

Welcome to the first ABPN newsletter of 2019 which we hope will be of interest to members and we wish you all a very Happy 2019.

The Association held their 79th Annual General Meeting on 24 October 2018 at the Lighthouse in Wolverhampton. The Association has recently seen the departure of two key members of the Governance and Development group - Rory Farrelly who has been the Association's Chair/President for a number of years and Bernie Carter who has generously shared her insight and expertise in guiding the development of the Association's Journal as the inaugural Editor in Chief. We look forward to working with Philip Darbyshire – Bernie's successor.

Members are urged to notify any change of their personal data - name, address, Bank, Bank account name / number or sort code as soon as possible to maintain accurate records. It is also important that we have up to date email addresses to maintain contact with members – our Membership Services Coordinator can be contacted at membersabpn@yahoo.co.uk.

Accounts for 2017 have been externally verified, final figures for the current account are: **Income** for the year was £ 12 765; **Expenditure** for the year was £11 036.25.

The following individuals were elected to officer roles:

Chair/President: Katrina McNamara
Finance Officer: Norman Long
Membership Services Coordinator: Jim Robinson
Newsletter Editor: Jean Robinson

The Governance group are currently in the process of revising the Constitution. The constitution being reviewed and will be presented at the AGM for approval. The proposed draft is available on the website, with members comments welcomed

The next AGM will be held on 27 March 2019, all members are welcome to attend the meeting where we will be considering amendments to the Association's Constitution.

The AGM is to be held on Wednesday 27 March 2019 at 2pm Spotlight Lounge, the Grand Theatre, Lichfield Street, Wolverhampton WV1 1DE, <https://www.grandtheatre.co.uk/> . Parking is available at the Civic Centre Car Park and the railway station is about 5mins walk away <http://www.wolverhamptonart.org.uk/>

Members are invited to submit items for discussion at the AGM, we are also seeking nominations for the officer roles, or if members would prefer not to have a specific role, there is the opportunity to become a member of the Governance and Development Group without portfolio to consider which role would be most suitable.

If you have any comments about the newsletter or wish to get in touch please do so:

Jean Robinson
Clinical Nurse Specialist Paediatric Dermatology
Clinic 4 Children's Outpatients, 7th Floor
Royal London Hospital Whitechapel London E1 1BB
0203 594 1547

Jean.Robinson@BartsHealth.nhs.uk Jean.Robinson6@nhs.net

Well Child's 11 Principles for Better training

"WellChild's 11 Principles for Better Training"; guidance for health and care professionals on the development and delivery of training for unpaid carers.

In August 2015 WellChild coordinated a UK training summit to review practice in the training of unpaid carers to support children and young people with exceptional health needs. The summit highlighted a lack of guidance for operationalising education, particularly for unpaid carers, and the challenges faced. The summit also explored the lack of consistency and equity across the country and while it highlighted some excellent practice, this was not widespread. To further supplement the level of knowledge around the current state of education, families receiving training and professionals delivering training were invited to take part in surveys. The findings of this work further supported and reflected those from the training summit.

Using information gathered from the summit and surveys a working party was set up from members of WellChild and the WellChild Nurse network, led by Joanna Keating from Imperial College Health Partners to address this inequity. The group produced a framework to provide guiding principles for health and care professionals on the development and delivery of training for unpaid carers - WellChild's *11 Principles for Better Training* which include a foreword from Angela Horsley, Head of Children, Young People and Transition at NHS Improvement. The vision is for these principles to be adopted by all those involved in the training of families and unpaid carers. You can share these with your networks. Further resources and guidance will be released in 2019 and we will keep you updated on this important piece of work.

Tel: 01242 530007

Direct: 01242 548766 www.wellchild.org.uk

Neonatal Nursing – are you interested?

Work is currently underway looking at the RCN career, education and competency framework for neonatal nursing in the UK and the ABPN has been approached to see if a member would like to be involved in this work. Neonatal nursing has a considerable number of nurses approaching retirement from what is recognised as a highly pressured and emotionally draining speciality. There is a shortfall in the number of appropriately trained nurses and the original documents which focused on nursing skill sets and competencies probably needs to be worked on to perhaps include recommendations on staffing numbers and diversify the workforce. Interested in being invoked in the working group? Please contact: Doreen Crawford Nurse Consultant and Support Editor of NCYP journal doreen@crawfordmckenzie.co.uk

International Neonatal Nursing Conference If you're interested in neonatal nursing this conference may also be of interest to you: INAC 2019 – 5th International Neonatology Association Conference (INAC) which will be held in Tijuana, Mexico, 12-14 June, 2019. <http://2019.worldneonatology.com/>

NICE Guidance

The clinical guideline on Child maltreatment: when to suspect maltreatment in under 18s (NICE guideline CG89) has been checked by NICE for the need for update.

Medtech Innovation Briefing (MTB) to support NHS and social care commissioners and staff who are considering using new medical devices and other medical or diagnostic

technologies.

October 2018 MTB [Serve-n with Neurally Adjusted Ventilatory Assist \(NAVA\) for babies and children](#)

Summary:

- The **technology** described in this briefing is the Servo-n with Neurally Adjusted Ventilatory Assist (NAVA). It is used for babies and children up to 30 kg who need mechanical ventilation.
- The **innovative aspects** are that NAVA detects and uses electrical changes in the diaphragm muscle to detect the patient's respiratory drive with the aim of synchronising ventilation. Synchronisation reduces the risk of damage to young or diseased lungs from assisted ventilation.
- The intended **place in therapy** would be for mechanical ventilation in neonatal and paediatric intensive care units. The optimum place in therapy is uncertain.
- The **main points from the evidence** summarised in this briefing are from 4 studies, including 2 randomised controlled crossover trials, 1 randomised controlled trial (RCT) and 1 systematic review involving a total of 415 babies and children in paediatric and neonatal intensive care units. The systematic review and 1 RCT showed that Servo n with NAVA improved patient-ventilator synchrony.
- **Key uncertainties** around the technology are that the evidence base is still developing and that it is unclear which patient groups are most likely to benefit.
- The **cost** of a Servo n ventilator is £28,000 per unit. A NAVA module that has a list price of around £6,300 (both exclusive of VAT) is also needed. The single-use NAVA catheter, which incorporates a feeding tube, costs £145. The **resource impact** for the NHS would be greater than standard care. This may be offset by more intensive care capacity being released if the evidence supports improved outcomes.

NICE Papers currently under consultation: Infant, children and young people's experience of healthcare:

The Child Health Academy

The Child Health Academy provides relevant and interesting CPD modules for health professionals involved in postnatal and paediatric care, including GPs, health visitors, paediatric and nursery nurses, paediatricians and school or practice nurses. Topics cover a range of paediatric areas, from nappy rash to nutrition. We've carefully selected leading academics to review each module, so you can be confident that what you're learning is reliable, referenced and recent.

The Child Health Academy is brought to you by Lifecycle Marketing, the publishers of Emma's Diary and parenting website, Families. We've been a trusted partner in healthcare education for more than 26 years, working alongside professional health bodies and Royal Colleges. Select a free CPD module from our wide choice of paediatric and postnatal subjects. Perfect for children's nurses, GPs, health visitors, nursery nurses, paediatricians and school nurses. Select a module for more information

You can currently access modules on Nappy rash from treatment to prevention, dental hygiene, infant skin, sleep positions, car safety, eczema – optimising emollient use and issues around Vitamin D. Email: info@healthprofessionalacademy.co.uk

Laser Toys

The College of Optometrists is encouraging parents to be vigilant about any toys containing lasers and reminding parents that lasers can be a danger to vision. It is warning that laser pointers are not toys and should not be given to children to play with, and that parents should only buy toys containing a laser from reputable retailers.

Daniel Hardiman-McCartney, Clinical Adviser at The College of Optometrists, explains: "Lasers used to be confined to sci-fi films but in the last few years, they have become readily available, relatively cheap and increasingly powerful. Many are marketed for children, and you may be forgiven for thinking they are nothing more than a cheap harmless novelty, However laser pointers are not toys and can be dangerous. Curious young children have accidentally shone laser pointers at their friends, or stared into the beam, resulting in eye damage."

Don't let children play with laser pointers, and check the gifts children receive to ensure they are safe. If you choose to buy a toy with a laser, please make sure you buy it from a legitimate source to ensure it meets the necessary safety standards. Toys should have a CE mark on them to ensure a level of quality, but it is important you buy the toys from a trusted source to ensure the marking is genuine. "If you think you have looked into a laser you should consult your optometrist or GP who will test your sight, examine your eye and, if necessary, refer you to a retinal specialist. If you have it, it is useful to take the laser with you, to give your practitioner as much information as possible."

Lasers in toys are increasingly commonplace – and can be found in toys such as guns, star pointers, light-sabers and spinning tops that project laser beams, the lasers should be class 1, less than 0.39mW strong. However, some toys purchased from non-legitimate sources, such as online marketplaces or temporary market stalls, have been found to contain much stronger lasers, in some cases hundreds of times stronger, which can be hazardous for eyes/eye eight when viewed directly. Laser pointers are much stronger, designed for professional use, and should never be used as a toy. These a pose a real risk to eye sight, with some as strong as 1000mW and those designed at pointing at stars up to 6000mW. If shone directly into the eye, a high-powered laser is capable of producing heat that can cause serious damage to the back of the eye in a matter of seconds. In severe cases, a burn to the retina can cause scarring, leading to permanent impairment of sight. The effects are often instant, although symptoms may progress in the hours after exposure, and recovery can take months, even in mild cases. Currently, strong lasers **are not covered by the strict safety rules and regulations of the EU.**

Children's Hospices and Funding

NHS England announces £25 million boost for children's hospices

NHS England will increase funding for children's hospices to as much as £25 million a year, chief executive Simon Stevens announced. Medical advances mean the NHS can help seriously ill children and young people with more complex health issues live longer, more fulfilling lives. NHS England's hospice grant programme currently provides £11 million a year for children's hospices, helping to provide care and support to children and their families close to home in their final days.

Over the next five years, as part of the NHS long term plan, additional funding will be

available each year, increasing by up to £7m a year by 2023/24, if Clinical Commissioning Groups also provide additional match funding. NHS England funding will ramp up over the next five years so that up to £25 million is spent on hospices by 2023/24.

World health Organisation and Migrant and Refugee Health

WHO has recently launched a technical guidance series on the health of refugees and migrants. Produced in collaboration with the European Commission, each publication addresses a specific aspect of the health of refugees and migrants by providing tools, case studies and evidence to inform practices and policies to improve their health. This technical guidance series complements the forthcoming "Report on the health of refugees and migrants in the WHO European Region", which will be published online in the first quarter of 2019.

Health of refugee and migrant children

When considering health and health-care interventions for migrant children, areas that need specific attention include their diverse backgrounds, whether they are unaccompanied and separated from family, whether they have been trafficked, and whether they have been left behind.

This technical guidance presents policy considerations for promoting refugee and migrant children's health and well-being, and particularly their mental health. It includes an intersectoral approach that targets risk factors at the individual, family and community levels. It emphasizes the important role of national/local governments in fostering or hindering equitable living conditions for refugee and migrant children in the areas of housing, health-care services and education.

Improving the health care of pregnant refugee and migrant women and newborn children

Being a migrant can be considered a risk factor for poorer maternal and newborn health outcomes. This technical guidance identifies problems and entry points for interventions for maternal and newborn health among refugees and migrants in the Region. It outlines policy considerations for 4 main areas affecting refugee and migrant maternal and newborn health:

- individual health status;
- accessibility of health care;
- quality of care; and
- health-care policy and financing systems.

Mental health promotion and mental health care in refugees and migrants

The complexity and stress of migration are related to events before departure, during travel and transit, and after arrival. Consequently, refugees and migrants can suffer from mental disorders, although prevalence is highly variable across studies and population groups.

This technical guidance reviews the prevalence of some disorders such as post-traumatic stress disorder and depressive and anxiety disorders. Based on the best available evidence regarding risk factors and areas for intervention, it identifies 8 priority action areas for consideration by policy-makers regarding the mental health of refugees and migrants.

Contact us at: euphame@who.int

Dr Santino Severoni, Coordinator
Public Health and Migration
Division of Policy and Governance for Health and Well-being
WHO Regional Office for Europe
UN City, Marmorvej 51
DK-2100 Copenhagen, Denmark
Email: severonis@who.int

National Confidential Enquiry into Patient Outcome and Death (NCEPOD)



NCEPOD has published a new report - Cancer in Children, Teens and Young Adults - 'On the Right Course?' This report summarises a review of the care received by children, teens and young adults who died or went to critical care within 60 days of receiving systemic anticancer therapy. The report can be accessed via the website.

NCEPOD Ground Floor Abbey House 74-76 St John Street London EC1M 4DZ
T:0207 251 9060 W:www.ncepod.org.uk

Study Days/Conferences

The ICH Events team will be holding the **Paediatric Gastroenterology Study Day for Nurses** at the Royal College of Nursing on the **8th of February, 2019**.

Course title: The Paediatric Gastroenterology Study Day for Nurses
Date: **Friday 8th February 2019**
Location: Royal College of Nursing
Cost: Various fees apply depending on the number of days being attended.

Brief description:

This day is aimed at Paediatric Nurses in Primary and Secondary Care, as well as providing an update for those working in specialised Gastroenterology areas.

Contact ICH Events: Tel. +44 (0)207 905 2699; e-mail ich.events@ucl.ac.uk

Link to the event: <https://www.ucl.ac.uk/child-health/events/2019/feb/paediatric-gastroenterology-study-day-nurses>

ABPN Member Co-ordinator

Jim Robinson can be contacted on membersABPN@yahoo.co.uk so feel free to drop him a line. Please don't forget to include your email address in any communications as we still only have addresses for a few members and please remember to update us with any changes of address.