

Update on major trauma implementation

1. Introduction

The purpose of this briefing is to provide a summary of the current project progress and describe a high level implementation timetable.

2. JCPCT Decision

The Joint Committee of PCTs (JCPCT) to commission their preferred option of 4 trauma networks. This provides major trauma services at; Royal London, St George's and Kings College Hospital commencing April 2010, and at St Mary's, Imperial with a later implementation date of Oct 2010.

3. Project Handover

Fionna Moore was appointed as the London Trauma Director from 1 October 2009. The final trauma project board took place on 21 September, when the responsibility for the project was formally handed over to the London Trauma Director working as part of the London Trauma Board.

4. Implementation Planning

To facilitate planning for April 2010 delivery the major trauma project has been working with the clinical and managerial trauma network leads and the London Ambulance Service. Each of the four major trauma centres have been submitting monthly implementation plans and risk logs which have been scrutinised by the London Trauma Director and the London Specialised Commissioning Group. The London Ambulance Service has also submitted monthly implementation plans.

4.1. Major Trauma Centres

Monthly meetings to discuss taking forward the work outlined within these plans have been taking place since April 2009 and will continue. The London Specialised Commissioning Group will commission major trauma centres and trauma networks and have been engaged throughout the implementation planning process. The aim of these planning meetings is to ensure that there is joint agreement of the timeframes and tasks that will need to be undertaken prior to the service becoming fully operational.

An external assessment of the MTCs readiness for implementation by the National Clinical Director for Trauma and the original chair of the evaluation panel will take place in January 2010. The London Trauma Board will be responsible for determining the suitability of each major trauma centre to be 'service ready' by April 2010 or October 2010 as appropriate.

4.1.1. Development of interim arrangements for North West London

The North West London Trauma Network has an agreed later implementation date of Oct 2010. A transition working group has been set up which will develop the interim arrangements for the North West for the period between the April 2010 implementation date and the later go-live date for this network.

4.2. Implementation planning for Trauma Centres

A number of trauma centres sit within each trauma network. During the monthly implementation planning meetings for major trauma centres with the London Trauma Director, described above, each centre also provides updates on the

development of their network and progress to date. This includes aspects such as developing plans for governance of the network and protocols for repatriation.

In December 2009 each trauma network, with representatives from each trauma centre, will present a summary of current progress to date and remaining challenges for the implementation of the trauma centre criteria to a panel comprising of the following; Fiona Moore, LSCG and a representative of the relevant Sector Acute Commissioning Unit (SACU).

Further progress meetings will take place during 2010 – 2011 when additional support for the development of Trauma Centres will be provided. Each SACU will be responsible for commissioning trauma centres within the network.

4.3. Implementation planning for the London Ambulance Service

The London Ambulance Service has identified those elements of work which it needs to complete in order to deliver patients effectively to the appropriate centre. A triage protocol has been drawn up and agreed which will help crews to perform this function. All staff will need to be trained in the use of the triage protocol and training is underway. In addition a clinical co-ordination desk will be established which will give support to crews in decision-making as well as a real time overview of where trauma patients are being taken in London. The London Ambulance Service has implementation plans against all the tasks that need to be achieved by April 2010. Meetings to discuss delivery against these objectives and meetings to discuss commissioning arrangements with the LAS commissioning team, are held on a monthly basis.

4.4. Major incident planning across trauma networks

The Department of Emergency Preparedness is linking in with each trauma network to establish network major incident plans. These plans will form a revised section of the pan-London major incident plan, which will link in with the LAS clinical co-ordination desk.

4.5. Agreement of all adjacent PCTs/SHAs

The Healthcare for London project team is continuing to hold regular discussions with adjacent PCTs and SHAs to agree clear pathways for trauma patients from areas adjacent to London into major trauma centres and back to their local hospital, and also to ensure that these arrangements are reflected in local agreements with commissioners and out-of- London ambulance services.

5. Performance Monitoring and Management

Performance monitoring of the London Trauma System will be undertaken through the collection of data to the Trauma Audit Research Network (TARN) This data will be collated by the London Trauma Office to give an overview of the performance of networks and the system. A performance framework has been drafted and is currently being finalised.

A performance monitoring and quality improvement group will be established to provide peer support in relation to the performance of the trauma networks. This is part of the governance structure. Performance will be monitored through quarterly performance review meetings with each Trauma Network. Any serious performance issues which are not addressed through these channels would be escalated to the LSCG Board and the SACU JCPCTs.

6. Ongoing workstreams

Workstreams are in place on;

- **Prevention**
A proposal for the future composition for a prevention strategy for London was outlined in a separate paper submitted to the JCPCT as part of the assurance documentation. This work will be taken forward by the project and the strategy forms part of the new governance framework. The estimated timeframe for completion of this work is March 2010.
- **Rehabilitation**
Two expert advisers were recruited to continue the work on the development of a trauma rehabilitation pathway and strategy. This work will be taken forward by the project as a rehabilitation sub-group of the clinical steering group. This group will continue the development of the rehabilitation model including piloting the rehabilitation pathway.

Other workstreams are in place taking forward work on education and training, IT issues, trauma centres and research