

# Health and Adult Social Care Overview and Scrutiny Committee

BRIEFING NOTE – No.08/12

- Date:** 12th December 2012
- Briefing paper to:** All Members of the Health and Adult Social Care Overview and Scrutiny Committee
- Purpose:** To update Members on the Kent and Medway Major Trauma Project

## 1. Summary

- Setting up a major trauma system in Kent and Medway is a National directive.
- The Kent and Medway Major Trauma Network joined with the South East London Major Trauma Network on 1<sup>st</sup> April 2012 to form a new Network, South East London, Kent and Medway Major Trauma Network (SELKaM).
- Trauma Units in Kent and Medway will be aligned to Kings College Hospital as their Major Trauma Centre.
- The Medway Maritime Hospital and the Tunbridge Wells Hospital had Trauma Unit Designation visits in September and the recommendation from the panel was that they are designated as Trauma Units.
- East Kent Hospitals University Foundation Trust (EKHUFT) has advised that the decision as to whether the William Harvey Hospital and/or the Queen Elizabeth the Queen Mother Hospital becomes a trauma unit will need to be identified as part of their review of their urgent care clinical strategy.
- Identifying a pathway for East Kent patients' impacts on the ability of the Medway Maritime Hospital and the Tunbridge Wells Hospital to start operating as Trauma Units as there is a co-dependency.
- Work is continuing with East Kent Hospitals University Foundation Trust to raise standards of care for major trauma patients in East Kent via the William Harvey Hospital and the Queen Elizabeth the Queen Mother Hospital. They remain committed to providing a Trauma Unit/s.
- Discussions are now underway with the East Kent Clinical Commissioning Groups (CCGs) to agree the model they wish to commission for East Kent patients.

## 2. Background

Major trauma may typically occur because of a road accident, a violent incident, or a serious fall. Although the number of major trauma patients is relatively small, less than 0.2% of hospital emergency work, their injuries are often complex and serious putting them at risk of death or disability. For example, somebody who has been in a road accident might have both chest and head injuries. In order to improve chances of survival it is imperative that care is based on the individual needs of this patient group, rather than geographical boundaries or the location of individual acute institutions.

Nationally the NHS has recognised the importance of making improvements to the pathway for major trauma patients. In the future patients will be treated more quickly and receive a higher standard of care in a dedicated 24-hour specialist Major Trauma Centre or a local Trauma Unit based on their individual needs. Less serious traumas will continue to be dealt with at an emergency department local to the patient.

The need to improve care for major trauma patients was highlighted in a National Audit Office report (2010). It stated that there were unacceptable variations in care for this most severely injured group of patients and made recommendations to improve standards. A nationwide programme to form regional trauma networks was set up by the Department of Health following a recommendation from Lord Darzi that Major Trauma Centres would save lives.

Kent and Medway major trauma leads have been working with partners on three main areas:

- A merger of the South East London Major Trauma Network and the Kent and Medway Major Trauma Network in order to form a new Network, the South East London Kent and Medway Major Trauma Network (SELKaM). This is now established.
- The development of a robust Kent and Medway Major Trauma System, which is equitable for all residents, improves patient outcomes and saves lives.
- Improving the rehabilitation pathway for major trauma patients so that they receive the best on-going care, have improved outcomes and can receive care as close to home as possible.

### **3. South East London Kent and Medway Major Trauma Network (SELKaM).**

The merger of the South East London Trauma Network and the Kent and Medway Trauma Network has taken place in order to form a new Network, the South East London Kent and Medway Major Trauma Network (SELKaM). This took effect from the 1<sup>st</sup> April 2012 and the inaugural meeting was held on 13<sup>th</sup> June 2012. The emerging SELKaM Major Trauma Network is supporting the development of the trauma system for Kent and Medway patients and ensuring on-going improvements to standards of care for patients across South East London and Kent and Medway. Sub groups are in place or in the process of being set up in order to concentrate on specific areas, for example Trauma Audit and Research Network (TARN) data, imaging, nursing, pre-hospital care and rehabilitation, so that the same high standards of care and pathways are in place right across the system.

### **4. Development of a robust Kent and Medway Major Trauma System**

Within the SELKaM Trauma Network trauma units for Kent and Medway will be based at the Medway Maritime Hospital and the Tunbridge Wells NHS Trust, Tunbridge Wells Hospital. In addition the Network is working with East Kent Hospitals NHS Foundation Trust to ensure a Trauma Unit is in place in East Kent.

The majority of Kent and Medway patients who require specialist Major Trauma Centre care will go to Kings College Hospital either directly or through secondary transfer after stabilisation at a Trauma Unit. However some patients from the borders of West Kent may be taken to the Royal Sussex County Hospital Major Trauma Centre.

Trauma Unit pre designation visits took place in March to establish whether they fully met the Trauma Unit Criterion. The designation panel concluded that all sites had made substantial progress towards becoming Trauma Units. However they suggested they needed to work closely with the emerging SELKaM Trauma Network and partners, including South East Coast Ambulance Service (SECAMB) and Helicopter Emergency Medical Service (HEMS), to show they could fully meet the criteria at a second designation visit.

Second designation visits took place at the Medway Maritime Hospital and the Tunbridge Wells Hospital in September. The visiting panels were impressed with the progress both hospitals had made particularly with regards to Trauma Audit and Research Network (TARN) data collection and analysis, education and training, governance, and pathways. Their recommendation is therefore that both hospitals should be designated as Trauma Units.



Discussions are on-going with East Kent University Foundation Trust (EKHUFT) regarding the development of a Trauma Unit in East Kent. EKHUFT has advised it wishes any final decision on which site/s should be Trauma Unit/s to be taken after its Clinical Strategy Review but it remains fully committed to the continuous improvement in major trauma care at both the William Harvey Hospital and the Queen Elizabeth the Queen Mother Hospital. This affects Medway as the system needs to put in place as a collective in order to ensure patient safety and equity of clinical care for all residents in Kent and Medway through a clear and defined pathway.

## **5. Improvements to the rehabilitation pathway**

Work has started on improving the rehabilitation pathway for major trauma patients so that they receive the best on-going care and can return to their local area at the earliest opportunity. The first SELKaM Major Trauma Rehabilitation Board meeting took place on 27<sup>th</sup> September 2012 and the initial focus is on understanding what services are available to patients across South East London and Kent and Medway, the gaps in provision of rehabilitation care, issues and to make commissioning recommendations to the CCGs. The overall aim is to improve the rehabilitation care patients receive, improve patient outcomes and provide on-going care as close to home as possible.

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