

Scottish Paediatric Epilepsy Network (SPEN)

Annual Report 2020/21

Lead Clinician: Dr Andreas Brunklaus
Programme Manager: Michael Durkan
Programme Support Officer: Kirsty Young

Introduction

Epilepsy is the most common serious neurological disorder in children. In the absence of a Scottish paediatric epilepsy register there are currently no accurate prevalence figures for Scotland. It is estimated that the prevalence of paediatric epilepsy in Scotland is around 4,200 children and young people (SPEN GP Audit, 2005), with approximately 800 to 1,000 new diagnoses being made each year. The diagnosis of epilepsy is very complex and the misdiagnosis rate continues to range from 25 to 50%. A fatal accident inquiry into the sudden unexpected death of a young person with epilepsy in Glasgow highlighted the need for improved communication between GP practices and hospital services and the importance of developing joint care plans for individuals with epilepsy.

Since its inception, SPEN has been driving the implementation of evidence based, safe and effective epilepsy care for children in Scotland, underpinned by SIGN Guideline 81 “Diagnosis and management of epilepsies in children and young people” (published in 2005). This guideline is now in the process of being refreshed by SIGN and it is hoped it will be launch early in 2021/2022.

Care for children with epilepsy is available across Scotland through general paediatric services with support from tertiary specialists in Glasgow, Edinburgh and Dundee. Pathways for first seizures and ongoing epileptic seizures were developed by the network in 2007 and revised in 2017/2018. Scottish data in the UK-wide Epilepsy 12 audit of paediatric epilepsy services showed in 2012 and 2014 that Scottish epilepsy services for children and young people performed very well, in many regards better than comparable services in other parts of the UK.

Current position

SPEN delivered on almost all objectives agreed in the 2020/2021 work plan. A small number of objectives are taking longer to progress than expected due to the ongoing COVID-19 pandemic. In particular, this has affected objectives where there has been third party involvement such a charity and support groups or other NHS organisations who have had more pressing priorities and/or fewer staff due to furloughs. A full work plan update is available on page 8.

The cancellation of face to face events has had a big impact for SPEN. SPEN hosts a number of education and stakeholder events each year. These events not only ensure that stakeholders have up to date knowledge, they also allow for networking between teams and allow SPEN to engage effectively to ensure that the work plan continues to reflect member’s priorities. 2020/2021 saw all face to face meetings cancelled. All of these events have now been moved to virtual meetings which has involved substantial planning and additional work to ensure that education continues. While the virtual education delivered so far has been an overwhelming success it has not yet been possible to properly replicate the engagement of face to face meetings. This new approach will also require the SPEN education strategy to be refreshed.

Progress against network objectives in 2020/2021

1. Effective Network Structure and Governance

Formalise GP engagement – Better engagement with General Practitioners has been an objective of SPEN for a number of years, following a recommendation of the 2017 review. A previous attempt to engage directly with GPs was unsuccessful. However Paediatric Neurologists have historically provided education sessions to trainees via NES. There was no formal structure to these requests and they were dealt with on an ad-hoc basis. A formal arrangement has been agreed whereby NES will liaise with SPEN to facilitate these requests. It has not been possible to fine tune the process though as the sessions are currently on hold due to the COVID-19 pandemic.

2. Service Development and Delivery

Define “care planning” - The Paediatric Epilepsy Quality Standard, agreed by SPEN, defines that “each person is given a care plan with tailored information about their specific diagnosis, treatment options, prognosis and personal circumstances”. While it has been agreed that all Children with Epilepsy should have a Care Plan, there had been no agreed definition of the content. The refreshed Paediatric Epilepsy Nurses group met to consider the care plan. It was accepted that the format of this may differ in each health board, however, the content would be the same. There are two elements; firstly, a letter outlining the child or young person’s epilepsy and their treatment and secondly a care plan suitable to share with schools and respite care organisations etc. which would typically outline details of the child or young person’s epilepsy, treatment, first aid and psychosocial impact. This is in the process of being implemented, once this happens the impact will be evaluated.

Paediatric Epilepsy Nurse Specialist career pathway – The Epilepsy Nurses Association (ESNA) Paediatric Group, including members of SPEN, have been working to revise the Paediatric Epilepsy Nurse Specialist (PENS) Competency Framework first published in 2005 by the Royal College of Nursing (RCN). The focus of this work has been to move away from a commissioning approach to advancing the professional role of PENS by defining the competencies required at novice, competent and expert levels. The initial version of the document was reflective of the NHS England model and the SPEN nurses have undertaken significant further work to enable the competency framework to be applicable not only to Scotland but internationally. These revisions have been submitted to the ESNA Paediatric Group for consideration.

An objective to support implementation of the new SIGN guideline (2019-03) continues to be delayed as the guideline has still not been formally launched by SIGN. This is now expected in Summer 2021.

An objective to implement ‘Joint Clinic’ guidance in areas where joint clinics are the model of care was postponed as part of the NSS C-19 capacity planning work. An audit of current practice had been completed as a baseline and the project will be reinstated as capacity allows.

3. Stakeholder Communication and Engagement

Engagement with education sector – Following the SPEN review in 2018, where the Expert Review Group recommended that SPEN should engage with the education sector a number of attempts have been made to establish better links. Most recently a pilot

session with Aberdeen University, who are an Initial Teacher Training (ITE) provider, was agreed. The actual session has been postponed due to the disruption the education sector has faced in light of the COVID-19 pandemic. This will be picked up again and it is hoped a session delivered in 2021/2022.

A number of other communication and engagement objectives are on hold due to the COVID-19 pandemic. These include developing teenage specific SUDEP information (2020-04), taking forward a project with Scottish Ambulance Service (2020-06) and developing a patient experience questionnaire (2020-07). Although much of the initial work had already begun for these objectives it was felt that they should be postponed due to the COVID-19 pressures facing these partner organisations.

4. Education

Multi-disciplinary paediatric epilepsy study day – As with previous years the SPEN study day and member’s day were combined into one event. Due to the success of this approach, going forward these will be merged. This year’s member’s day was SPEN’s first attempt at a “virtual event” and was well received. In total 48 delegates attended this year’s event. Topics on the day included “Development and use of new technologies to facilitate epilepsy diagnosis and care”, “Adapting to the “new normal” and “Are you tuned in? The challenges of seizures identification in children with learning disability”. Following feedback on “Adapting to the new normal” an objective for 2021/2022 has been agreed to develop guidance based on what clinicians feel is suitable to be delivered going forward post COVID-19. Feedback was received by 16 delegates and a snapshot of the responses is included below: -

Delegates were asked where or not the event met its objective which was to update SPEN stakeholders on progress over the previous year and engage the wider membership on key network issues. 100% of attendees agreed with 81% strongly agreeing that the event met this objective

The event met it's objective

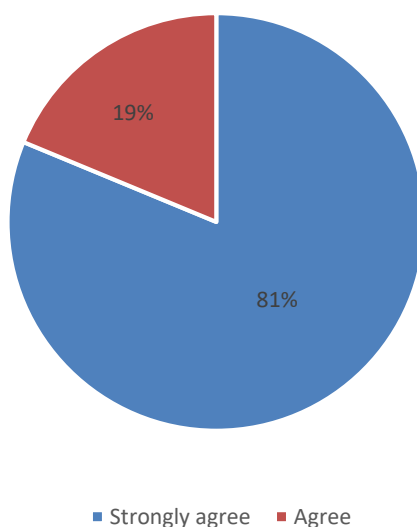


Figure 1 – event evaluation responses

Sessions on the day included a mix of education and stakeholder engagement. The feedback for individual presentations and the overall event was overwhelmingly positive. Two delegates in particular commented –

“Excellent event, inspiring presentations. I’ve always said how blessed we are to have such skilled and committed medics and nurses looking after CYPE in Scotland, and the event was further evidence of that in this most difficult year.”

“I came away from the meeting with such a positive vibe. Even with the exceptional challenges placed on patient care by the COVID-19 pandemic, at an individual and collective level, the SPEN clinicians has remained focussed and their response to these challenges have shown to be really effective.”

Local education road shows in DGHs aimed at general paediatrics: The original plan had been to host 3 roadshows aimed at general paediatrics. 3 sites had been identified and plans were in place for these events however in light of the COVID-19 pandemic and the NSS capacity planning work it was agreed that these events would be postponed until 2021/2022. One roadshow took place in Greater Glasgow and Clyde at their request, this event was attended by 35 delegates and presentations included an update on Epilepsy Syndromes, Epilepsy and COVID: Challenges & Opportunities and Peer Review.

Annual Scottish Research Day: The purpose of this event was to provide stakeholders with an update on current research taking place in Epilepsy. This event was attended by 76 delegates across paediatrics, adults and 3rd sector.

Only 14 responses were received to the post event evaluation. Of the 14 responses 100% agreed that this event met its objective to give an update on current research in epilepsy.

This year’s event was the first to take place virtually and was well received. One attendee in particular commented:

“From feeling a year ago that face to face conferences were greatly superior to a virtual format I have now changed my mind. The meeting went very smoothly and all speakers had completely mastered the technology. It meant I could easily attend whereas funding and travel costs may not have been possible for a real venue in another city. Miss meeting up with colleagues over coffee and lunch though. Thanks to all at SPEN/SEG for organisation.”

5. Audit and Continuous Quality Improvement

Pilot of data set: An epilepsy minimum core data set has been developed in conjunction with Information Management Service (IMS) as an alternative to Epilepsy 12. This minimum data set, which includes data such as date of initial presentation, date of diagnosis, confidence of diagnosis and access to nursing, has been piloted in Edinburgh to ensure that data can be easily collected and that the impact on clinician time is as

minimal as possible. The COVID-19 pandemic has delayed the implementation of this revised strategy, however it is planned that next steps will be agreed in 2021/2022.

Baseline audit for new pathways and quality standard: A baseline audit of the three SPEN pathways has been developed. This survey was developed on Microsoft Forms to allow for easy distribution and circulated via the Scottish Paediatric Society to reach the widest possible audience. Feedback so far has highlighted that while almost all General Paediatricians are aware of who their locally identified Paediatrician(s) with an Interest are, not all are aware of the SPEN pathways. An action plan is being developed, while a few tweaks to the pathways may be necessary the biggest action will be to better engage with general paediatrics to raise awareness.

Support for Psychology Added Value: Epilepsy Screening (PAVES): Following discussion around prioritising psychological support for children and young people with epilepsy at SPEN Network Members event, the PAVES project was established in 2016 to develop a psychological screening tool. Initially funded by the Edinburgh Children's Hospital Charity, a pilot commenced in NHS Lothian to develop an innovative protocol and pathway for early stepped intervention. The success of the pilot led to funding from the Realistic Medicine Fund to develop an electronic version of the tool which would enable further roll out of the approach. The development of the electronic version of the tool has faced a number of challenges but the project is now back on track. A website www.paves.scot.nhs.uk has been set up and the tool is being developed. It is hoped that the electronic version of the screening tool will be ready for piloting over the summer.

vCreate neuro: Seizure videos are a key element of the diagnostic process for paediatric epilepsy but there has been a long standing challenge around the storage of these videos within NHS systems. An opportunity arose in 2020 to pilot a system, already used in neonatology to share videos of babies in the neonatal unit with families, to allow families of children with epilepsy to share videos with clinicians. Clinicians register patients/ carers on the vCreate neuro system to allow them to securely share smartphone-recorded videos and associated metadata with their clinical team to asynchronously digitise diagnostic and therapeutic decision-making processes. This project is led by Prof Sameer Zuberi, Consultant Paediatric Neurologist in NHS Greater Glasgow and Clyde and member of the SPEN steering group. While not a SPEN project the network infrastructure played an important role in the development and highlighted the added value a network brings in supporting collaboration. Looking ahead SPEN aims to support the wider role out of vCreate neuro as part of the project to understand the "new normal".

Looking ahead

In light of COVID-19 a number of new technologies and ways of working have been developed. A short life working group is being set up to discuss agreeing guidance across Scotland on clinic setups (Face to Face, virtual and telephone) as well as integrating new technologies such as vCreate neuro into day-to-day working. SPEN are keen to ensure that patients are given a choice in this and want to make sure the needs of children and teenagers are addressed. This will also include evaluating the impact of virtual clinics and building on the "new normal" discussions that have taken place through the COVID-19 pandemic.

Finance

No costs have been incurred in this financial period. This is mainly due to the move to remote working which has resulted in meetings and events being held virtually.

WORKPLAN – 2020-21

Please ensure that the annual workplan reflects the agreed objectives in the current network strategic workplan.

All work objectives should be listed under the most appropriate heading. Headings correspond to the agreed network core objectives:

1. Design and ongoing development of an effective Network structure that is organised, resourced and governed to meet requirements in relation to SGHSCD Guidance on MCNs (currently [CEL \(2012\) 29](#));
2. Support the design and delivery of services that are evidence based and aligned with current strategic and local and regional NHS planning and service priorities.
3. Effective Stakeholder Communication and Engagement through design and delivery of a written strategy that ensures stakeholders from Health, Social Care, Education, the Third Sector and Service User are involved in the Network and explicitly in the design and delivery of service models and improvements.
4. Improved capability and capacity in epilepsy care through design and delivery of a written education strategy that reflects and meets stakeholder needs.
5. Effective systems and processes to facilitate and provide evidence of continuous improvement in the quality of care (CQI).
6. Generate better value for money in how services are delivered.

When defining network objectives please consider the NHS Scotland policy aims described in [Realistic Medicine](#), as well as the Institute of Medicine's six dimensions of quality, which are central to NHS Scotland's approach to systems-based healthcare quality improvement:

1. **Person-centred**: providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
2. **Safe**: avoiding injuries to patients from healthcare that is intended to help them;
3. **Effective**: providing services based on scientific knowledge;
4. **Efficient**: avoiding waste, including waste of equipment, supplies, ideas, and energy;
5. **Equitable**: providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and
6. **Timely**: reducing waits and sometimes harmful delays for both those who receive care and those who give care.

Key

RAGB status	Description
RED (R)	The network is unlikely to achieve the objective by the agreed end date.
AMBER (A)	There is a risk that the network will not achieve the objective by the agreed end date but progress has been made.
GREEN (G)	The network is on track to achieve the objective by the agreed end date.
BLUE (B)	The network has been successful in achieving the network objective to plan.

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 30 th September 2020	Anticipated Outcome	RAGB status
1. Effective Network Structure and Governance [linked to Quality Dimensions 3,4,5,6]						
2020-01	Explore options to formalise existing GP engagement delivered by Paediatric Neurologists		K Kamath Tallur; Steering Group	Formal arrangements agreed with NES to provide input to training	More effective network through involving additional key stakeholders	B
2020-02	Establish direct patient/family input. Beginning with refreshed getting involved leaflet being developed and handed out at clinics.		Kirsty Young	Request submitted to NSS comms. Awaiting input from comms. Carried forward.	More effective network through involving additional key stakeholders	A
2. Service Development and Delivery [linked to Quality Dimensions 1,2,3,4,5,6]						
2018-09	Define “care planning” (links with SPEN-2018-08)		Jo Campbell ; Celia Brand	Definition has been developed by the SPEN nursing group and agreed by the Steering Group.	Consistent practice in Scotland delivering patient-centred care planning	B
2018-13	Review epilepsy specialist nurse career path and develop a strategy for epilepsy specialist nursing in Scotland		Jo Campbell ; Celia Brand	PENS competencies agreed by nurses group. Agreed strategy has now fed back into UK group.	Consistent practice in Scotland delivering patient-centred care planning	G

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 30 th September 2020	Anticipated Outcome	RAGB status
2019-03	Support implementation of new SIGN guideline		Jay Shetty / Michael Durkan	Still awaiting SIGN guideline launch, this objective has been carried forward.	Delivery of improved and consistent services	A
2020-03	Continue to implement 'Joint Clinic' guidance in areas where joint clinics are the model of care building on survey of local centre arrangements		Mary Callaghan / Michael Durkan	Audit of joint clinic guidance complete. Further work postponed due to NSS capacity planning work. Carried forward.	Consistent application of joint clinics across Scotland to allow tertiary input close to home	A
3. Stakeholder Communication and Engagement [linked to Quality Dimensions 1,3,4,5,6]						
2020-04	Develop teenage specific SUDEP information		K Kamath Tallur; Steering Group	Carried forward due to capacity issues within 3rd sector partner.	Standardised, high quality information to inform families about SUDEP	A
2020-05	Hold an annual network members day		Michael Durkan; Kirsty Young	Complete	Effective dialogue with wider network membership to inform future work priorities	B
2020-06	Continue engagement with education sector by piloting a session in Aberdeen.		Jo Campbell ; Kirsty Young	Session agreed however delivery has been delayed due to pandemic.	More effective network through involving additional key stakeholders	A
2020-07	Ongoing review of information currently on SPEN website to		Kirsty Young	Ongoing.	Improved engagement with	G

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 30 th September 2020	Anticipated Outcome	RAGB status
	ensure it is relevant and up to date. Building on electronic newsletter.				both patients and professionals	
2020-08	Take forward actions agreed following engagement with Scottish Ambulance Service to improve communication.		Kirsty Young	Further meeting was cancelled due to COVID-19 pressures within both RHSC Edinburgh and SAS, rescheduled meeting to be agreed.	More effective network through involving additional key stakeholders	A
2020-09	Develop and pilot a patient experience questionnaire designed to understand what matters to patients and their families.		Kirsty Young	Scoping exercise has taken place to identify existing questionnaires. Survey on hold. Carried forward.	Improved engagement with patients and ensure SPEN objectives reflect patient priorities	A
4. Education [linked to Quality Dimensions 1,2,3,4,5,6]						
2020-10	Provide multi-disciplinary paediatric epilepsy study day for healthcare professionals		Michael Durkan; Kirsty Young	Complete.	Improved knowledge in childhood epilepsy for relevant healthcare professionals that either reinforce existing best practice or results in changes in practice	B
2020-11	Minimum of 3 local education road shows in DGHs aimed at general paediatrics	April 2019/ March 2020	Michael Durkan; Kirsty Young	Programme for roadshows agreed. One roadshow took	Improved knowledge in childhood epilepsy for relevant	A

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 30 th September 2020	Anticipated Outcome	RAGB status
				place in GG&C at their request. Further roadshows postponed as part of capacity planning.	healthcare professionals that either reinforce existing best practice or results in changes in practice	
2020-12	Ongoing support for the Scottish Paediatricians with an Interest in Epilepsy Group (SPIEG) and the re-establishment of Epilepsy Specialist Nurses Group	April 2019/ March 2020	Michael Durkan; Kirsty Young	3 SPEIGS meetings and 3 nurses meeting were held in 2020/21. Successfully adapting to virtual meetings.	Improved knowledge in childhood epilepsy for relevant healthcare professionals that either reinforce existing best practice or results in changes in practice	G
2020-13	Support for the Scottish Epilepsy Group's Annual Scottish Research Day.		Kirsty Young; Michael Durkan	Complete.	Improved knowledge in childhood epilepsy for relevant healthcare professionals that either reinforce existing best practice or results in changes in practice	B
5. Audit and Continuous Quality Improvement [linked to Quality Dimensions 1,2,3,4,5,6]						
2020-14	Pilot of data set developed in conjunction with IMS. Roll out following successful pilot.		Michael Durkan/ Claire Lawrie	Data set being piloted in Glasgow and Edinburgh	Identified service improvement projects based on emerging outcome data	G

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at 30 th September 2020	Anticipated Outcome	RAGB status
2019-12	Baseline audit for new pathways and quality standard		Ailsa McLellan / Michael Durkan	Audit complete. Objective to develop an action plan and refresh pathways and standards in 2021/2022 WP	Improved and more consistent service delivery in Scotland	G
2019-13	Continue support for PAVES rollout to further areas to address unmet need for mental health support.		Kirsten Verity	Work continues to support the project. On track to roll out a screening tool in 2021/2022	Improved and more consistent service delivery in Scotland	G
6. Value [linked to Quality Dimensions 1,2,3,4,5,6]						

WORKPLAN – 2021-22

Please ensure that the annual workplan reflects the agreed objectives in the current network strategic workplan.

All work objectives should be listed under the most appropriate heading. Headings correspond to the agreed network core objectives:

7. Design and ongoing development of an effective Network structure that is organised, resourced and governed to meet requirements in relation to SGHSCD Guidance on MCNs (currently [CEL \(2012\) 29](#));
8. Support the design and delivery of services that are evidence based and aligned with current strategic and local and regional NHS planning and service priorities.
9. Effective Stakeholder Communication and Engagement through design and delivery of a written strategy that ensures stakeholders from Health, Social Care, Education, the Third Sector and Service User are involved in the Network and explicitly in the design and delivery of service models and improvements.
10. Improved capability and capacity in epilepsy care through design and delivery of a written education strategy that reflects and meets stakeholder needs.
11. Effective systems and processes to facilitate and provide evidence of continuous improvement in the quality of care (CQI).
12. Generate better value for money in how services are delivered.

When defining network objectives please consider the NHS Scotland policy aims described in [Realistic Medicine](#), as well as the Institute of Medicine's six dimensions of quality, which are central to NHS Scotland's approach to systems-based healthcare quality improvement:

7. **Person-centred**: providing care that is responsive to individual personal preferences, needs and values and assuring that patient values guide all clinical decisions;
8. **Safe**: avoiding injuries to patients from healthcare that is intended to help them;
9. **Effective**: providing services based on scientific knowledge;
10. **Efficient**: avoiding waste, including waste of equipment, supplies, ideas, and energy;
11. **Equitable**: providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location or socio-economic status; and

12. **Timely:** reducing waits and sometimes harmful delays for both those who receive care and those who give care.

Key

RAGB status	Description
RED (R)	The network is unlikely to achieve the objective by the agreed end date.
AMBER (A)	There is a risk that the network will not achieve the objective by the agreed end date but progress has been made.
GREEN (G)	The network is on track to achieve the objective by the agreed end date.
BLUE (B)	The network has been successful in achieving the network objective to plan.

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at X	Anticipated Outcome	RAGB status
1. Effective Network Structure and Governance <small>[linked to Quality Dimensions 3,4,5,6]</small>						
2021-01	Develop a refreshed three to five year work plan for SPEN		Steering Group		Ensure network continues to deliver objectives that meet the network vision	
2. Service Development and Delivery <small>[linked to Quality Dimensions 1,2,3,4,5,6]</small>						
2019-03	Support implementation of new SIGN guideline		Jay Shetty / Michael Durkan		Delivery of improved and consistent services	
2020-03	Continue to implement 'Joint Clinic' guidance in areas where joint clinics are the model of care building on survey of local centre arrangements		Mary Callaghan / Michael Durkan		Consistent application of joint clinics across Scotland to allow tertiary input close to home	

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at X	Anticipated Outcome	RAGB status
2021-02	Begin “new normal” discussions – develop guidance based on what clinicians feel is suitable to be delivered going forward post COVID. This will include: <ul style="list-style-type: none"> Evaluating the impact of virtual clinics for both clinicians and patients / families Supporting the wider roll out of vCreate neuro across Scotland 		SLWG to be created		Delivery of improved and consistent services	
3. Stakeholder Communication and Engagement [linked to Quality Dimensions 1,3,4,5,6]						
2020-04	Develop teenage specific SUDEP information		Steering Group		Standardised, high quality information to inform families about SUDEP	
2021-05	Hold an annual network members day		Kirsty Young		Effective dialogue with wider network membership to inform future work priorities	
2020-08	Take forward actions agreed following engagement with Scottish Ambulance Service to improve communication.		Kirsty Young		More effective network through involving additional key stakeholders	
2020-09	Develop and pilot a patient experience questionnaire designed to understand what matters to patients and their families.		Kirsty Young		Improved engagement with patients and ensure SPEN objectives	

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at X	Anticipated Outcome	RAGB status
					reflect patient priorities	
4. Education [linked to Quality Dimensions 1,2,3,4,5,6]						
2020-06	Continue engagement with education sector by piloting a session in Aberdeen.		Jo Campbell; Kirsty Young		More effective network through involving additional key stakeholders	
2021-06	Minimum of 3 local education road shows in DGHs aimed at general paediatrics		Education group		Improved knowledge in childhood epilepsy for relevant healthcare professionals that either reinforce existing best practice or results in changes in practice	
2021-07	Ongoing support for the Scottish Paediatricians with an Interest in Epilepsy Group (SPIEG) and the Epilepsy Specialist Nurses Group		Kirsty Young		Improved knowledge in childhood epilepsy for relevant healthcare professionals that offers peer review and reinforced best practice	
2021-08	Support for the Scottish Epilepsy Group's Annual Scottish Research Day.		Kirsty Young; Michael Durkan		Improved knowledge in childhood epilepsy for relevant healthcare	

Objective Number	Smart Objective	Planned start/ end dates	Detailed Plan Available / Owner	Description of progress towards meeting objective as at X	Anticipated Outcome	RAGB status
					professionals that either reinforce existing best practice or results in changes in practice	
5. Audit and Continuous Quality Improvement [linked to Quality Dimensions 1,2,3,4,5,6]						
2021-09	Agree next steps for data plan following the pilot in Glasgow and Edinburgh		Jay Shetty; Joe Symonds		Identified service improvement projects based on emerging outcome data	
2021-10	Repeat service descriptor audit which previously formed part of the Epilepsy 12 audit		Data sub-group		Improved and more consistent service delivery in Scotland / More effective network through involving key stakeholders	
2021-11	Take forward next steps and any actions following the audit of SPEN pathways		Michael Durkan; Ailsa McLellan		Improved and more consistent service delivery in Scotland	
6. Value [linked to Quality Dimensions 1,2,3,4,5,6]						