



East Midlands Neonatal
Operational Delivery Network

ANNUAL REPORT 2018/2019



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Forward



Welcome to the first Annual Report for the East Midlands Neonatal Operational Delivery Network (EMNODN). This year has been an extremely busy one with a number of local and national priorities.

As the first year as a combined East Midlands Network, there has been much to do. Firstly, there was a requirement to establish a new Network Board along with new governance processes. The board has been formed of executive members from all the Network constituent trusts, with Chris Pallot becoming the new Network Chair.

The formation of a single Network has required amalgamation of several of the Network groups and the review of all the terms of reference. This joining of the North and South has been extremely successful with new and very interactive groups being formed. The North and South hubs continue to have separate Clinical Leads who work very closely together in order to provide adequate support to all the units. There are also separate Mortality Steering and Parent Advisory Groups which have not merged due to the work plan requirements for those groups.

With the continued uncertainty regarding long term funding for Operational Delivery Networks (ODN), the management team has continued throughout the year with a temporary structure. However, some clarity regarding the funding and Network structure is anticipated during 2019/2020.

The work to address the identified issues within the East Midlands capacity review has continued along with the East Midlands Specialised Commissioning team in the form of an oversight group. The recommendations from the report are all included in the 2018/2020 Network work plan, and are all being addressed within the required time frames.

The national requirements of the ODN have greatly increased since the production of the Better Births report, Better Newborn Care and the ATAIN (Avoiding Term Admissions into the Neonatal Services) findings were published. The ODN team have actively supported the six Local Maternity Systems (LMS's) within the East Midlands footprint, and have ensured that the neonatal priorities have been included in LMS plans. This collaborative working with maternity services has increased throughout the year and is undoubtedly leading to a far more joined up approach within maternity and neonatal services. The ATAIN principles are being embedded across the Network, with the establishment of an ATAIN working group and a very successful conference. Work is underway with the oversight and monitoring of the ATAIN action plans, and the plans to implement transitional care units, which form part of the CNST safety actions.

Finally may I take this opportunity to thank all the medical, nursing, AHP, and parent representatives for all your hard work and support. Without this support we would not have such a successful and collaborative network. I also wish to personally thank all the members of the Network management team, who have all gone over and above throughout the year to fulfil the requirements of the work plan and to ensure the continued success of the Network throughout this uncertain time.

We look forward to another successful and undoubtedly busy year with continued improvements in neonatal care provision.

Linda Hunn, Acting Director

Introduction & Welcome



In 2018/2019 we moved into our second year working as a single EMNODN with two clinical hubs. We have established a new board and have had several joint Clinical Governance Group meetings. Over the past year much of this work has focussed on aligning the two hubs, with particular emphasis on development of joint guidelines and quality improvement initiatives,



including the development of outreach services.

There have been a number of network subgroups that have been set up including ATAIN and the continuation of the existing Mortality Steering Group meetings. It is pleasing to see that the close clinical links which developed within CNN and TPN have continued with development of the new EMNODN.

Throughout this report you will see innovations that are being introduced across the Network. Many challenges remain; we still perceive that capacity, workforce and nursing education are the largest of these, and they remain complex issues.

We continue to work closely with commissioners and providers via the Neonatal Oversight Group to ensure that we meet the national target of 95% babies being cared for in the Network and are in the process of developing a network wide escalation plan.

At the end of 2018 there were a number of regional stakeholder days discussing the findings of the National Neonatal Review. We are working closely with the regional LMSs to ensure that there is equity with inclusion of the recommendations of the national neonatal service review within local service planning. We have worked closely with the network constituent units to develop outreach services following implementation of a CQUIN.

As we move through this year we will be aiming to work with services to improve individual and Network dashboards, aiming for consistent and high quality care throughout the Network.

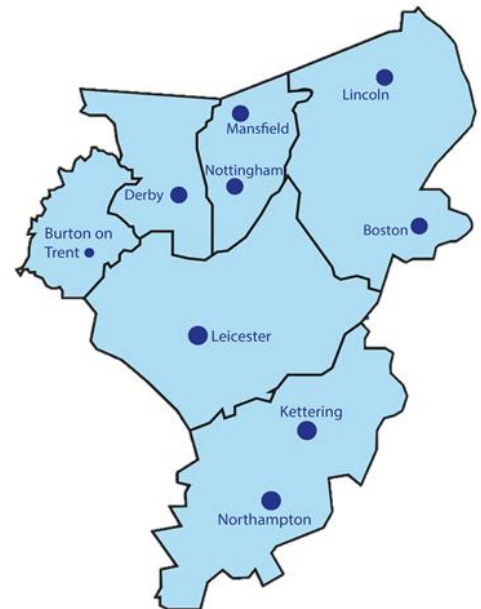
We also welcome Don Sharkey to the team who is working closely with maternity colleagues to try and ensure that, as far as possible, babies are born in the right place.

We would like to finish by thanking each and every member of the network units for supporting us and the EMNODN. As we go forward we will see change, but I am sure this will be for the good, and we look forward to continuing, and building new, relationships.

Joanna Behrsin, Clinical Lead EMNODN (South Hub)
Anneli Wynn-Davies, Clinical Lead EMNODN (North Hub)

Brief Background – National Context

The East Midlands Neonatal Operational Delivery Network (EMNODN) was formed in April 2018 following the amalgamation of the East Midlands Neonatal units into a single ODN. The EMNODN works across the constituent neonatal units and alongside other stakeholders in order to implement the requirements as detailed within the NHS National Service Specification (E08/S/a) for Neonatal Critical Care which encompasses Intensive, High Dependency and Special Care services.



Operational Delivery Network (ODN's) work in collaboration across professional and organisational boundaries in order to improve service delivery, and to ensure that mothers and babies receive their care in the right place, at the right time, and that it is provided by appropriately trained staff.

Robust clinical governance processes have been devised to ensure that this take place.

The Network Management Team works collaboratively with the Network constituent units within the defined governance processes, according to agreed pathways, and aims to develop common standards.

The constituent units, their clinical teams and board members are detailed below:

Trust	Unit	Board Member	Clinical Lead
University Hospitals of Leicester NHS Trust *	Leicester Royal Infirmary	Jon Currington Head of Tertiary Partnerships	Dr Jonathan Cusack
	Leicester General Hospital		
Nottingham University Hospitals NHS Trust *	Queen's Medical Centre, Nottingham	Tim Guylar Director of Integration	Dr Lleona Lee
	Nottingham City Hospital		
University Hospitals of Derby & Burton NHS Foundation Trust	Royal Derby Hospital	Anish Bali Divisional Medical Director	Dr John McIntyre (2018/2019) Dr Nigel Ruggins (2019)
	Queen's Hospital, Burton		
Sherwood Forest Hospitals NHS Foundation Trust	King's Mill Hospital, Mansfield	Lisa Gowan Divisional General Manager	Dr Simon Rhodes
United Lincolnshire Hospitals NHS Trust	Lincoln County Hospital	Mark Brassington Chief Operating Officer	Dr Conrad Bosman (2018/2019) Dr Ajay Reddy-Hande (2019)
	Pilgrim Hospital, Boston		
Kettering General Hospital NHS Trust	Kettering General Hospital	Polly Grimmett Director of Strategy & Partnerships	Dr Poornima Pandey
Northampton General Hospital NHS Trust	Northampton General Hospital	Chris Pallot Director of Strategy & Partnerships	Dr Fiona Thompson (2018/2019) Dr Nick Barnes (2019)

*Centre Neonatal Transport service host organisation

Key Innovations & Developments

- Formation of a new Network Board and appointment of a new Chair
- Revision and rewriting of all Network Governance processes
- Development of a Network risk register
- Revision of Network data sharing agreement
- Revision of exception reporting process
- Formation of joint East Midlands Clinical Governance Group
- Formation of South Hub Mortality Steering Group
- Review and agreement of Terms of Reference for all Network groups
- Launch of the East Midlands Neonatal ODN website
- Amalgamation of most of the old CNN and TPN guidelines into joint East Midlands guidelines
- Comprehensive review of nurse staffing across the Network and report submitted to Specialised Commissioning team
- Securing of £27,500 from Health Education England to fund 13 extra QIS course places across the Network
- Attendance and presentation at Nottingham University recruitment open day which resulted in 20 interested nurses and recruitment of 5 nurses
- Development of a suite of Family Integrated Care competency/teaching package documents and parent information leaflets
- Network ATAIN conference
- Formation of a Network ATAIN working group
- Oversight and advice regarding all ATAIN action plans and Transitional Care development plans
- Audit of all ward attender activity across the Network
- Launch of the multi-disciplinary care pathway for the care of the unborn child, or neonate, with life threatening or life limiting conditions
- Second 'Preparation for Management' study day for nursing staff
- Network prize at the Midlands and East Neonatal Conference for the East Midlands Palliative Care pathway project
- Collaboration with NUH, UHL and Specialised Commissioning for the outreach CQUIN project and data collection
- Formation of a multi-disciplinary Perinatal Mental Health working group
- Regional neonatal representation on all six Local Maternity Systems across the East Midlands

Lead Nurse Update



The Network Work Plan devised from the regional and national agendas is ever increasing, with an intensifying emphasis on nurse staffing. Following the national nurse staffing audit in 2017, and the East Midlands capacity review, there has been a comprehensive review of all nurse staffing undertaken across the Network. This included Qualified in Speciality (QIS) ratios, retention rates and training requirements. The subsequent report has been shared with the East Midlands Specialised commissioning team as part of the East Midlands Capacity Review Oversight work. Collaboration has continued with Health Education East Midlands to develop a funding stream for QIS training, which will ensure that the neonatal services across the East Midlands have access to the required number of courses. Work has also continued with the Universities to ensure that the course standards in the future will meet the national standards. There is also a national piece of work ongoing around the possibility of an apprenticeship for the QIS course. We continue to remain engaged with this project.

Collaboration with Nottingham University has resulted in an opportunity to give a presentation around neonatal nursing as a career at the University open day for 3rd year students. This led to a great deal of interest, with 20 students expressing an interest in neonates as a career, and 5 of them subsequently being interviewed and appointed at King's Mill Hospital. In light of this success, we have contacted the other universities in the region to determine if we can undertake a similar process with each of them.

Health Education England asked the Neonatal Networks to produce business plans to access some extra funding to support QIS training earlier this year. We were successful in our bid and achieved £27,500 to purchase an additional 13 QIS training places. These nurses are now all enrolled on their courses, and this should make a significant difference to the numbers of QIS nurses available.

Nurse staffing numbers continue to be inputted into the BadgerNet dataset, which gives us an ability to have an oversight of each unit's ability to meet the national service specification requirements for staffing, and to discuss where actions are required. This data is reviewed closely within the Lead Nurses Group and any successful recruitment and retention strategies are shared.

The Family Integrated Care Working Group which was formed at the beginning of 2018 has produced a suite of parent competency/teaching package documents and parent information leaflets which will help to ensure that the parents are fully integrated in the care of their babies. These documents were overseen by the Parent Advisory Groups and are due to be rolled out consistently across the Network in 2019/2020.

The Parent Advisory Groups continue to have a strong influence over the work we undertake, with our dedicated group of parents working hard with the staff to improve the services and consistency across the Network. We continue to have a constant challenge to find willing parents who wish to contribute and join the Parent Advisory Groups, with the South Hub being a particular issue. We are currently looking at a variety of innovative ways to increase our parent involvement, and the cot side visits will be repeated again in the forthcoming year, which generally provides us with a wealth of information about the services that are being provided across the Network.

The National ATAIN Project has led to an increase in workload, with Network guidance and oversight of all the unit action plans, and the plans to implement Transitional Care. This is a very exciting time for neonatal services with a complete review of how we provide care for the term and near term infant. Equally promising is the increasing work agenda with the maternity services in each unit, and through the Local Maternity Systems. This has been long overdue nationally, and is beginning to reap benefits with a more integrated way of working, which can only benefit the babies and families.

The Education program has continued throughout the year, with a series of education days and Clinical Forums. Topics have been far reaching with some very interesting and challenging case studies also being discussed. With term admissions being at the forefront of everyone's minds, an ATAIN conference was held in October, with several national speakers. The day evaluated really well and helped to set the scene, and raise the profile of the work that needs to be undertaken. This was in addition to the formation of an ATAIN working group, which has now become a fully interactive group, made up of neonatal and maternity staff, where solutions and problems are shared in order to ensure consistency across the Network.

We also had the pleasure of launching the Care pathway for the unborn child, or neonate, with a life threatening or life limiting condition. This is truly multi-disciplinary project which demonstrates how much can be achieved when a group of dedicated individuals come together with a common cause. The pathway will undoubtedly improve service considerably for babies and their families.

As always, I am extremely grateful to all the individuals who contribute so positively towards the Lead Nurses and Parent Advisory Groups, without whom, we would not be able to make such a difference to the services we provide across the East Midlands.

I look forward to another successful year.

Linda Hunn, Lead Nurse

Education & Project Lead Update



Education, in particular, has presented both successes and challenges for the Network during 2018/2019.

The provision of neonatal Qualified in Specialty (QIS) education and training continues to be a challenge for neonatal services within the region. A number of national and regional reports published during 2017 have highlighted that providing sufficient numbers of appropriately trained nursing staff is a significant challenge for neonatal services across the country. The picture within the East Midlands Neonatal ODN is no different. The priority for 2018/2019 was to improve access to, and quality of, QIS education and training within the region. A working group with representation from all Network neonatal units was established to progress this. The group was very effective, with members sharing their extensive knowledge and understanding of the requirements of QIS education and training to produce a comprehensive outline specification for a regional QIS programme. This work has also been used to inform the very early stages of a proposal to develop a national neonatal QIS Apprenticeship. However, currently there has been less progress than hoped with this initiative and alternative approaches to delivering a robust QIS programme within region are being explored.

Through 2018/2019 good progress has been made with delivery of the Network Education Strategy 2016 - 2019. The standardisation of informal training and development for non-registered nursing staff has been completed with the introduction of a Network Development Framework and Clinical Skills Passport for non-registered staff. An outline for a Network Foundation programme has been produced but how this is to be implemented has yet to be agreed. The standardisation of QIS education and training across the Network continues as described above.

The Education Forum, recently renamed the 'Education and Practice Development Group', has flourished. We said 'goodbye' to a number of members who have retired and would like to thank them all for their valuable contributions to developing neonatal education and training over the years. In their place, several new members have been welcomed to the group, adding to the wealth of knowledge, experience and enthusiasm the group provides on matters of education and training. Now that work on the non-registered staff training and development documents is complete the group will focus on producing Network wide competences for registered nurses, particularly non QIS nurses initially.

During the past year the Network has hosted a number of very successful education days. In June an event was held for non-registered nursing staff and in September a day for staff in 'Preparation for Management'. Both days were very popular and evaluated well. There have been requests for the events to be repeated and following a presentation of the Lead Nurse's work on 'Preparation for Management' at the 11th Midlands and East Neonatal Conference in January 2018, there has been interest from other Networks, in the availability of places for similar days in the future. In November the 'Family Matters Conference' proved extremely popular with the highlight being the 'Parent Panel' when four parents spoke and answered questions about their experiences of neonatal care. It is hoped that the Network will continue to host conferences and education days in the future but this will be dependent on the availability of funds from the Network budget for education and training.

The successful launch of the 'Care Pathway for the Unborn Child or Neonate with Life-threatening or Life-limiting conditions' has been a significant achievement of this year. A

regional multi-disciplinary collaboration, led by the Network Lead Nurse, developed the pathway during 2017 and it was subsequently presented at a launch day held at Rainbows Hospice, Loughborough, in April 2018. The day was extremely well attended and evaluated. Implementation of the pathway will be monitored through audits to be undertaken in the coming year. A similar project for Perinatal Mental Health is about to begin and will continue through 2018/2019.

All of the national reviews published in the past year have identified that neonatal education and training must be a high priority for Networks, linked as it is, to service provision and capacity. In the coming year we will aim to build on the valuable work that has already been achieved in this area in order to support workforce development.

Judith Foxon, Education & Project Lead

Parents Advisory Groups



With the formation of the new East Midlands Neonatal ODN, the Parent Advisory Groups have maintained their identity as separate North and South Hubs. Unfortunately though, although the North hub has continued to be active, there have been continued difficulties with attendance at and recruitment to the South Hub. There are a variety of strategies planned for the forthcoming year, which we hope will improve engagement, and ensure the success of the group. The North Hub continues to function

very well with several loyal parents contributing to the work of the Network, and ensuring that the parent voice continues to be reflected within the Network work plan.

We were delighted that we had the first Network conference dedicated to the parent experience. The parent panel in particular was extremely well received by the audience.

This year has seen the Family Integrated Care group industriously producing a large number of competency/teaching package documents, and parent information leaflets, for the Parent Advisory Groups to review. This has sparked a great deal of conversation and debate around what should, and should not, be included in the documents. The work that the group has undertaken has been very impressive, and we look forward to seeing all the documents being rolled out throughout 2019/2020.

It has been heartening to see that psychological support has improved across the Network following the National peer review process in 2017/2018, and it will be very interesting to see what impact this improved provision is having when the Network peer reviews are undertaken again this year. Parent views on the services provided will be evaluated during the course of the reviews. The cot side visits will also be undertaken during the year, which generally gives us an excellent understanding of how parents perceive the care and services that they have received.

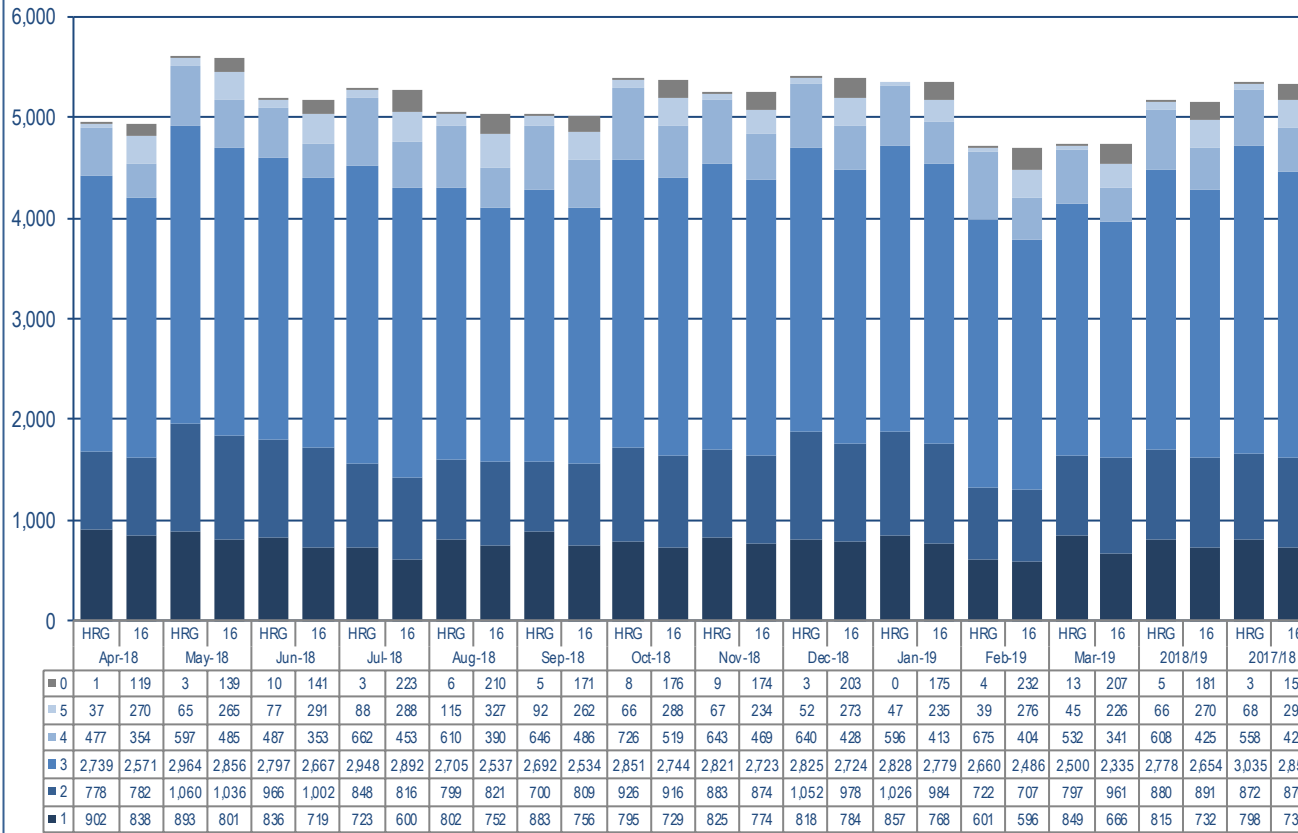
Parent feedback and experience continues to feature within all the Network conferences with staff evaluating the parent sessions really positively. This can only help to increase staff awareness of the impact of having a pre-term or sick baby on a neonatal unit and how they can work to help improve the parent journey.

I would like to thank all parents and staff for their continued hard work to ensure that the baby and family experience continues to be improved and consistent across the Network.

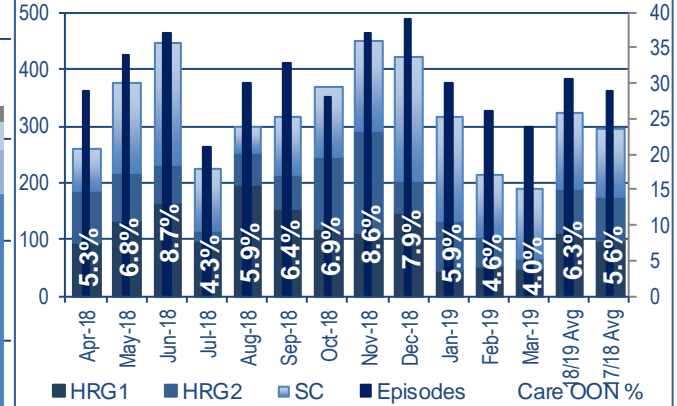
Lynsey Jones, Parent Chair

East Midlands Neonatal Activity Report

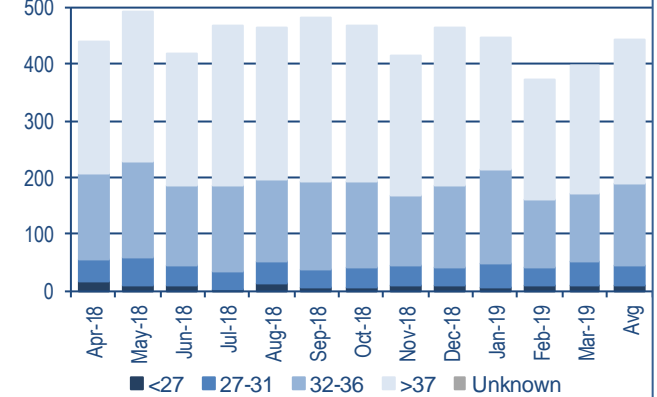
Activity by care level: HRG -v- HRG 2016



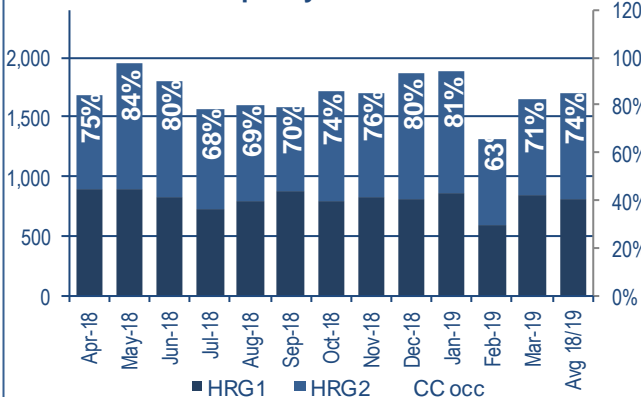
Care out of network



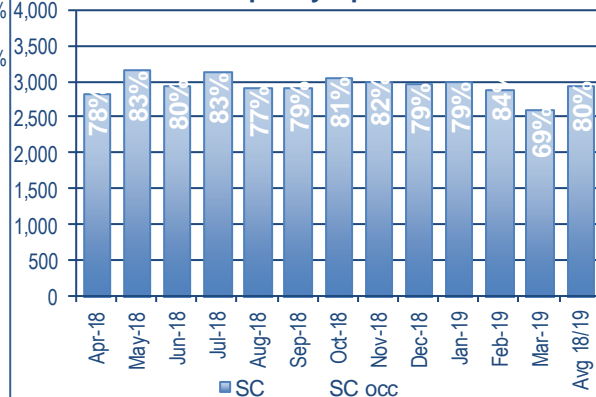
First admissions by gestation



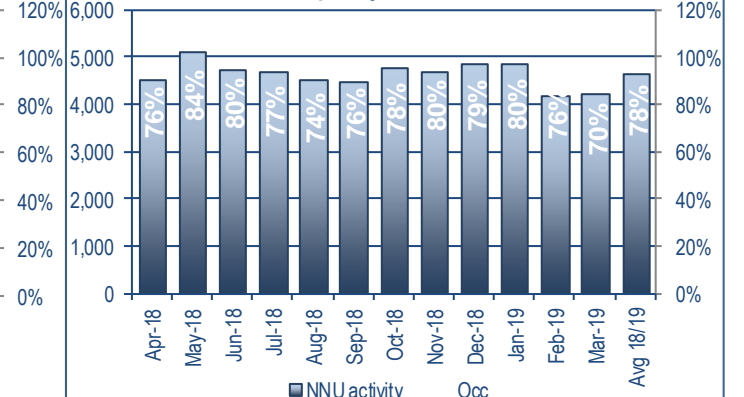
Occupancy: critical care



Occupancy: special care

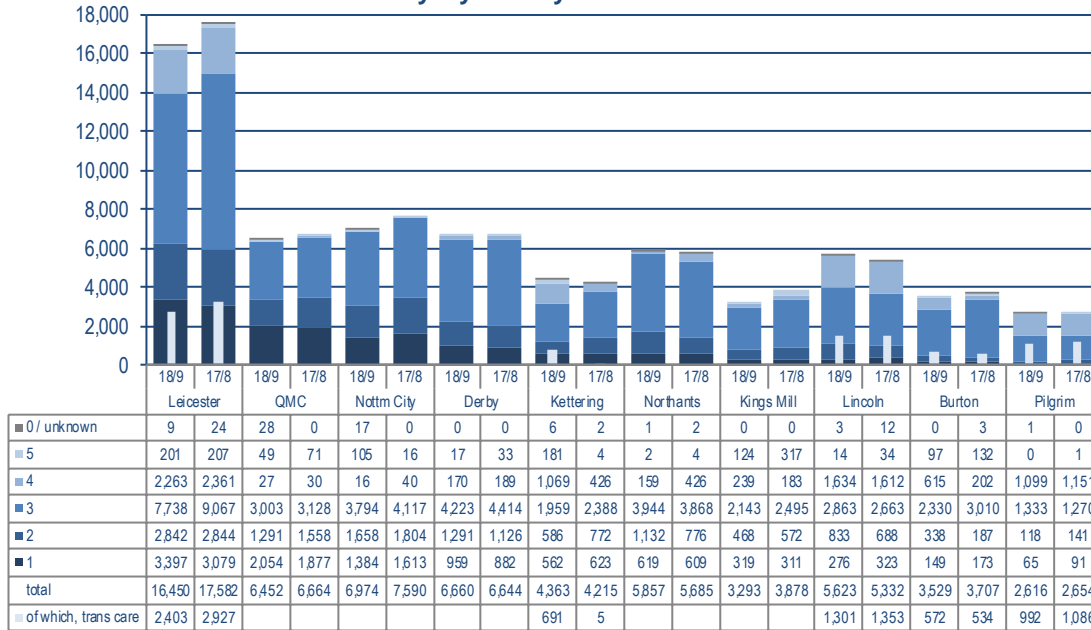


Occupancy: NNU overall

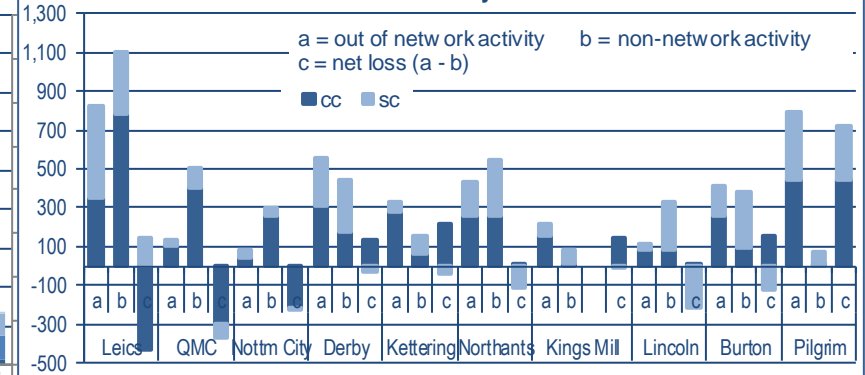


East Midlands Neonatal Activity Report

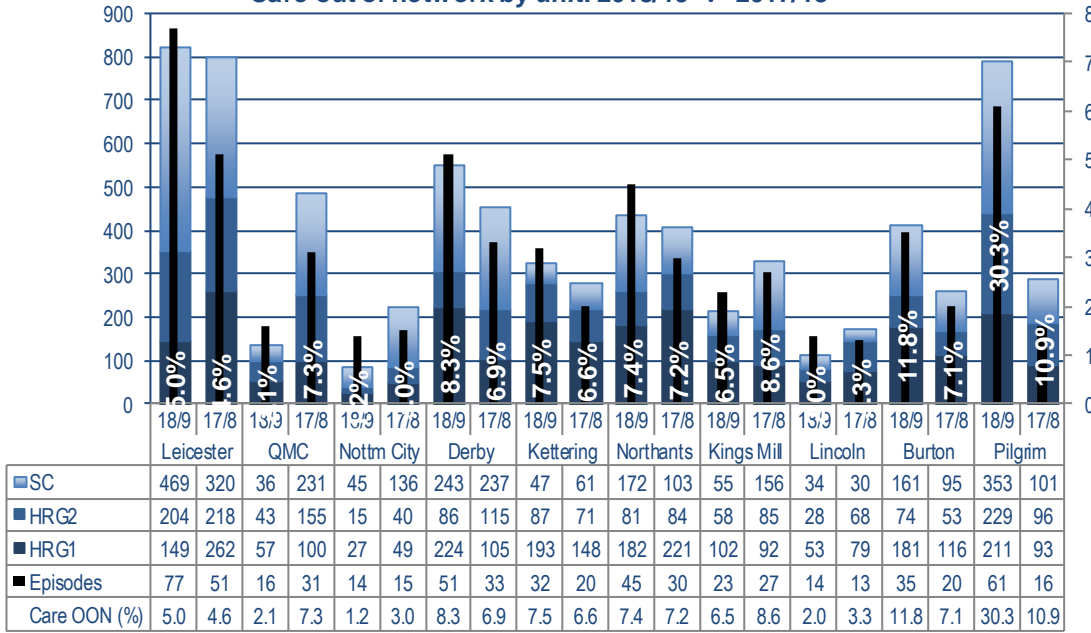
Activity by unit by HRG: 18/19 -v- 17/18



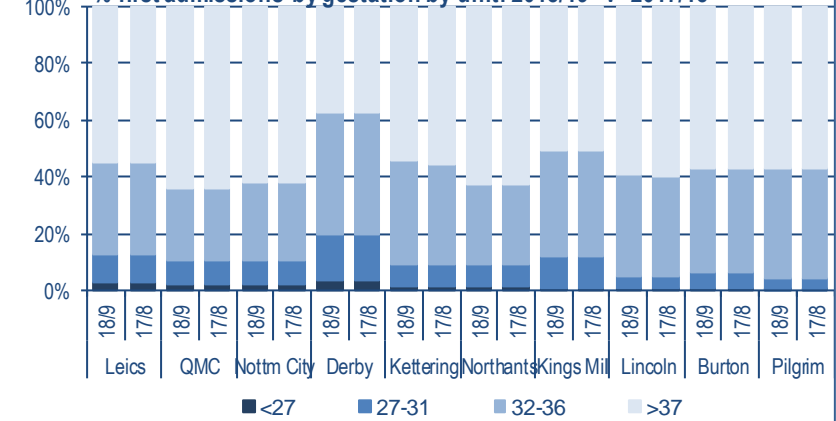
Inter-network care by unit: 2018/19



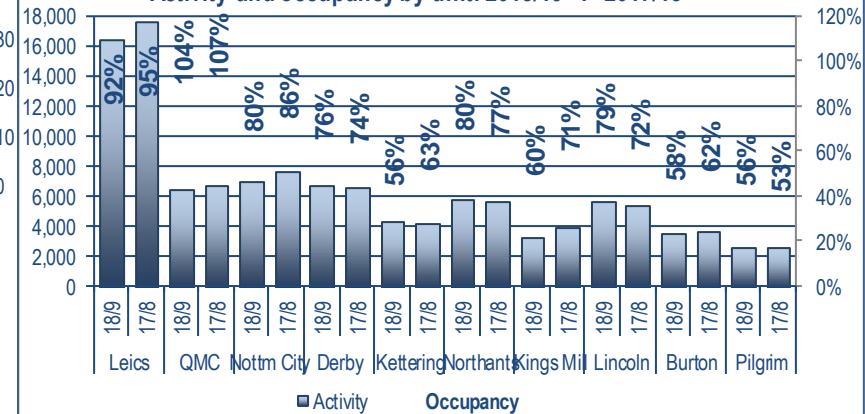
Care out of network by unit: 2018/19 -v- 2017/18



% first admissions by gestation by unit: 2018/19 -v- 2017/18



Activity and occupancy by unit: 2018/19 -v- 2017/18





All activity data has been downloaded from the BadgerNet data system. All units in the network subscribe to Badger, and data is entered at local level.

Activity care days are described in HRG groupings as this is the current commissioning currency, although HRG 2016 is currently being shadowed, with a view to its introduction in 2020/2021

HRG Classification

HRG1	Intensive Care
HRG2	High Dependency Care
HRG3	Special Care
HRG4	Care with mother or carer present (transitional care)
HRG5	Normal care

There has been little change in 2018/2019 activity, compared to 2017/2018, both at network level and within the units.

Babies receiving care out of network

	Babies	Out of network babies	% babies out of network
2018/2019	5,863	217	3.7%
2017/2018	6,067	207	3.4%

Care out of Network for East Midlands babies increased by 327 care days (9.2%), and the number of East Midlands babies receiving all or part of their care out of network has increased from 3.4% in 2017/2018, to 3.7% in 2018/2019. East Midlands Neonatal ODN is therefore compliant with the national standard of 95% of babies booked in a network receiving all of their care within that network.

Although this standard is applied at network-level, unit-level analysis show that the babies booked in network LNUs and SCBUs (particularly Pilgrim (8.8%), but also Burton, King's Mill and Derby) are receiving high levels of care out of Network, indicating that the network remains under some pressure.

Extremely premature babies born in a NICU

	Births <27 weeks	Born in NICU	Not born in NICU	% born in NICU
2018/2019	106	70	36	66.0%
2017/2018	100	59	41	59.0%

Mothers delivering very premature babies should give birth in hospitals where there is a NICU. This means that the baby can be taken directly to the NICU for immediate care, and mother and baby can remain in the same hospital. There has been an improvement in compliance to this standard, from 59.0% in 2017/2018 to 66.0% in 2018/2019.

2019/2020 will see a Network project to review in utero Transfers and to optimise place of birth for very premature babies.

The general picture is one of static activity across the Network over the past few years, with high levels of care outside of Network. The Network has been working with NHSE East Midlands to undertake an analysis of neonatal service capacity in the East Midlands, and a

report was published in December 2017. The East Midlands Neonatal Oversight Group is guiding work being carried out to implement the recommendations of the report, which aim to reduce demand and increase capacity in order to ensure that babies and their families receive care as close to home as possible.

Alongside this, work must be done to improve processes to ensure that mothers delivering very pre-term babies do so in an appropriate unit.

Rachel Salloway, Data Analyst

Financial Report

Budget Summary

Total Annual income £286,692

Position at end of March 2019

Account Code	Description	Annual Budget	Month 12			YTD: YEAR END Mar 19		
			Monthly Budget	Actual Exp in Month	Variance Month Fav/Adv	Budget YTD	Actual Exp YTD	Variance YTD Fav/Adv
	From Specialised Commissioning	£ 286,692.00						
	PAY							
11039	Previous Network Chair	£ 3,500.00	£ 291.67	£ -	£ 291.67	£ 3,500.00	£ 1,167.00	£ 2,333.00
11051	Clinical Leads	£ 29,898.00	£ 2,491.50	£ 690.00	£ 3,181.50	£ 29,898.00	£ 31,407.00	£ 1,509.00
12009	Lead Nurse 8b	£ -	£ -	£ -	£ -	£ -	£ 24,673.29	£ 24,673.29
12010	Nurse/Midwife 8C	£ -	£ -	£ -	£ -	£ -	£ 291.16	£ 291.16
16004	Administrator	£ 22,101.00	£ 1,841.75	£ 1,824.00	£ 17.75	£ 22,101.00	£ 21,706.00	£ 395.00
16006	Data Analyst	£ 29,905.00	£ 2,492.08	£ 2,473.00	£ 19.08	£ 29,905.00	£ 28,948.00	£ 957.00
16007	Education & Project Lead	£ 43,206.00	£ 3,600.50	£ 3,216.00	£ 384.50	£ 43,206.00	£ 38,586.00	£ 4,620.00
16010	Network Director	£ 80,829.00	£ 6,735.75	£ 6,430.00	£ 305.75	£ 80,829.00	£ 67,267.00	£ 13,562.00
Total Pay		£ 209,439.00	£ 17,453.25	£ 13,253.00	£ 4,200.25	£ 209,439.00	£ 214,045.45	£ 4,606.45
	NON PAY							
32075	Bedding & Linen	£ -	£ -	£ 23.00	£ 23.00	£ -	£ -	£ -
32601	Printing & Stationary	£ 504.00	£ 42.00	£ 79.00	£ 37.00	£ 504.00	£ 412.00	£ 92.00
32719	Refund phone calls (payroll) income	£ -	£ -	£ 15.00	£ 15.00	£ -	£ 210.00	£ 210.00
32725	Mobile Phones	£ 504.00	£ 42.00	£ -	£ 42.00	£ 504.00	£ 324.00	£ 180.00
33141	Computer hardware & software purchase	£ 696.00	£ 58.00	£ -	£ 58.00	£ 696.00	£ -	£ 696.00
33153	Computer consumables	£ 600.00	£ 50.00	£ -	£ 50.00	£ 600.00	£ 551.00	£ 49.00
3180	Hosting Fee	£ 16,092.00	£ 1,341.00	£ 1,000.00	£ 341.00	£ 16,092.00	£ 12,000.00	£ 4,092.00
34001	Travel & Subsistence	£ 8,004.00	£ 667.00	£ 1,438.00	£ 771.00	£ 8,004.00	£ 9,172.00	£ 1,168.00
35001	Training*	£ 6,996.00	£ 583.00	£ -	£ 583.00	£ 6,996.00	£ 3,740.00	£ 3,256.00
36030	Hospitality	£ 996.00	£ 83.00	£ 133.00	£ 50.00	£ 996.00	£ 2,081.00	£ 1,085.00
36038	Unreported losses	£ -	£ -	£ -	£ -	£ -	£ -	£ -
36070	Bank Charges	£ -	£ -	£ -	£ -	£ -	£ -	£ -
Total Non Pay		£ 34,392.00	£ 2,866.00	£ 2,612.00	£ 254.00	£ 34,392.00	£ 28,070.00	£ 6,322.00
Total Pay & Non Pay		£ 243,831.00	£ 20,319.25			£ 243,831.00	£ 242,115.45	£ 1,715.55
	*QIS Funding income / expenditure					£ 27,329.00	£ 28,500.00	£ 1,171.00
	Overall year end position against income	£286,692.00					£242,115.45	£43,405.55

Account Code	Overspend/Underspend Explanation
11039	Underspend: Previous Network Chair stipend ended at the end of July 2018
11051	Overspend: Budget set at under the required salary scales for the two Clinical Leads. This to be amended on the 2019/2020 budget
12009	Overspend: Lead Nurse and Director both in post until end of May 2018
12010	Overspend: This line should have been merged with line 16010

Pay Overspend Summary

The pay budget was set in line with the interim network structure that proposed a combined Network Director and Lead Nurse post. However, there was both a Network Director and Lead nurse in post until May 2018. This temporary structure was not confirmed until September 2018. There was also a Network chair stipend which has now been removed from the annual budget.

Account Code	Overspend/Underspend Explanation
33141	Underspend: There has been no requirement to purchase any computer hardware during this financial year. This line remains in place as all computers have to be purchased by the Network.
33180	Underspend: Budget was originally calculated to allow for £16,000 per annum, which was in anticipation of a potential rent increase
34001	Overspend: Budget was set below the required amount for the extensive travel across the Network. This is to be amended on the 2019/2020 budget
36030	Overspend: Attributable to incorrect coding against hospitality line rather than training line. This is to be amended on the 2019/2020 budget

Non Pay Underspend Summary

Non pay is overall underspent; some adjustment will be required for the travel and hospitality lines for the new financial year.

Overall Position

The end of year budget position demonstrates an underspend of £46,300.00. This is due to the uncertainty regarding the Network organisational structure and the decision by the Board in September 2018 to implement option 6 as a temporary measure. There are however plans to utilise the underspend in order to roll out the Family Integrated Care project.

Clinical Governance

The merger of the East Midlands units within the old Central Newborn Network with the Trent Perinatal Network into a new East Midlands Neonatal ODN has led to the formation of a single Clinical Governance Group (CGG), which meets quarterly at The Kegworth Hotel and is followed by the Clinical Forum. Each Trust has done a wonderful job of organising an informative educational programme and we have had much valuable clinical discussion and shared learning. Activity from other groups is fed into this meeting, and it is the forum for feedback to and from the CentTre Neonatal Transport Service. The group is co-chaired by the Network Clinical Leads.

Through the CGG various aspects of the Network work plan are reviewed. In 2018/2019 activities discussed included:

- Developing consistency of network guidelines with an aim of ensuring that North and South Hubs have a similar guideline portfolio with shared pan EMNODN guidelines where clinically appropriate. The group has recently had success in ratifying a joint PPHN guideline. Developing network guidelines is a work in progress and further work is needed during 2019/2020.
- Further work has been undertaken to develop the dashboard and also to discuss quality improvement initiatives that have been implemented at trust level to improve various metrics for example around admission temperatures. The dashboard metrics have been carefully reviewed so that they align to NNAP. A data working group has been set up and a dashboard user-guide developed with the goal of improving data quality to ensure that the dashboard presents a meaningful reflection of neonatal care in the region.
- Reviewed our exception reporting process and ratified this through the CGG.
- There has been a culture of sharing learning from serious incidents.
- There are now a number of new working groups that have been set up over the past year the work of these feeds into the CGG. These groups include:
 - Data Group
 - ATAIN Working Group
 - Development of a perinatal mental health pathway
 - Mortality Steering Group (the South Hub group was established in the past year, the North Hub group pre-existed prior to the Network merger)

We look forward to continuing this excellent programme by working collaboratively with everyone in the coming year.

Joanna Behrsin, Clinical Lead EMNODN (South Hub)
Anneli Wynn-Davies, Clinical Lead EMNODN (North Hub)

Concluding Comments & Key Messages



As demonstrated from this report, this year has seen a huge amount of activity. The merger of the East Midlands units within the old Central Newborn Network with the Trent Perinatal Network into a new East Midlands Neonatal ODN has been a great success and has seen an increased level of collaboration between all the Network units. This, along with the outreach CQUIN, and the Education and Practice Development Group, has provided a very evident improvement in the working relationships within all the units across the Network.

The formation of a new Board and the revision of the governance processes has been a very positive output from the year. The engagement from the Executive Board Members has provided a greater level of oversight and scrutiny of the Network activities which will undoubtedly enhance our work going forward.

The engagement with Maternity Services as a result of the Better Births and Better Newborn Care reports has been extremely positive, with both systems joining up to improve the whole care pathway. This work is going from strength to strength and will continue into 2019/2020.

Work to address the issues identified with the East Midlands capacity report has been undertaken throughout the year. Having commenced work and made progress on the term admissions and transitional care, the issues around cot capacity and out of network transfers will be taking priority during 2019/2020.

The long awaiting National Critical Care Review has not yet been published; however the draft recommendations within the document and the NHS 10 year plan are being incorporated into the Network work plan and activities to ensure that they are being met.

2019/2020 will see the Peer reviews being undertaken again which will enable the Network and the Board to assess the progress which has been made since the National Peer Reviews were undertaken two years ago.

The ever growing education agenda will also continue to feature highly throughout 2019/2020 and the great success of the Education and Practice Development Group will undoubtedly continue to foster a positive ethos of change and collaboration.

As illustrated, there has been a massive amount of work undertaken throughout the year; however it is clear from the National Agenda that there is still much to be done.

As always we cannot thank all the members and parents across the Network enough for all their hard work and contribution to the successful management of the neonatal units and wider Network in the East Midlands. We look forward to another successful year.



The Network Management Team

Contact the Network Team

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