

Trauma, Tenacity and Teamwork

A peer review of Scotland's regional Major Trauma networks

Authors

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Aim

The Scottish Trauma Network (STN) improves and optimises the health and wellbeing of the seriously injured throughout the country. It is in place to ensure that no matter where major trauma occurs, patients will receive the same standard of care and rehabilitation.

It operates in a hub-and-spoke model, with a national Programme Team and four trauma regions across Scotland. A national peer review was carried out to determine if STN provides value-for-money, is sustainable and is fit-for-purpose for improving patient care and outcomes.



Methods

The Programme Team within the Scottish Trauma Network aligned its peer review process with the Peer Review Guide: Major Trauma Networks of England and Wales (1). It also reviewed the processes and report published following the South Wales Trauma Network peer review in 2022 (2) to follow best practice.

The Scottish review process began in September 2023. A panel was gathered comprising of 15 colleagues from: five Scottish health boards, NHS England and the Scottish Trauma Audit Group (STAG). Six members of the review panel conducted each region's review, with no member participating in their own area. NHS England and STAG representatives were present on each of these panels for consistency.

All regions and facilities across Scotland were assessed against a set of requirements (see Table 1) which covered:

- Access to facilities and resources
- Staffing availability
- Pathways and protocols
- Communication
- Education

Type of facility	No. of requirements measured	Total no. of facilities
Adult major trauma centres (MTC) and rehabilitation	77	4
Paediatric major trauma centres (PMTc) and rehabilitation	64	3
Trauma units (Adult and Paediatric)	70	10*
Local Emergency Hospitals (LEH)	16	7

*2 TUs are Adult only, 1 is Paed only

Table 1 Tally of requirements measured at each STN facility during the Peer Review.

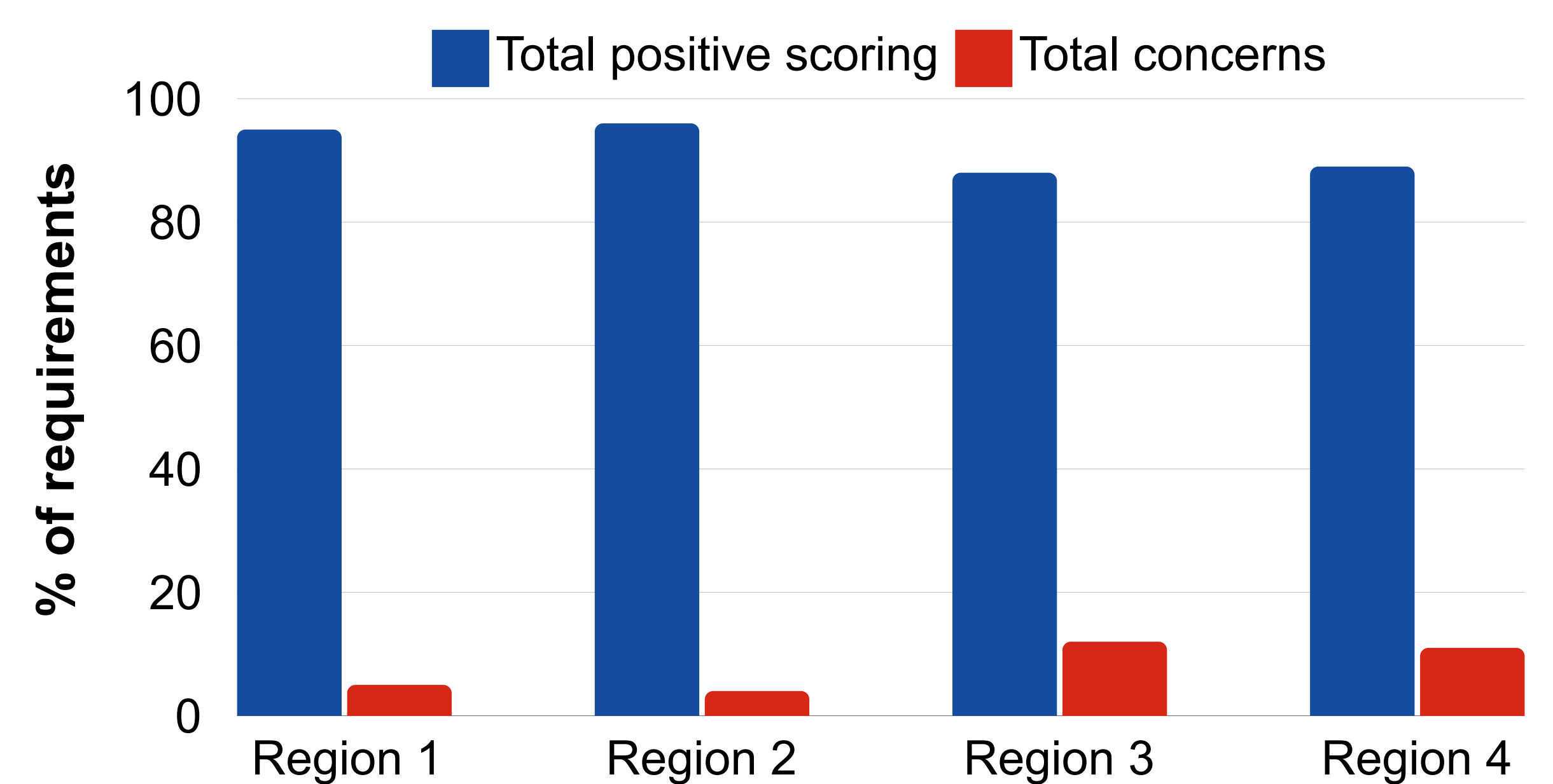
A SharePoint site was established for each region where local teams uploaded evidence on how they meet each requirement. Hundreds of documents were shared for the panel to review remotely.

From mid-December 2023 to early March 2024 the panel members then visited each region in person. Site visits took place over 7 days. During the visits the review panel met with trauma colleagues, discussed the evidence supplied and saw how sites and facilities operated on a day-to-day basis.

Feedback on each of the 1,207 requirements was then gathered on the SharePoint site. This included highlights of significant achievements, areas of concern and recommendations for improvements.

Outcomes

Across the four major trauma regions, the vast majority of criteria was rated as 'good practice' (see Graph 1), with 33 instances of 'significant achievements'. No areas were found to have any 'immediate risks'.



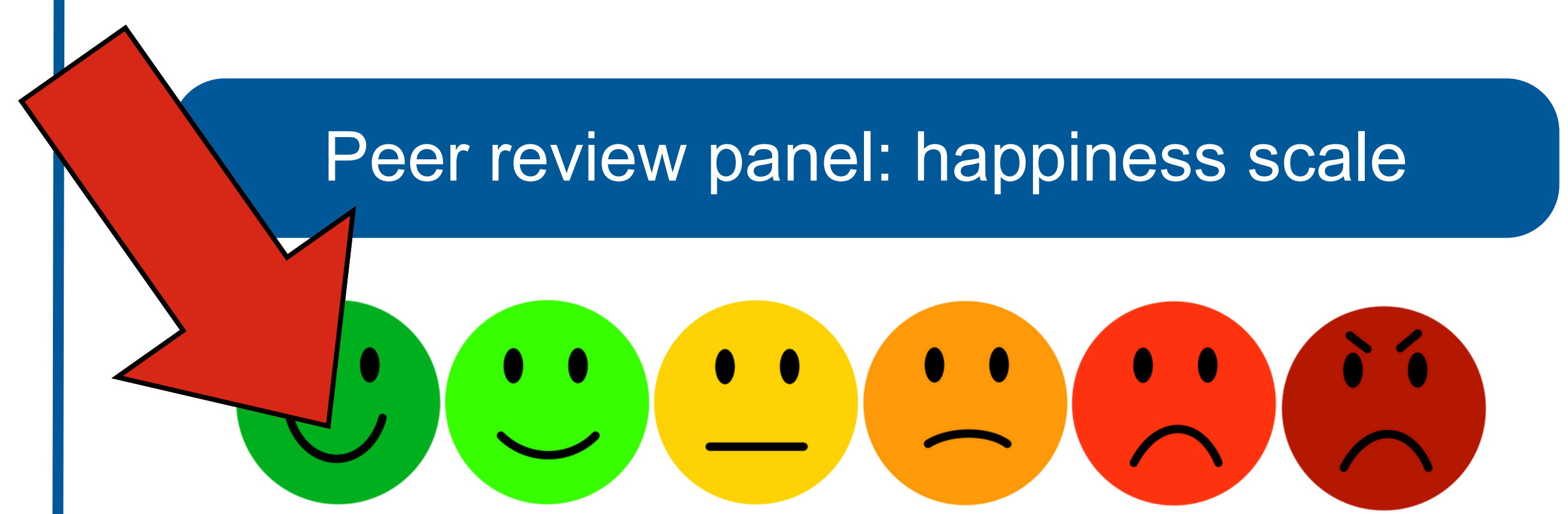
Graph 1 Anonymised breakdown of regional scoring by Peer Review

Generally, areas of best practice identified included:

- presence of multi-disciplinary teams
- initial resuscitation and trauma pathways
- care on the wards and initial rehabilitation

Areas of concern across regions identified included a need to:

- improve equity of care for patients who aren't admitted to a trauma ward
- better utilise and streamline resources
- ensuring vacant posts are filled in accordance with minimum requirements



Conclusions

The review found that trauma services in Scotland, while still immature, deliver high quality, person-centred patient care. Many examples of excellence and significant achievement were noted by the review panel.

A total of 107 recommendations for improvement were made, for the national network and for regions to take forward. Recommendations broadly fall into the following categories: education and workforce; equity of access; quality; and data and outcomes.

Some key themes for improvement at a regional and national level included:

- the need to bolster rehabilitation across regions
- an opportunity to better utilise data to inform improvement
- a review of the complex set of minimum requirements which define the STN
- the opportunity to build national trauma education programmes to support service delivery and enhance patient outcomes

All regions were provided a breakdown of their findings and recommendations. Each network will work to implement the recommendations through regional action plans, with national recommendations being taken forward by the STN Programme Team and working groups. Progress will be monitored at a national level through STN governance as part of its strategic framework.

References

- 1 Peer Review Guide: Major Trauma Networks of England & Wales, August 2022.
- 2 South Wales Trauma Network: Peer Review Final Report, October 2022.

Peer review panel memo to regions
 In all regions there were challenges in identifying patients who may have traumatic injuries but haven't presented as trauma patients. For example, if an elderly person has fallen and suffered multiple fractures they may present through a medical route and will not be identified as major trauma. It is recommended that all services should be more effective at offering patients such as these, the complex care and rehabilitation offered to trauma patients.