



## Minutes

Meeting:	AGM and APPG on Intensive Care		
Location:	Room P, Portcullis House, Westminster, SW1A 2LW		
Date:	24 January 2023	Time:	3:00pm – 5:00pm
Chair:	Sir Gary Streeter MP		

No	Item
1.	<p><b>Welcome and introductions</b></p> <p>All were welcomed to the All-Party Parliamentary Group on Intensive Care.</p>
2.	<p><b>Annual General Meeting</b></p> <p>Chair, Sir Gary Streeter MP opened the AGM and confirmed that the requisite number of parliamentarians were present for quorate to be met, listed below.</p> <ul style="list-style-type: none"> <li>• Conservative Sir Gary Streeter MP</li> <li>• Labour Rachael Maskell MP</li> <li>• Conservative Sir Desmond Swayne MP</li> <li>• Conservative Natalie Elphicke MP</li> <li>• Conservative Robbie Moore MP</li> </ul> <p><u>Election of officers</u></p> <p>The following officers were re-elected to their roles as Vice Chair(s) on the APPG:</p> <ul style="list-style-type: none"> <li>• Crossbench Peer – Baroness Finlay of Llandaff</li> <li>• Crossbench Peer – Baroness Watkins of Tavistock</li> <li>• Plaid Cymru Peer – Lord Wigley</li> </ul> <p><u>Election of Co-chair</u></p> <p>Former Vice Chair Rachael Maskell MP (Labour) was elected as the APPG’s new co-chair alongside Sir Gary Streeter MP.</p>
3.	<p><b>To agree minutes of the last meeting, 19 July 2022, and to receive an update on the actions</b></p> <p>The minutes of the last meeting were agreed as an accurate reflection of the discussion.</p> <p>The chair provided an update following an internal planning meeting, 6 September 2022. The actions included writing to the NIHR about commissioning research in to post ICU patient outcomes, hosting today’s AGM and winter APPG meeting. A draft timeline for inviting the Secretary of State for Health and Social Care was also discussed.</p>
4.	<p><b>Presentations and Q&amp;A – Intensive Care service standards, ICU staffing and patient care</b></p>

The chair introduced speakers Dr Paul Dean (PD), Consultant, Intensive Care Medicine, East Lancashire Hospitals NHS Trust and Michaela Jones (MJ), Matron, Cardiac ICU, University Hospital Southampton NHS Foundation Trust.

PD introduced the [Guidelines for the Provision of Intensive Care Services](#) (GPICS), which sets the standards for service provision in UK Intensive Care. Their importance for commissioning, planning and service delivery was noted. The resource includes standards and recommendations for sections such as workforce, clinical care and emergency preparedness. While there is significant variation in application nationally, meeting these guidelines benefits patients and provides the core conditions for staff to thrive at work. The next iteration, GPICS Version 3 is being developed by the Society and the Faculty of ICM and is planned for release in 2024.

MJ, noted current NHS Digital figures show almost 50K vacancies for registered nurses nationally and over 9000 medical vacancies. Variable provision of critical care therapies and pharmacy services were also noted. ICU nurses were noted as having the specialist knowledge, skills and expertise to deliver care to ICU patients with life threatening illnesses. These skills require years to learn, hone and apply which is why the retention of trained staff is so crucial. The timing, methodology and application of this specialist knowledge determines the quality of patient care and the efficient running of ICU services. Unfortunately, conditions at work mean that skilled staff are leaving. Intensive care is critical to hospital care and ICU staff are called upon for their expertise beyond the walls of the ICU.

Burnout, moral distress, staff sickness and increased workloads were all noted as contributing factors to the current workforce crisis. A study referenced found that nearly half of ICU staff were likely to meet the threshold for PTSD and an increase in violence and aggression towards staff has been noted. Staff shortages in ICU has seen an increase in theatre cancellations and increased waiting lists.

Key points in the Society's [workforce statement](#) published 9 January 2023 were noted:

- There is absolute adherence to GPICS critical care standards across the UK
- There is adequate and sustainable resilience built into the workforce to prevent the dilution of staffing standards
- The discharging of patients from critical care to wards must be given sufficient priority
- Critical care must have adequate and sustainable plans for the retention, recruitment, education and training of critical care staff

#### Q&A and discussion:

The following items of discussion were raised with invited speakers and those attending this portion of the meeting in-person and virtually.

- The importance of retaining experienced staff in ICU, recruitment and the appropriate skills-mix

MJ noted that some regions more than others nationally are facing significant challenges to fill vacancies. The cycle of repeatedly recruiting, training and embedding new staff creates an additional burden for existing staff.

Newer staff lack the practical experience to navigate their roles and surroundings as efficiently as long serving members of the team can. Like any skill or competency, the instinctiveness comes with experience which is not necessarily found in a junior or agency workforce .

Dr Shondipon Laha(SL) joining virtually, commented that without experienced staff, you have delays and are more likely to consider different medications to manage delivery of patient care. He added that many consultants are moving sideways to jobs that are less stressful.

Rachael Maskell MP acknowledged the trauma that ICU staff have experienced in treating patients with increased mortality and particularly during COVID-19 and asked if we are at the tipping point. Attendees agreed that we are at risk of this tipping point by losing experienced staff.

- Staff safety and dispute resolution

Baroness Finlay enquired whether the Mental Capacity Act was included within the guidelines and asked that given a general increase in violence against NHS staff, whether mediation or other interventions were available?

PD noted that the Mental Capacity Act is explicitly mentioned in a few sections in GPICS and is also implemented into practice. However, the ICU setting is centred around the best interests framework. Additionally disputes in adult ICU tend to be less frequent and less contentious than in paediatrics. Although mediation is an option, Adult ICU's aim to resolve concerns internally due to capacity and before reaching the stage of mediation. Dr Zudin Puthuchearu (ZP) noted that aggression can emerge where families feel frustrated that staff are not able to meet their needs as quickly as they would like. What makes a difference is the judgement and communication soft skills that experienced staff develop over time, to either help avoid a disagreement or deescalate it quickly.

- Facilities for staff delivering care and supporting families

Baroness Finlay pointed to the Netherlands where staff are provided appropriate space and facilities to take a moment when needed and/or debrief following particularly difficult cases or after delivering tough news to family and relatives.

MJ noted that there is variation across the country in the type of staff facilities that are provided. Some units don't have separate rest spaces and/or separate tea/coffee/bathroom facilities while others do. Kate Tantam (KT) added that the infrastructure is not good enough and questioned how staff can be retained without investing in them.

- Access to administrative support, HR support and facilities

Baroness Finlay enquired whether leads in ICU had access to the appropriate support to deliver services. While administrative support and HR fall outside clinical delivery they make a difference to the overall function and efficiency of a service.

Attendees noted:

- access to admin support staff varies significantly, and often is first to go when cost saving is considered.

	<ul style="list-style-type: none"> <li>○ access to Facilities services and resolving repairs is often time consuming and challenging.</li> <li>○ cleaning services are often outsourced which causes a challenge when issues arise.</li> </ul> <p>Chair Gary Streeter noted the APPG’s main aim is to progress discussions and make an ask of government. The following recommendations of government were raised:</p> <ul style="list-style-type: none"> <li>● the resource and investment to apply standards equitably</li> <li>● confirmation that a dilution of standards will not be accepted. They are fundamental to the retention of staff and patient safety.</li> <li>● the resource to address both staff retention and recruitment.</li> <li>● a national quota, assessing how many beds there are nationally and making sure they are in the right place and staffed by the right people.</li> </ul> <p>The Society’s President, Dr Steve Mathieu (SM) emphasised that both staff retention and recruitment are required. He added that an open discussion is necessary regarding workforce and about the number of ICU beds there are nationally, which fall below European counterparts.</p> <p>The chair thanked speakers PD and MJ for their presentations and attendees for their contributions to this important discussion.</p>
5.	<p><b>Summary of actions and next steps</b></p> <p>The chair recommended that the APPG’s officers reflect on what has been heard today and reconvene for a closed meeting in February. The meeting will also be used to agree the pathway for inviting the Secretary of State for Health and Social Care and confirm the next date of the APPG.</p>
6.	<p><b>AOB and date of next meeting</b></p> <p>Chief Exec Sandy Mather noted the ongoing consultants dispute which is adding increasing risk to services. Achieving a resolution is important alongside the current nursing and AHP workforce pay discussions.</p> <p>The date of the next meeting will be confirmed in due course.</p>

## In attendance

Name
Sir Gary Streeter MP (Chair), Rachael Maskell MP, Robbie Moore MP, Natalie Elphicke MP, Sir Desmond Swayne MP, Baroness Finlay of Llandaff, Lord Wigley, Rebecca Smith, Sandy Mather, Steve Mathieu, Shondipon Laha, Paul Dean, Michaela Jones, Alex Day, Asha Abdillahi, Daro Iizuka Bjayou, Mani Rai, Kate Tantam, Zudin Puthuchearu

## Apologies

Name
Stephen Webb, Baroness Masham of Ilton, Baroness Watkins of Tavistock