

**Staffordshire, Shropshire & Black Country
Newborn & Maternity Network** 

REVIEW OF PROGRESS 2012-13 BUSINESS PLAN

Introduction

The Staffordshire, Shropshire & Black Country Newborn Network's Business Plan in 2012/13 identified the network's objectives to be achieved during the next 3 years taking forward the network priorities identified through the network leads time out event held on the 21 November 2011 which were reflected in the subsequent briefing document of the new lead clinician "Prioritising & Delivering the Network Forward Agenda". The priorities of the network take into account the 8 principles within the Toolkit for High-Quality Neonatal Services, the NICE Quality Standards- 'Specialist Neonatal Care'. A key focus has been placed upon meeting both the Quality Innovation Productivity Prevention (QUIPP) and Commissioning Quality Initiatives (CQUIN) agendas. It was not intended that all areas identified in the work programme would be completed within one year. Below is the review of progress against the overall network's objectives in the 2012/13 Business Plan.

Network Objectives 2012 – 2015

- Objective 1 High Quality data and information to support high quality care
- Objective 2 Best Care For babies and families
- Objective 3 The network is fit for purpose and able to demonstrate added value

The individual sub group's objectives and work programme were also included for the fifth year running in the overall network business plan 2012/13

Key Objectives in 2012/13

- Implement a process to review and report quarterly on mortality in the network
- Implement a process to review and share learning quarterly from serious clinical incidents in the network
- Review demand and advise on capacity requirements in the network
- Review progress in improving family centred care across the network

Objective 1 High Quality data and information to support high quality care							
	Reference	Intention	Work programme	Audit Indicators	Lead Responsible	Review Date	Progress Review March 2013
1.1	Toolkit Principles 1, 7,8 Jamboree 3.2	To monitor and report activity within each unit in the network and investigate exceptions to care pathways.	Quarterly reports to the network board	Quarterly network reports at board meetings	Ruth Moore Network Manager/ Lead Nurse	March-13	Completed in 2012/13, on-going requirement in 2013/14
1.2	Toolkit Principle 8 Jamboree 3.1 The NHS Outcomes Framework	The network has confidence in the accuracy of the neonatal mortality data contained in national and regional Perinatal Mortality Reports	Mortality review subgroup of the QIPP group to monitor the learning from all neonatal deaths and collate into a quarterly anonymous report to circulate to all units	SSBCNN data accurately reported in national and regional mortality reports	Babu Kumararatne Lead Clinician	Sept-12	Completed in 2012/13, plans for developing in depth mortality reviews in 2013/14
1.3	NICE Specialist Neonatal quality standards Toolkit Principle 7.1	To monitor neonatal units progress against the network standards assessment tool	Quarterly snapshot reports presented and discussed at the network board	Quarterly network reports of revised standards tool at network board meetings	Ruth Moore Network Manager/ Lead Nurse	March-13	Completed in 2012/13, develop into a peer review process in 2013/14
1.4	Toolkit Principle 7.13	To develop and implement a process to review and share learning outcomes from individual unit incidents	Network Manager to review learning from all serious clinical incidents in the network and collate a quarterly anonymous report to circulate to all units	Serious clinical incidents from all neonatal units reviewed with learning shared across the network is minuted in QIPP group minutes	Ruth Moore Network Manager/ Lead Nurse	Sep-12	Commenced in 2012/13, on-going requirement in 2013/14
1.5	Toolkit Principle 1, 7 & 8 NICE Specialist Neonatal quality standard 8 CQUIN NNAP The NHS Outcomes Framework	To develop and implement a monitoring and reporting process of agreed neonatal quality clinical indicators and quality matrixes for use within neonatal services and newborn networks in the West Midlands	Meet with the other newborn networks and WM quality observatory to review the need for a separate WM neonatal quality clinical indicators Meet with the other newborn networks in the WM to review the national neonatal dashboard and agree a	Need for WM Neonatal quality clinical indicators decided and circulated to both networks Information circulated to all neonatal units outlining the agreed approach to	Melanie Sutcliffe Network Clinical Effectiveness Lead Ruth Moore Network Manager/ Lead Nurse	Jun-12	Completed in 2012/13 Completed in 2012/13 Collate network units national

			standardized approach to collecting and reporting each data item	collecting and submitting the monthly data required for the national neonatal dashboard			neonatal clinical quality dashboard items in 2013/14
1.6	Toolkit Principle 8 NICE Specialist Neonatal quality standard 9 The NHS Outcomes Framework	To monitor, analyse and report the 2 year outcomes of babies less than 31 weeks gestation and/or less than 1250gms who have received care in SSBCNN	Long term follow up group to analyse and report on the 2 year outcome data obtained on babies in SSBCNN and the coverage of Bayley screening in the network	An annual report on the 2 year outcomes of babies in SSBCNN circulated and reported on at the network board	C Halahakoon Chair long term follow up group	Sept 2012	Completed in 2012/13, on-going requirement in 2013/14
Objective 2. Best care for babies and families							
	Reference	Intention	Work programme	Audit Indicators	Lead Responsible	Review Date	Progress Review March 2013
2.1	NICE Specialist Neonatal care standards 12 & 13 Toolkit Principle 3 Jamboree 3.5	To roll out Helping Hands parent support groups across the network	Support network parent reps and NICU teams to set up Helping hands support groups in their area	Helping Hands Parent Support Groups are available in Black Country and Shropshire	Julie Ebrey/ Caroline Southall Parent Reps	Sep-12	Group established in Walsall in 2012/13, on-going requirement for Shrewsbury/Telford in 2013/14
2.2	NICE Specialist Neonatal care standards 13 Toolkit Principle 2.7 Jamboree 3.4	Scope current community care provision with a view to identifying changes required to meet NICE Quality Standards	Undertake a review of current community services within the network Make recommendations for change to meet the NICE quality standards to the workforce group	Report of current community services in the network and changes required minuted in the workforce group minutes	Sarah Fulwood / Ruth Moore Network Manager/ Lead Nurse	Sep-12	Review Completed in 2012/13 Carry forward - Need to complete recommendations to workforce group in 2013/14
2.3	Toolkit Principle 4.5	There is a single point of telephone contact for clinical advice, cot/maternal bed availability and the transfer service available 24/7	Work with WM cot location, NTS, SWMNN and commissioners to develop and agree how to implement this	Action plan minuted in network board minutes	Jackie Harrison/ SSBCNN Transport Lead TBA	Sept-12	Work commenced in 2012/13, Carry forward in 2013/14

2.4		Clinical audits improve the quality of care for babies and their families across the network	Facilitate an annual network audit competition Develop a neonatal audit leads group and collate an annual list of all neonatal audits undertaken in the network Coordinate an annual network wide audit	Audit competition winners are announced in the network A list of all neonatal audits is available in the network A report from the annual network audit is discussed at the QIPP group and circulated to all units	Alison Moore Network Audit Lead	Sept 2012	Completed in 2012/13, on-going requirement in 2013/14 Commenced in 2012/13 – carry forward to 2013/14 Commenced in 2012/13 – carry forward 2013/14
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Objective 3: The network is fit for purpose and able to demonstrate added value							
	Reference	Intention	Work programme	Audit Indicators	Lead Responsible	Review Date	Progress Review April 2013
3.1	NICE Specialist Neonatal care standards 7, 11 Toolkit Principle 3 Jamboree 3.5	Decisions made by the SSBCNN are informed with parents views	Network to consider and agree the future mechanism for obtaining parent views in 2012/13 and beyond	Mechanism agreed and minuted in QIPP group minutes	Sanjeev Deshpande, QIPP Chair	Jun 2012	Commenced in 2012/13 – carry forward in 2013/14
3.2	World Class Commissioning Neonatal Toolkit pg 18 +19	To achieve financial balance in the operation and management of the network	To publish a budget plan and quarterly updates	Budget plan agreed by network Board Quarterly updates reported to the Network Board	Ruth Moore Network Manager/ Lead Nurse	Quarterly	Completed in 2012/13, on-going requirement in 2013/14
3.3	Toolkit Principle 8	To produce Network reports to the Board using data from each unit captured from various data sources including; Badger. Net System, NTS and manual data collection	Work with the Trusts and commissioners to develop appropriate, timely reports on network activity & quality. Draft a document outlining the approach to network	Agreed approach to network activity & quality data collection & reporting in 2012/13 minuted in network board meeting minutes.	Ruth Moore Network Manager/ Lead Nurse Mel Sutcliffe Network Clinical Effectiveness Lead	June 2012	Completed in 2012/13 Completed in 2012/13

			activity & quality data collection and reporting for approval by all stakeholders				
3.4	NICE Specialist Neonatal Care Standard 2 Neonatal Toolkit Equity and Excellence: Liberating the NHS	To further develop the newborn network in line with national and local recommendations and feedback	To agree action plans to develop the network in line with recommendations from national and local reviews of networks and neonatal services e.g. West Midlands Review of networks, National Neonatal Taskforce Actively participate in the WM perinatal network provider and commissioning forums	Action plans agreed at network board Updates on progress fed back at network board meetings	Ruth Moore Network Manager/ Lead Nurse	Dec-12	Completed in 2012/13, on-going requirement in 2013/14 with change to ODN Completed in 2012/13, on-going requirement in 2013/14 with changes to SCN and ODN networks nationally
3.5	Toolkit Principle 1	To participate in the national survey of perceptions about the network	All units to participate in the national survey	Report of the findings presented at network board	Ruth Moore Network Manager/ Lead Nurse	Sept-12	Survey Completed in 2012/13
3.6	World Class Commissioning Neonatal Toolkit pg 18 +19 Equity and Excellence: Liberating the NHS	To strengthen the network's involvement in the commissioning process To influence neonatal and maternity service issues being taken forward within the new organisational structures in the NHS	Work with specialised commissioners and the national commissioning board to develop and agree appropriate CQINNS for neonatal services Develop working relationships with emerging local /specialised commissioners, attend appropriate meetings and write to give updates on SSBC Newborn & Maternity Network	Updates of progress recorded in the network board minutes	Ruth Moore Network Manager/ Lead Nurse	Dec-12	Completed in 2012/13, on-going requirement in 2013/14 with changes to local and specialised commissioning in the new NHS

			achievements and work programmes				
3.7	Toolkit Principle 1 The NHS Outcomes Framework	<p>To develop the network workforce required to deliver the network work programme</p> <p>To review the tenure of the lead obstetrician role when the future format of the network is confirmed</p> <p>To appoint a permanent chair for the network when the future format of the network is confirmed</p>	<p>Develop the network clinical effectiveness role to monitor, analyse and report on network activities using the badgernet neonatal data system</p> <p>Draft a discussion paper outlining the options for renewing the lead obstetrician role for discussion and agreement at the network board</p> <p>Draft a paper outlining the process for recruiting a permanent chair for the network to be discussed and agreed by the network board</p>	<p>Network clinical effectiveness lead presentation of data minuted in various network meetings and network board</p> <p>Discussion paper circulated and minutes from the network board reflect the agreement made regarding the lead obstetrician role</p> <p>Discussion paper circulated and minutes from the network board reflect the agreement made regarding the appointment of a permanent chair for the network</p>	<p>Mel Sutcliffe Network Clinical Effectiveness Lead</p> <p>Ruth Moore Network Manager/ Lead Nurse</p> <p>Ruth Moore Network Manager/ Lead Nurse</p>	<p>Oct 2012</p> <p>Dec 2012</p> <p>Dec 2012</p>	<p>Completed in 2012/13</p> <p>Completed in 2012/13</p> <p>Completed in 2012/13</p>
3.8		<p>To publish an annual report detailing all the activities in the Network in 2011/12</p> <p>Present the annual report at an annual general meeting for approval by all stakeholders</p>	<p>Collate information from all network sub groups and activity/outcomes data from each unit's individual annual report into a network annual report</p> <p>Arrange an AGM open to all stakeholders to attend</p>	<p>Annual Report Published, circulated and available on the network's website</p> <p>Minutes from AGM circulated and available on the network's website</p>	<p>Ruth Moore Network Manager/ Lead Nurse</p>	<p>Oct 2012</p>	<p>Completed in 2012/13, On-going requirement in 2013/14</p>