday need – supporting units to reduce separation, increase family space where it is needed and celebrating the 'outside the box' innovative thinking in space creation.
- Continuing with peer reviews to assess and support provisions for families- ensuring units are supported in their development plans to make the family experience the best it can be.

Finally:

We wish Claudia all the best in her new role as Matron at CUH. We will miss her immensely.

Claudia came into post at the beginning of the Care Coordinator Role being recruited into and has worked tirelessly to support the units in Norfolk & Waveney and SNEE. Claudia has been an integral part of our education program, championing FiCare, supporting two units in her area to reach the high accolade of Bliss Baby Charter Gold Accreditation.

Claudia has helped shape and develop the role of the Care Coordinator in the EOE, integrating with the MDT, informing all levels of professionals on achievements units have made and supporting units to identify where extras resources are required. With her positivity, celebrating unit family achievements, encouraging program leads and networking, she will be a hard act to follow! We are so pleased that we will as a team, still be working and networking with Claudia in her new role.

We wish you all the luck, joy and success with your new adventure.



**Allied Health Professions**

**&**

**Psychology Team (AHPP)**

2023 has very much been about supporting with the allocation of Ockenden funding and recruitment to the newly created posts. We have seen some successful recruitment and have been supporting these eager new starters with settling into the world of Neonatal Therapy. We are developing regional induction documents for this and will have them available in due course.

With the delays in recruitment to these posts, there is a funding underspend. Teams are encouraged to use this to support with AHPP training, competency development and the purchase of therapy linked equipment for use on the unit. If you have any questions regarding how this money could be used most effectively to support your new AHPP team we are very happy to participate in discussions and make suggestions.



Within the team everyone is hard at work on a number of different projects, just a few of which include:

- Jane (OT) and Rachel (Physiotherapy) are working with the Baby Brain Protection Group to deliver a best practice guideline to support neurodevelopmental follow up services.
- Rebecca (Psychology) is working closely with the Care Co-ordinators and PAG to develop a Parent Portal for the website as well as collaborating with TV&W ODN to develop a workshop for preterm ante-natal counselling.
- Laura (SLT) is working with the Care Co-ordinators to provide education on the Feeding Study Days and contributing to the enhanced e-learning modules for SLT.
- Lynne (Dietitian) is analysing the data from the PN audit, facilitating a national Community of Practice and working with a team to produce national guidelines for vitamin and mineral supplementation.
- In the past few months we have run the first AHP and Psychology Workshop and the Complex Feeding Study Day. Lynne and

Laura also contributed to the Feeding Leads meeting. Jane and Rachel presented regionally on neonatal outcomes and follow up.

Rebecca has presented on webinars for BAPM about “The Anatomy of Compassion”. We are all currently teaching on QIS for Bedford University and feeding into the national discussions about standardisation of the national QIS curriculum.

The coming months we anticipate ongoing recruitment to new AHP and Psychology roles in the region and we will continue to support our colleagues with their work in Neonatal Units. Updated staffing recommendations have been published for Dietetics and Speech Language Therapy so we will be updating our Gap Analysis and recommendations in line with this new information.

**Wendy Rogers**

With every newsletter update I write, I feel I need to start by thanking you for all your support throughout the year. I could not undertake my job without you.

It has been a busy year so far, the Baby Brain Protection Group is taking off, with 3 work streams currently up and running. We have seen more members join, but we still need more, especially for our neuroprotection and neuroimaging work streams.

Our neurodevelopment work stream is hard at work on a developmental care follow-up guideline up to the age of 2 years. As part of this, we are also looking at standardising parent information leaflets to support this. Our Parent advisory group has held parent voices meetings to look into parents experiences and to find out what they would like from the follow-up service. Feedback has been very informative. As you can imagine, this is a large piece of work and will take time to get right. We will keep you informed as it progresses.

The neuroimaging work stream is currently looking at 2 documents to help with recording of CFM readings and also the neurological assessment for HIE. Hopefully these will be ratified for use soon. There also seems to be a wide variation of MRI services and access to specialist doctors to assess the outcomes of reports. The group is looking to collate this data to see exactly what is happening within our region. With the plan to develop a pathway to ease and standardise the process of ordering and reviewing MRIs.

The neuroprotection work stream has been looking a new research data for cooling babies, some of which has yet to be published and others are ongoing. We hope to bring this data to you at the November virtual study day – more details available on the ODN website. The COMET 2 trial, looking at the benefits or adverse effects of cooling mild HIE babies, is recruiting ODNs to take part. We are looking at the possibility of participating and plan to have a regional meeting early September with the lead researchers to discuss this in more detail. So far this year we have had 14 babies with a grade 1 (mild HIE) diagnosis, 4 of which we actively cooled. With the PeriPrem care bundle being implemented in many of the hospitals within our region. Our plan is to provide additional information for caring for the neonate on NICU to complement and support this.

## Cooling

Excluding RIP, 2022 saw 60 babies cooled within our region. So far, up to June 2023, we cooled 31 babies

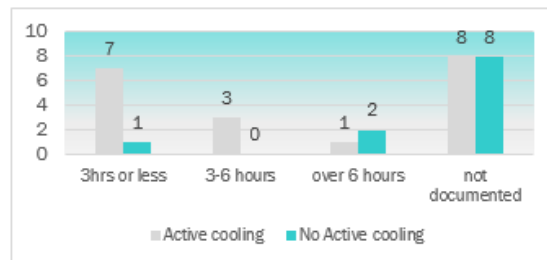




#### BABIES COOLED WITHIN THE EAST OF ENGLAND FOR YEAR 2023 JAN TO JUNE



10 of our units now have access to active cooling, in line with the BAPM recommendations, with more units to follow soon. Of the data available, we are cooling the majority of our babies within the 6 hour window (see chart below), but we do still struggle to get the temperature down with passive cooling prior to the transport team arriving. This will certainly help to improve the timeliness and control over the cooling process.



#### Training days

Our next Study day will be virtual, on the 14th November 10am to 2pm, where we will be discussing recently completed and ongoing trials around HIE. There will also be an interactive session on spotting seizures on aEEG and EEG and a parent perspective experience of a baby diagnosed with HIE. I look forward to (virtually) seeing those of you who are able to join us on the day.

I hope you have all managed to enjoy some quality family time over the summer holidays. Won't mention the weather! Should you need any information or help regarding neuroprotection, please don't hesitate to contact me. [wendy.rogers3@nhs.net](mailto:wendy.rogers3@nhs.net).

**Teresa Berry**

#### Parent Advisory Group

The Neonatal ODN Parent Advisory Group is a group of parents/carers who have all had a baby receive neonatal care in the East of England. The aim of the PAG is to ensure there is parent voice throughout all the ODN workstreams. We are currently involved in workstreams focussing on; baby wearing, neurodevelopmental follow up, transitional care, and antenatal pre-term counselling.

We have recently increased our membership to 14 PAG members, who bring a range of experiences from different neonatal units across the region. We are also linking with the new Neonatal Leads within local Maternity and Neonatal Voices Partnerships (MNVPs) to ensure feedback is linked from a

local to regional level. We are always open to new members joining, therefore, please feel free to share PAG's details with families, or please get in touch to discuss further.

We have recently hosted two listening sessions focussing on transitional care and neurodevelopmental follow up. These sessions enable us to obtain feedback from recent parents to identify themes of good practice and where improvements are required.

A member of PAG will be attending the upcoming peer reviews as part of the ODN visiting team. This opportunity enables PAG members to provide a fresh parent perspective by attending a neonatal unit they haven't been to before. They are also able to identify good practice that can be replicated throughout the region to reduce variation in family's experiences.

Please feel free to contact us at PAG at [eoeneonatalpag@gmail.com](mailto:eoeneonatalpag@gmail.com)



The Neonatal ODN team were nominated for an outstanding team award. With special mention to Julia Cooper for being an amazing team leader for the Care Coordinators



East of England Paediatric Critical Care ODN



# East of England Paediatric Critical Care

Operational Delivery Network

Collaborative working to deliver high quality care to our children and their families



**Lauren Filby**

**Lead Clinician**

I've been the clinical lead of the PCC ODN since it's first year, and combine this role with working as a paediatric consultant in Ipswich.



**Alison Clark**

**Lead Nurse**

In 1987 I commenced my dual RGN/RSCN training at GOSH and RBH in Reading. After qualifying I spent a year at GOSH before moving to CUH.

I have spent the last 31 years working both on the wards and in PICU. I have experience of PICU transport and practice education and before moving to the ODN, I was the Senior Sister on the 0-3 years ward. I have been an EPALS instructor for over 20 years.

As well as my intensive care training, I have focussed my own development on leadership, completing a leadership degree and the Leadership Academy Elizabeth Garrett Anderson MSc in Healthcare Leadership.

I was excited to join the PCC ODN in 2019 - its first year and am delighted with the developments we have made so far.



**Francesca Wright**

**Lead Nurse for Education**

As a children's nurse with a clinical background in critical care and clinical education, I am passionate about education and enhancing the competence and confidence of our workforce. I have been working with the ODN since 2020 and am involved in education for both the Surgery in Children and Critical Care networks I have recently completed a masters in medical education, I co-chair the Paediatric Critical Care Society Education Forum and have enjoyed the opportunity to present ODN work at national events



**Amie Cole**

**LTV Lead Nurse**

My background is in paediatric critical care working in Paediatric Intensive Care, Cardiac Intensive Care, and Acute Transport Service within London and as a High Dependency Facilitator within the East of England. I now work as the ODN Network Long Term Ventilation Work stream Educator to educate and support the local hospitals to look after the CYP closer to home, working closely with the Tertiary Centres and District General Hospitals to help standardise the processes going forward.





**Naomi Rowell**

**Lead Practice Development Nurse**

I joined the PCC ODN as a Network practice development nurse in April 2023 and it has been a steep but enjoyable learning curve. My previous experience almost exclusively lies in PICU, formerly at the Evelina in London and latterly in the PICU at Addenbrookes, where I worked as an educator for the past five years.



**Katie Bagstaff**

**PACU Education Lead**

Katie is a Registered Children's Nurse and Senior Sister in Recovery at Addenbrookes Hospital. She is also chair of the Royal College of Nursing, Children and Young people Acute Care forum, and is a member of the board for the British Anaesthetic and Recovery Nurses Association. She is passionate

about the Recovery/PACU nursing speciality and ensuring that our workforce is appropriately trained and supported to deliver excellent care.



**Eniko Erdodi**

**Administrator/Data Coordinator**

**PCC & SiC**

I am the Data Coordinator and Administrator for the PCC & SiC ODN teams.



# East of England Surgery in Children

Operational Delivery Network

Collaborative working to deliver high quality care to our children and their families

**Lead Clinician**

Milind Kulkarni is Consultant Paediatric Urologist at NNUH besides clinical Subdean (Norwich Medical School) and Chair for National Specialist Advisory Board in Paediatric Surgery.



**Jessica Bewick**

**Lead Clinician-ENT**

Ms Jessica Bewick trained in the East of England as an ENT surgeon going on to specialise in paediatric ENT at Great Ormond Street hospital. Appointed as a Consultant in Paediatric ENT at Addenbrookes in 2018 she has a specialist interest in children's airway surgery and ENT care of the complex child.



**Pranav Kukreja**

### **Lead Anaesthetist**

Since 2016, I've been serving at the Lister Hospital, a role I undertook after completing my post-CCT fellowship with STRS and CATS. My experience and passion for medicine have led me to take on the challenging but rewarding position of workstream lead for Anaesthesia within The Surgery in Children ODN.



### **Damian Griffiths**

#### **Lead Nurse**

With a background in neurosurgery, paediatric intensive care, long term ventilation and palliative care I am passionate about quality improvement, improving patient experience and journey across the network.

## **PCC & SiC team updates**

### **Liz Langham**

The summer holidays are here and I hope everyone is looking forward to a break from what has been a very challenging year. The requests for improvements continue and as always your teams rise to the requests. Summer holidays unfortunately make us start to think about plans for the winter and looking at how we manage winter pressures for another year. As an ODN we are working on the surge plans and reviewing how this will impact elective care.

This year has seen some development within the ODN team, we have increased our education team, with Francesca becoming the lead for education and Naomi Rowell joining the team as PDN. This is a very exciting and has increased capacity which will allow us to continue to support high quality, accessible education. Our new recovery course has been a huge success and Katie Bagstaff will continue to work with the ODN over the coming year. Our surgery in children has now got a new lead nurse, Damian Griffiths who has joined our team and hit the ground running.

We have successfully funded 4 more level 2 beds in the region, 2 at Luton and Dunstable and 2 at Basildon and will continue this process over the coming 6 months looking to fund some further beds within region.

Our LTV work continues and we are delighted to say that Amie will continue to work with the ODN in her new permanent role as the lead for LTV and there are plans to identify some consultant time in the region to support this development.

The rest of this year will continue to be busy with the PCC ODN finishing their peer review visits and starting to look at action plans and support for development of PCC services. We are planning our service review visits for SIC from October and we as a team are excited to be coming out to trusts to meet the team. As with all our other reviews we hope your teams will see these as supportive visits.

I couldn't finish without mentioning the work around elective recovery, this has been a focus and now there is a real focus on paediatric recovery which whilst it feels difficult has raised the profile of paediatrics nationally.

So in conclusion I would like to thank both ODN and trust teams for your continued engagement with the ODN. I continue to be proud to work within the ODN team and wider network and I am always amazed by what can be achieved with a network approach.

Liz x

**Lauren Filby**

This November marks the end of my fourth year as clinical lead for the PCC ODN, a role I was determined to get since the old days of the HDU meetings and the inception of the ODN. I remember my first COG, face to face in Cambridge, and feeling in awe at all the experience in the room. I still feel that way, albeit it's a virtual room mostly, and I can't even measure the amount that I have learnt from working besides all of you.

If you're wondering why this update sounds sad, don't worry I'm not dying! But I am leaving. Don't all shout for joy at once! It's time for me to move on to other things, hopefully a bit more time at home, and I've switched my Ipswich lead for an associate medical director

role, where I will continue to nurture my imposter syndrome!!

This leaves a vacancy in the post, and I would urge you all to think hard about applying. The ODN lead role is a brilliant job, and I think you have probably all seen how much I have loved it as I have stayed smiling through every meeting we have had.

I will remain a passionate part of the network, and a voice for investment and improvement in local care and services close to home. I remain in awe of you all, and grateful that you made my tenure as fun as it has been.

Lauren x

**Alison Clark**

Well we need a bit more of the sun before we head into the long dark nights!

The ODNs are busy preparing for this winter. Surge plans are being reviewed and we are already meeting regularly with our CYP/ICB and other colleagues to align our plans.

We have had some changes to our teams in the last few months. We are lucky to have welcomed Damian as our SiC lead nurse, promoted Francesca to the education lead post and recruited Naomi as our PDN. We have also said goodbye to Yusaf as his year with us came to an end. We were delighted that Katie Bagstaff agreed to spend some more time with the SiC team working on the recovery course – the first cohort was a great success! She is also supporting Damian with her wealth of paediatric surgical experience.

We are hoping to have a permanent project manager post out to advert by the end of the summer and are still working on plans to add some clinical lead time to the LTV workstream.

Eniko has done an amazing job of setting us up with some more tools to help manage our workstreams and she is continuing to provide us with some great data to support our work.

I would like to thank our ODN clinical leads, Lauren, Milind, Jess, Pranav and Anish for their input and expertise. We have some great projects in progress and some good ideas for what we would like to achieve in the coming year.

We are keen to ensure that our ODN work is meeting your needs and that the COG meetings are productive, enabling you to share learning and good practice. If you have any case presentations or other relevant work you would like to share with the groups, please do let myself or Damian know. Also, if there is anything you feel it would be helpful for us to focus on for the coming year, please get in touch.

I would like to thank you all for your continued support for the networks despite the ongoing challenges of industrial action, staffing pressures and your own workloads. We are aware that there have been a number of changes within some of your teams. If you have anyone you would like to add to our contact lists, please do let us know.

We look forward to coming out to visit you all for the SiC service reviews in the coming few months.

**Francesca Wright**



I am writing this having just returned from a family holiday to France and having had some time to reflect on our activity so far this year.

We were delighted to welcome Naomi to the team, Naomi joined us in April from PICU at CUH, where she had been working as a clinical educator. Naomi has already made a big difference to the team and I know that some of you have already had the opportunity to meet her as she has been popping out to visit you; thank you for making her feel welcome.

As a result we have increased our capacity slightly for the PCC Level 1 course and will be welcoming 40 candidates for the Autumn cohort. Dates for 2024 will be published shortly.

We recently launched an MSForm for all requests for education from the ODN, we hope that those of you have used it are finding it ok? Do let us know if you think there is anything that we could change to make it more user friendly. It is on our website but also popping it here in case you haven't seen it.



We have been delighted to provide some bespoke education for a few of you over recent months, face to face sessions, virtual, and using our e-learning platform Bridge to create a package to facilitate learning around a particular topic. Please do let us know if you think we can help with any local education, get in touch if you'd like to more about how we might be able to help.

We have enjoyed two very successful virtual study days with our friends over at the neonatal network, the educators day and the bereavement day both of which generated lots of discussion and some projects to take on in the future. We have two virtual days still to come, for which bookings are open,

19th October 2023 - Foundations of Surgery in Children study day, designed for those fairly recently qualified, or new to paediatrics, covers topics such as pre op assessment, play and distraction, consent



22nd September 2023 Cardiac Study Day, In response to feedback we are trying something a little different this year with the cardiac study day. We are offering the day to nurses and doctors, splitting the focus of between a session predominantly aimed at paediatric and neonatal nurses in the morning and an afternoon session with more of a medical focus for doctors in training and ACPs. However, all are most welcome to attend either or both sessions, and we would hope that there will be learning for all throughout all the sessions on the day. Although we will ask for your preference for morning or afternoon sessions, the joining link will be the same so you can easily join for the sessions that suit your learning objectives on the day.



We have also teamed up with PaNDR to offer some simulation and skills day for nurses across the region, each provider has 3 places and we are offering 2 dates so we can accommodate everyone, if you haven't booked your places yet, you can use this link to book via Eventbrite.

[Monday 2nd October 2023](#)

### **Leadership**

Our leadership course for Autumn is full, and we are holding a short waiting list, if you have staff who are booked but can no longer attend please do let us know so we can offer to somebody on the waiting list. We are working with Steve Andrews to create module 2 and should have more news in September. Sara Davis and I were delighted to presented this work at the RCN Education Forum in Birmingham in April.



We held a face to face PDN forum in March and it was so lovely to see those of you who were able to attend. We had a mix of educational / informative sessions and interactive sessions, we introduced our high fidelity manikin to everyone and decided to name it 'Marley (the manikin)'.

We are also delighted to have been able to purchase a training manikin for each unit to help with on going training, the Nickie doll has a tracheostomy, stoma, NPA, PICC and can be catheterised. The Lister Hospital have popped theirs into outpatients and are running a competition for the children to come up with a name!





### **Amie Cole**

I hope you are all enjoying the summer, despite the poor weather. As we all start to look forward and plan for winter pressure I wanted to say a big thank you for all your hard work and engagement with LTV training and planning. I am now settling into the permanent role and have been getting out to most of the hospitals to do the LTV study day. I have had great engagement from all the staff with most people saying they feel more confident to look after these patients', which is great to hear. I will be continuing with this study day and getting involved in the patients discharge planning to support the units in taking back these patients back to get them closer to home where possible. The LTV guideline and competency booklet will be out in the next few weeks, this will be a great bedside guide to support you if a non-invasive (NIV) or Tracheostomy ventilated patient presents to you acutely unwell or as a step down from the Tertiary centres.

As the role is progressing, we are looking at the discharge process and how this can be improved, from the paperwork, equipment ordering and how the discharge process happens. To support education further, there will be an E-Learning style package for you to use within your trusts. We are hoping to provide a regional super user LTV day to give the educators and senior staff with an LTV interest added training so you have the resources you need to provide teaching at the bedside with support from your ODN team. Please continue to get in touch with any education needs and I look forward to seeing you all soon.

### **Naomi Rowell**

It has been so lovely to get out into the region and to visit so many of you at your hospitals, a big thankyou to all the wonderful PDNs out there for all the tireless work they contribute. I have been welcomed so warmly and seen so many amazing things going on in Paediatric critical care across the region. Our children in the East of England are lucky to have so many dedicated professionals constantly striving to do better for their children.

I have begun to support the Level 1 HDU Course with Francesca and have seen lots of you both online and for assessments, and have started to be involved in many other educational ventures

across the region such as skills days, development days and Team days. The Educators online study day was a particular highlight for me -we had a fantastic day of learning and sharing experiences and it was brilliant to see such great enthusiasm and engagement. Please do remember we can support with face to face training, SIM or ad hoc study days, just fill in the form on the website and we will contact you to arrange. Anything short notice don't hesitate to contact us by phone or email and we will do our best to assist. I hope that as I settle more into my role and build relationships that we can help to meet educational needs across the region as they continuously grow and develop.

Most of all it has been so exciting to see so many regional links and strong teams developing, utilising resources and sharing education and information across the network. Keep up the good work

### **Katie Bagstaff**

The pilot of the paediatric PACU (Post anaesthetic care unit) course has almost completed. The course was developed with collaboration from across the region, ensuring that the course considered the educational needs for as many teams as possible.

The course involves three taught study day, with speakers from across the network. There was also a simulation day, where the learners were able to participate in the running of emergency situations for post operative patients. The course has been very well received, with great feedback.

The second cohort starts in September, with two more cohorts planned for 2024. The ODN is also sharing it's learning with the National SiC teams.

We would like to thank all of the volunteers who have supported the teaching for the sessions, making this course possible.

### **Milind Kulkarni**

The summer has been quite variable but at last the sunshine has been here for last few days. Here at the SIC ODN work is gathering pace. It's been exciting times. Our guidelines for FB ingestion as well as management of testicular pain are published on the website. On a positive note, we achieved 100% compliance with reduction in waiting lists to 78 week waiting across EoE in April 2023 but now have a challenge to bring it down further. SIC Network Clinical Network specification has been published recently and we are assessing if we need to make any changes to our working practices though we are doing most of the things in the specification. Thanks to our provider partners to achieve this goal. Unfortunately, ENT waiting lists still remains an issue. Jessica Bewick wrote to all the trusts requesting prioritisation of these children to bring the waiting list down.

We are looking forward to few important meetings in next few weeks: National Team will undertake a regional visit to discuss EoE performance on 15th September; followed by our face to face COG after a long time on 19th September. We will be starting out trust visits from October 2023. After the zoom/Teams fatigue, I look forward to meeting every one face to face. Paediatric T & O colleagues are meeting on 10th November for regional meeting. Eniko has worked with Jo and regional team to create fantastic dashboard which provide live data about activity and key performance indicators about operational performance. Our day cases rate are very much in line with England performance. Reviewing the data also shows that there is not a significant variation in workload. On educational

front, Katie's has done a brilliant piece of work about POA workshop and Pranav Kukreja and Jessica Bewick have been instrumental in developing the airway seminar. Besides these, we are also looking at plans to develop Regional risk register and review the regional surgical mortality ( and at later stage morbidity/ near misses) for any learning which could be disseminated across the region. Lastly, but not the least, Damian has brought in a fresh sense of pace and organisation to all the work. He has been instrumental in developing links and sorting all our IT collation.

Overall it's been a productive few months. Thanks for all the hard work and engagement + enthusiasm that you all provide. I am really looking forward to meeting you all in the trust visits in next few months. Have a good remaining long days of summer and hope to see you all soon.

#### **Jessica Bewick**

The joint paediatric emergency airway course run with anaesthetics has been a great success. The regional tonsillectomy guideline publish in 2023 aim to improve access for children's surgery closer to home while meeting the GIRFT recommendations on increasing day surgery where appropriate, this is currently being audited. Current projects include a working group looking into hearing loss investigation with the first meeting due in September.

#### **Damian Griffiths**

Joining the ODN in March 2023 I have immersed myself in the diverse world and work streams of Surgery in Children, attempting to find out the priorities of colleagues within the network and support the ODN work plan. I have redeveloped our FutureNHS work space in order to create a space for collaboration that network members can utilise and connect with other colleagues across the region.

Meeting with the ODN team in July helped to streamline the work plan for 2023/24 which I hope will help to support some of the individual network team priorities and provide support to the workforce.

I look forward to meeting colleagues during the supported reviews commencing in October. Although this will not conclude until May 2024 I am very happy to visit sites before their planned site visit as an introduction, meet teams and see where we can offer support, learn from local excellence and transformation initiatives, supporting shared learning across the network.

After the fixed term project manager position ended in June, my focus is on ensuring the work streams remain supported, acknowledging the input from colleagues across the region undertaking a lot of work in supporting the network's objectives and advancing on standardising through guidelines, sharing expertise and knowledge, to improve the care and experience of babies, children, young people and families across the region.

For all the latest ODN news, please visit our website



[East of England Website](#)

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