

## NETWORK BOARD MEETING

Minutes of the meeting held on  
Wednesday 23<sup>rd</sup> March 2011 at 9:30 am

Rooms 1 & 2 at Wolverhampton City PCT, Coniston House, Chapel Ash, Wolverhampton, WV3 0XE.

### PRESENT:

Alex Philpott, Neonatal Transport Consultant  
Alison Moore, Consultant Neonatologist  
Alison Wood, Nurse Manager Women's and Children's  
Anand Mohite(AnM), Consultant Neonatologist  
Andy Spencer, (Chair) Network Lead  
Anjan Bhaduri, Consultant Neonatologist  
Ann Clare, Matron for Maternity and Paediatrics  
Chris Thomas, Clinical Nurse Manager NNU  
Dave Roden, Associate Specialist in Neonatology and  
Congenital Heart Disease  
David Coan, Matron for Children  
Doreen Humphries, Nurse Manager  
Gina Hartwell, Senior Nurse Manager SCBU  
Jackie Harrison, Transport Nurse Consultant  
Jon Crockett (Chair) (JC) Chief Executive  
Kate Palmer, Consultant Paediatrician  
Kishor Tewary, Consultant Paediatrician  
Melody Bridges, Commissioning Manager, Specialised  
Children's Services  
Pam Smith, Matron for Paediatrics and Maternity  
Ruth Moore, Network Manager  
Sanjeev Deshpande, Consultant Neonatologist  
Sarah Carnwell, Administrator  
Simon Jenkinson, Lead Obstetrician

WM Newborn Transport Service  
Telford and Shrewsbury Hospitals  
Telford and Shrewsbury Hospitals  
Dudley Group of Hospitals  
Newborn Network  
Walsall Manor Hospital  
Walsall Manor Hospital  
University Hospital of North Staffordshire  
University Hospital of North Staffordshire

Royal Wolverhampton Hospitals  
Walsall Manor Hospital  
Mid Staffordshire General Hospital  
WM Newborn Transport Service  
Wolverhampton City PCT  
University Hospital of North Staffordshire  
Mid Staffordshire General Hospital  
WMSCT

Dudley Group of Hospitals  
Newborn Network  
Shrewsbury and Telford Hospitals  
Newborn Network  
Newborn Network

### APOLOGIES:

Babu Kumararatne, Consultant Paediatrician  
Caroline Southall, Parent Representative  
Dawn Homer, Unit Manager  
Gail Fortes-Mayer, Assistant Director, Specialised  
Commissioning (Children)  
Julie Crabtree, Acting Practice Educator  
Julie Ebrey, Parent Representative  
Lynsey Clarke, Practice Educator  
Sue Ellis, Nurse Manager  
Sue Gough, Parent Representative

Royal Wolverhampton Hospitals  
Parent Representative  
Royal Wolverhampton Hospitals  
WMSCT

Newborn Network  
Parent Representative  
Newborn Network  
Shrewsbury and Telford Hospitals  
Parent Representative

Introductions were made around the table.

### 2. MINUTES OF THE MEETING HELD ON THE 15<sup>th</sup> DECEMBER 2010

The minutes were agreed with the following changes; item 3 to be changed to Serious Untoward Incidents and item 8 historical data has been moved across to Badger.

### 3. MATTERS ARISING

There were no matters arising.

### 4. WEBSITE DEVELOPMENT PRESENTATION

SC gave a presentation to be circulated with the minutes. The website will retain its existing address: [www.newbornnetworks.org.uk](http://www.newbornnetworks.org.uk) however this will now link to the new site on NHS Networks. There are links to both the SSBC newborn and maternity websites on both sites. The Board minutes once approved will go on for viewing by the public. The advantage to the new site is the additional functionality and by being on NHS Networks we are alongside other Networks giving us a wider platform within the NHS.

### 5. WEST MIDLANDS SHA

#### West Midlands Perinatal Network - Update

Paul Jennings has been appointed as Chair of the Perinatal Network. The ToR for the Perinatal Network will be distributed to the network board for information. The Perinatal Network has two arms; commissioning and provider. The Perinatal Network commissioning sub group held a

### ACTIONS

SC

SC

SC

meeting at the Perinatal Institute last week, which was very maternity focussed. MB did not feel that newborn was effectively represented. The Network to write a letter to Paul Jennings seeking further newborn representation on the Perinatal Network commissioning sub group in order to ensure the maternity/neonatal interface is addressed by both arms of the Perinatal Network.

RM

**6. FINANCE**

Unfortunately December's finance paper was circulated in error. The March 2011 paper will be circulated with the minutes. The funding for the Practice Educator post will be carried forward to next year. There is no funding for a Maternity Network budget going forward therefore this will end with a zero balance at the end of the current financial year. The non recurrent training budget will go forward and will be used to fund training across the network next year.

SC

**7. COMMISSIONING NEWBORN SERVICES UPDATE**

The CQUINS are nearly all completed, two relate to neonatal care activity outside the normal care pathway for which an exception report would be completed, and ROP for which there is a requirement for 95% of babies less than 1,500g to be screened.

The negotiations around the contracts for the forthcoming year have been completed. Contracts are going to Trusts in the network for sign off next week. JC advised everyone present to enquire at their Trusts as to what has been negotiated on their behalf.

All

Future of the SCT

SCT will become part of the National Commissioning Board (NCB). From October SCT will move into a shadow role to support the transfer to NCB, and there will be a single national way of commissioning. It is likely that there will be a West Midlands outpost of the NCB but with a 35% reduction in current staffing levels. Karen Helliwell is keeping the SCT updated but some of the details have not been worked out yet.

There is going to be another review of networks to see how they fit into the new NHS.

Payment By Results (PBR)

Prices are being brought together gradually across the West Midlands. This will bring fairness to the system, therefore from April the same price will be paid at each Trust across the network for HD, SC and IC. Transitional care will no longer be paid at the same rate as SC.

The new BAPM standards do not translate into the HRG's.

MB to invite Deb Lane, Finance at the SCT to attend the next meeting of the Board to answer questions on the above.

MB

**8. WEST MIDLANDS QUALITY INDICATORS**

The new NHS is looking to information to drive up quality of care. We need to be looking at our data in a timely way, in order that if something needs correcting action can be taken. The SWMNN have been using a dashboard for this purpose. It does not include all outcome data but as a network we can choose the quality data to be included. The SSBCNN Clinical Effectiveness Lead is currently on sick leave but it is envisaged that role will continue, and work will be undertaken with Badger and Vish Rasiah in the SWMNN to take this forward.

AS and AM

There was concern raised that the data may not be wholly accurate as due to funding issues there is a need to input babies under appropriate HRG in order for funding to be attached, however if funding is now being provided for HRG 4 and 5 this will improve the accuracy of the data.

It was suggested that staffing be added, as going forward reduction in staffing is a concern for all units. RM to incorporate this into the badger/dashboard.

RM

AM as Audit Lead offered her services to develop the data collection and audit. AS and AM to take forward.

**9. MATERNITY NETWORK UPDATE**

SJ thanked Sarah Blackburn who has now left the employment of the Trust, CT and RM for all their support. SC and Carol Guest will now provide administration support to the Maternity Network. The Obstetric Guidelines books have been printed and have been distributed to 4 out of the 6 units in the network. The books were launched at the Perinatal Education and Stakeholder Day held on

the 11 February 2011 at Dudley Clinical Education Centre. Tracy Vanner presented a poster of the IUT Data Project at the event, which she is also going to present at Harrogate. Over 100 IUT's have been recorded, mostly from New Cross with some from UHNS. The IUT Research Project is looking at the psychological effect of transfers on parents, it is hoped that data from this will be presented this year. The Maternity Network Planning Meeting is to be held on the 1 April at New Cross looking at the priorities and objectives for next year.

## 10. CARE PATHWAYS UPDATE

Care pathways have been designed based on the SCT approved designation levels. Following the stakeholder event at the end of September visits took place with all the units across the network in November and final reports of the visits have been sent to the Trust's Chief Executive.

RM reported that comments have been received on the parent information leaflet, no comments have been received on the method of reporting exceptions to the care pathways. The draft document was discussed at the QIPP Group meeting last week, comments received were around the need to strengthen the wording in the parent information leaflet around care pathways, and the need for IUT's and timely transfers back to LNU's by both New Cross and UHNS where appropriate. Changes have been made to the document which reflect the comments received. See attached amended version.

AM commented that the exception report template and parent information leaflet were fine.

Letters have been received from Dudley and Shrewsbury expressing concerns about the draft network care pathway document for which the network will provide a response. Both Dudley and Shrewsbury commented at the board meeting that they could not agree the care pathway document as it stands.

Concerns were raised around capacity at the level 3 units to accept IUT's. RM said the Cot Bureau has data as to refusals/closures of maternity units not able to accept IUT's. It is not normally an issue for New Cross, but UHNS has got an issue around capacity. KP said that the Trust was working on this.

JC reiterated that although it appears that not everyone agrees with the designation of their unit, it is fixed and that as a network we are required by the WMSCT to design pathways around this. The Network will meet with those individual Trusts in the next month to take forward the care pathways. MB stated the need to move quickly to resolve issues and get the pathways agreed. The commissioners will impose their pathways, if as a network you cannot agree pathways. JC thanked everyone for all their work.

RM and AS

## 11. NETWORK SUB GROUPS

### Equipment

The group are still very active and continue to pursue telemedicine links. It is planned to hold an evaluation day of ultrasound scan machines, as it is six years since the network purchased ultrasound scan machines. Issues have been identified around the resuscitaires recommended by the network and an updated letter about this has been sent to each of the Trusts. Ventilation training days are being held with a basic day in the summer and an advanced day to be held in the autumn. RM on behalf of the network thanked Tim Cottle, who will be retiring shortly, for all his work. JH suggested that money could possibly be saved by using the same disposables across the network. RM confirmed that this is an area that the group have looked at but there are obstacles at Trust level due to the procurement process. AS agreed that disposables are not always purchased at a unit level but as a wider contract with a supplier for the Trust as a whole in order to get the best price. JC suggested RM feed into the national QIPP website the difficulties in this area.

RM

### Workforce

The group have revised their Terms of Reference, and agreed to invite ANNP's/Clinicians when and where appropriate. The objectives of the group have been updated with a continuation of the Foundation Programme. CT as Chair has drafted a response to the Liberating the NHS Consultation document, she gave a summary of the proposed changes in the document. Any comments/changes to the response to be forwarded to CT before the 31<sup>st</sup> March deadline.

All

### Guidelines

Review of the current guidelines is now taking place, KP requested that all those involved provide a timely response to MK's e-mails. There are no network funds to purchase guidelines books this year, therefore the network has written to each Trust to ask if they wish to purchase books.

Guidelines  
Authors

Responses have been received from Walsall and UHNS please can other Trusts in the network provide a response.

KT, AM,  
AnM and BK

QIPP

The Nursing Time Spent Audit proved very useful and is being presented at the RCPCH meeting in April. There is also a lot of national interest in the IUT project. GCP training of nursing staff is required in order to undertake perinatal research. The group is looking into providing training for staff across the network. The WMPI are looking at perinatal deaths, the QIPP group is to look at a refined version of the data set once it is clear what data they require in order to monitor mortality in the network.

Transport

JC welcomed Alex Philpott, recently appointed as Neonatal Transport Consultant. The NTS Team are giving presentations at various events across the country on the dedicated newborn transport service. KP queried an outpatient transfer refusal at UHNS, as this was not a routine appointment and was being combined with a specialist review on the same day at BCH. JC suggested that improved communication and more accurate dialogue take place in future. AM confirmed that the NTS currently passively cool babies but asked if they intended to actively cool babies in the future. The NTS have been able to meet the current criteria by using passive cooling. JH confirmed that they are looking into purchasing a cooling mat from funding. An audit has been undertaken and JH will provide SC with a presentation of the results for circulation. JH requested that the checklist be completed as to what units need to do prior to the arrival of the transport team. JH to provide SC with checklist for circulation.

JH and SC

JH and SC

Feeding and Nutrition

The group are planning to hold a study day in November this year. The group have standardised teats and standardised expressing kits (not the same manufacturer) across the network. The group are producing a benchmarking document, looking at designing an observational audit tool. A guideline on progression of feeds is being developed.

Parents

Four of the Trusts in the network now have a parent support group in their area. The first meeting in Wolverhampton took place in the first week in March at the Gem Centre. JE is liaising with Gina Hartwell and Sally Dugmore to look to restart the support group in Stafford. DR has an outreach clinic at Stafford and would like information to pass on to parents. RM to put DR in touch with the Stafford Support Group.

RM

Dudley has been meeting since Autumn at the Children's Centre.

The Parent Representatives (PRs) have identified a need to improve the discharge planning process from a parents perspective. The PRs are arranging to meet with the community team at North Staffs initially to get an insight into the issues.

The first wave of the National Parent Experience Survey has achieved a 50% response rate with the Picker Institute.

Follow Up Group

Chrisantha Halahakoon as Chair of the Group is looking to produce a report of the data collected so far. It is hoped that there will be a better attendance rate now that parents are informed whilst their baby is still on the unit prior to discharge. Observational training took place in December, a copy will be available on DVD for all units. SD identified that £125 per Bayley assessment used for NPEU studies was available for Bayley assessments carried out in the network, therefore SD needs a list of the names and contact details of all the recognised Bayley assessors in the network.

Lead  
Clinicians

Resuscitation Group

The group have met following publication of the updated newborn resuscitation guidelines by the Resuscitation Council. There are two areas of controversy; the use of blenders and equipment required, and the guidelines for teaching material are not out yet, waiting for these to come out in May. The group will be meeting again in May to develop a consistent approach across the Network. SATH to share their updated guideline with the group.

**12. PIP/KEELE UNIVERSITY STUDY TO COMPARE VOLUNTARY (PIP) AND MANDATED (SSBCNN) NETWORK**

Unfortunately neither Steve Cropper or Usman Zafar attended the meeting therefore the item was deferred to the next meeting.

**13. NETWORK STANDARDS ASSESSMENT UPDATE**

RM has visited all the units in the Network, there has been a slight increase in the number of questions answered. Changes are being drafted to include Toolkit and NICE standards, these will be brought to the Board for agreement. Once the tool is updated with the recent evidence and standards it can be publicised externally to the SSBCNN.

**14. QUAD NETWORK CONFERENCE 27 JANUARY 2011 FEEDBACK**

Marc Ebrey gave a father's perspective on the experience of having a neonate, which everyone felt showed how the experience has been improved for parents since then.

**15. WEST MIDLANDS BID DH PALLIATIVE CARE FUNDING - UPDATE**

Four of the first training days have taken place, an additional day will now take place in June. In April holding first of the second training days with a further second training day in May. A standardised palliative care pathway is also being developed for use across the West Midlands.

**16. ANY OTHER BUSINESS**

There was no other business.

**17. DATE AND TIME OF NEXT MEETING**

The next meeting of the Board will be held on Wednesday 22<sup>nd</sup> June 2011 at 10 am in the Seminar Room 9, Walsall Manor Learning and Conference Centre, Walsall Manor Hospital, Walsall, WS2 9PS.

**NETWORK BOARD MEETING  
ACTION POINTS  
for the meeting held on Wednesday 23<sup>rd</sup> March 2011**

<b>ACTION:</b>	<b>PERSON(S) RESPONSIBLE</b>
Item 3 to be changed to Serious Untoward Incidents and item 8 historical data has been moved across to Badger.	<b>Sarah Carnwell</b>
Website presentation to be circulated with the minutes	<b>Sarah Carnwell</b>
The ToR for the Perinatal Network will be distributed to the network board for information.	<b>Sarah Carnwell</b>
The Network to write a letter to Paul Jennings seeking further newborn representation on the Perinatal Network commissioning sub group in order to ensure the maternity/neonatal interface is addressed by both arms of the Perinatal Network.	<b>Ruth Moore</b>
The March 2011 finance paper will be circulated with the minutes.	<b>Sarah Carnwell</b>
Everyone present to enquire at their Trusts as to what has been negotiated with commissioners on their behalf.	<b>All</b>
MB to invite Deb Lane, Finance at the SCT to attend the next meeting of the Board to answer questions on the above.	<b>Mel Bridges</b>
The SSBCNN Clinical Effectiveness Lead is currently on sick leave but it is envisaged that role will continue, and work will be undertaken with Badger and Vish Rasiah in the SWMNN to take this forward.	<b>Andy Spencer Alison Moore</b>
It was suggested that staffing be added, as going forward reduction in staffing is a concern for all units. RM to incorporate this into the badger/dashboard.	<b>Ruth Moore</b>
The Network will meet with those individual Trusts in the next month to take forward the care pathways.	<b>Ruth Moore Andy Spencer</b>
RM feed into the national QIPP website the difficulties with consumables.	<b>Ruth Moore</b>
CT as Chair has drafted a response to the Liberating the NHS Workforce Consultation document. Any comments/changes to the response to be forwarded to CT before the 31 <sup>st</sup> March deadline.	<b>All</b>
KP requested that all those involved provide a timely response to MK's e-mails.	<b>Guidelines Authors</b>
There are no network funds to purchase guidelines books this year, therefore the network has written to each Trust to ask if they wish to purchase books.	<b>KT, AM, AnM and BK</b>
An audit has been undertaken and JH will provide SC with a presentation of the results for circulation.	<b>Jackie Harrison Sarah Carnwell</b>
JH to provide SC with checklist prior to arrival of the transport team for circulation.	<b>Jackie Harrison Sarah Carnwell</b>
RM to put DR in touch with the Stafford Support Group.	<b>Ruth Moore</b>
Lead Clinicians to provide SD with a list of the names and contact details of all the recognised Bayley assessors in the network, in order to access additional funding.	<b>Lead Clinicians</b>