

	<p>knowledge of the NAB membership. It is anticipated that bladder guidelines should be developed next.</p> <p>ii. RCN</p> <p>RCN wish to recognise the guidelines as MASCIP neurogenic guidelines. They have Excellent in Continence guidelines – which could form a quick review as it stands. RCN wish to be included in the bowel guideline development. Launch date of November 2018 is manageable but the final draft proof must be read by MASCIP. DT to email Alison Lam, NAB Chair to ensure that the MASCIP SCI section is SCI specific. An accredited editor is to review.</p> <p>b. Weight Management</p> <p>Launch planned for Conference 2017. DT has been trying to liaise with lead for final draft. Sponsorship is still to be established and may be easier to pursue when once a draft is seen</p> <p>c. Vocational Rehab Guidelines- SC</p> <p>Lynne Carrick-Leary will print copies ready for the conference. Tweaking of format is needed before uploading on website.</p> <p>d. Pain Management Guideline Review – KJ</p> <p>Rebecca Boorman is happy to be involved and will be available at the beginning of next year. A shared practice event is considered optimal way to progress. ES may be able to assist with this. Jacqueline Webb could be approached to sponsor this event – venue and admin resource required. LL suggested a survey monkey is a positive tool to gather information for an event. Canadian Pain Management Guidelines are very good and could inform our project..</p> <p>e. Older Adults – EL</p> <p>EL has more work to do prior to review by PH who will then send to DT for a first draft print for the conference. Re-launch imminent.</p> <p>f. Patient Education - SEE POINT 14</p> <p>g. Bladder</p> <p>MASCIP wish to develop SCI bladder guidelines. Liaison with Tracey Geddis from s CA to ask SIA about sharing their 'Agreed to'.</p>
9	<p>Spinal Services CRG</p> <p>Service review is complete. DB is giving the response on behalf of SIA and MASCIP. 22 recommendations are awaiting sign off. SIA supported NHS England with a day to present the Peer Review, but they are now chasing publication of the report. SCIC's have received individual reports. Nigel Henderson has also provided feedback with points raised from CRG SCI sub group meeting. The SCI service specifications need to be re-written. A group has met to start this process. It is unlikely that there will be additional NHS money to implement recommendations eg staffing. PH said that the Glasgow review was built on our peer and strategy review and is now a 5 year plan of the Scottish Service Review. This appears a much clearer process than England.</p>
10	<p>SCI UK Alliance</p> <p>Next meeting is 1/11/17. Organisation aims to be the 1st contact point for SCI matters at a strategic level.</p>
11	<p>Community Bowel Management Practice – KC</p> <p>KC experienced concerns regarding the geographical discrepancies in working practices of District Nursing Teams. For instance: Place A – do bowel care and train everyone. Place B – refuse, despite being adjacent. SIA have been investigating the background to this discrepancy and whether related to staffing and competencies. Bowel management needs to be on current student nurse curriculum but this does not help patients now. Some Agencies have issues too and some Community Nurses will not do bowel care. The RCN Excellence in Contience Care document has a paragraph on bowel care relating to SCI care. CA highlights a Patient Safety Alert should be raised. MASCIP newsletter should highlight course of action to get professionals to contact DB or CA. Evidence is required to push this forward. There could be resource on the website and a link to the form. Patient and family</p>

	<p>can fill it in. There are clinical support tools in CHC meetings. Datix could be made through the hospitals and Patient Safety Alert. Sue Woodward at RCN could work with them. Could go in RCN bulletin.</p> <p>Further action to be taken.</p>
12	<p>Patient Education event with Aspire</p> <p>40 attended this event. Feedback was positive. Aspire sponsored the event following on from the Shared Practice Event. Six SCIC's were represented. A summary will follow but briefly some points to consider:</p> <ul style="list-style-type: none"> • Tools and resources • Troubleshooting Apps for clients • HCP own education. <p>Brian Carling, Chief Executive of Aspire proposed Aspire could collaborate with Back up to do Apps and useful videos. SIA could support staff education. MASCIP could create links on website. To start, MASCIP could facilitate getting interested parties together to discuss. A clear format/guideline is required that can be used at every SCIC. Currently there are many different methods and ways of giving patient education. KL to feedback at the Conference. DT to write to Christine Robinson to thank her.</p>
13	<p>MASCIP Conference 2017</p> <p>11 presentations received. Draft programme presented. Delegate booking forms are coming in. Six exhibitors to date – more suggestions given.</p>
14	<p>MASCIP Conference 2018</p> <p>Date for next year to ready for the conference. Title: SCI – Below the belt. Conference to be related to bowels, bladder, sexuality/sexual function.</p>
15	<p>Paul Kennedy Bursary</p> <p>This to be re-launched at the Conference and put out on the website.</p>
16	<p>Link Workers</p> <p>Thank you to CA for the contacts that she has passed to DT. More work to be done to identify Link Workers.</p>
17	<p>Committee Membership & AGM</p> <p>All standing for re-election. Representation still required from other SCIC's. Only Dublin, Stoke, Stanmore and Sheffield represented.</p> <p>Roles to date:</p> <ul style="list-style-type: none"> • DT- Chair, Conference organiser, MASCIP representative on CRG and SCI UK • PH - Vice Chair, NICE, acute SCI management • GK - Treasurer, SCI UK Rep • LH - Secretary, Conference organiser, Membership • EL - Older persons guidelines, patient education guidelines • CA - Bowel management policy, link workers • DB - Newsletter, SIA representative • KC - Newsletter, website, patient education guidelines • KJ - Sponsorship, pain guidelines • ES - Weight management guidelines, pain guidelines (TBC) • AW- Sponsorship, community bowel management • LL - Bowel guidelines, NAB representative • CT - To take on Membership database <p>New roles: Facebook, Governance – Twitter (ES tbc)</p>
18	<p>Any other business</p> <p>PH mentioned World SCI Day – 5/9/18. MASCIP need to ensure this is highlighted and profile raised for 2018.</p> <p>CA – suggested the idea of major trauma centre representatives joining the committee.</p> <p>EL – Nursing home care for a young parent – needs consideration. DB – A big campaign</p>

has begun. He explained the current situation in detail. Comparative care package is what is necessary. If EL's case wanted to be a legal case then that would be good. This is on the agenda for the next SCI UK meeting.

PH – raised an observation that vented patient referrals have dropped. NICE has expanded into budget issues, which may link into national patient safety. The APPG is being developed in 2018 to input into CRG agenda. Issues include: vented patients, Nursing home versus 24hr care at home, CCG funding and CHC funding.

**Dates of next meeting 22nd February 2018 at SIA HQ, Milton Keynes
10.30pm – 4.00pm
Future dates:
14th June 2018
18th October 2018**

MASCIP CONFERENCE: PRE-CONFERENCE MEAL 21st NOVEMBER 2018 7PM

MASCIP CONFERENCE: 22nd NOVEMBER 2018 8AM-5PM

**Dot Tussler
Chair**