**Staffordshire, Shropshire & Black Country**
Neonatal Operational Delivery Network

# Work Programme 2018 - 20

## Introduction

The Staffordshire, Shropshire & Black Country Neonatal Operational Delivery Network (SSBCN ODN ) is one of 11 neonatal operational delivery networks in England. The SSBCN ODN consists of the Neonatal Services provided by the following six NHS Trusts:

- Royal Wolverhampton Hospital NHS Trust
- University Hospitals of North Midlands NHS Trust
- Shrewsbury and Telford Hospital NHS Trust
- Walsall Healthcare NHS Trust
- Dudley Foundation Hospital NHS Trust
- Sandwell and West Birmingham Hospitals NHS Trust

Operational Delivery Networks will:

- Ensure effective clinical flows through the provider system through clinical collaboration for networked provision of services.
- Take a whole system collaborative provision approach to ensuring the delivery of safe and effective services across the patient pathway, adding value for all its stakeholders.
- Improve cross-organisational multi-professional clinical engagement and patient/carer engagement to improve pathways of care.
- Enable the development of consistent provider guidance and improved service standards, ensuring a consistent patient and family experience.
- Focus on quality and effectiveness through facilitation of comparative benchmarking and auditing of services, with implementation of required improvements.
- Fulfil a key role in assuring providers and commissioners of all aspects of quality as well as coordinating provider resources to secure the best outcomes for patients across wide geographic areas.
- Support capacity planning and activity monitoring with collaborative forecasting of demand, and matching of demand and supply.

**In addition to the specific 2018/19 work programme identified on the next page the SSBCN ODN undertakes the following activities;**

Arranges joint annual meetings with the WM Maternity Clinical Network to meet with the neonatal and maternity services in each Trust to discuss Trust specific issues in order to identify and provide appropriate network support.

Monitors and activity, outcomes, benchmarking neonatal service performance in NNAP, adherence to care pathways, parent's experiences of neonatal services and neonatal staffing and reports these quarterly along with shared learning from serious clinical incidents within each Trust and the WMNTS.

Organises an annual audit and quality improvement competition to share learning across the network.

Reviews and updates the network collections of neonatal clinical guidelines every two years.

Facilitates an annual network neonatal nurse foundation programme quality assured through Keele University and co-ordinate an annual network training and education programme focussed on meeting the needs of multi-disciplinary staff in neonatal and maternity services.

Organises an annual joint Perinatal Mortality Education event with SWMN ODN

Organises an Annual Midlands and East Perinatal Conference with the other neonatal ODNs in Midlands and East.

**Staffordshire, Shropshire & Black Country Neonatal Operational Delivery Network Work Programme 2018-2019**

NHS Outcomes Framework Indicators (February 2018)

**1 Domain 1: Preventing People from Dying Prematurely** 1c Neonatal mortality & stillbirths

| Intention | Deliverables | Leads Responsible | Timeframe | Audit Indicator | Specialised Commissioning Governance Route |
|---|---|---|---|---|---|
| Improve outcomes for babies in SSBCN ODN | SSBCN ODN report on the review of Trust level 2016 MBRRACE-UK Perinatal Mortality Surveillance Reports on 2015 data identifying any cross cutting themes requiring action in SSBCN ODN | Babu Kumararatne Network Lead Clinician Chair Network Mortality Review Group | 15/05/2018 | Reported to network Mortality sub group | Neonatal Quality Oversight Group |
| | SSBCN ODN report on the review of SSBCN ODN SMR in 2016 National Neonatal Data Analyst Unit Mortality Report identifying any actions required in SSBCN ODN | Mel Sutcliffe Network Joint Clinical Effectiveness and Audit Lead | 15/05/2018 | Reported to network Mortality sub group | Neonatal Quality Oversight Group |
| | SSBCN ODN report on the review of Trust level 2017 MBRRACE-UK Perinatal Mortality Surveillance Reports on 2016 data identifying any cross cutting themes requiring action in SSBCN ODN | Babu Kumararatne Network Lead Clinician Chair Network Mortality Review Group | 01/11/2018 | Reported to network Mortality sub group | Neonatal Quality Oversight Group |
| | SSBCN ODN report on the review of SSBCN ODN SMR in 2017 National Neonatal Data Analyst Unit Mortality Report identifying any actions required in SSBCN ODN | Mel Sutcliffe Network Joint Clinical Effectiveness and Audit Lead | 01/05/2019 | Reported to network Mortality sub group | Neonatal Quality Oversight Group |
| | Support neonatal services to implement the national perinatal mortality review tool | Ruth Moore, Network Manager/lead Nurse Babu Kumararatne Network Lead Clinician | 31/08/2018 | Reported to network Mortality sub group | Neonatal Quality Oversight Group |
| | Lead the introduction of independent scrutiny in each neonatal service mortality review process in SSBCN ODN. Write to each Trust requesting volunteers to join a network pool of Medical and Nursing Staff willing to participate as external reviewers. Draft SSBCN ODN independent mortality review process | Babu Kumararatne Network Lead Clinician | 20/11/2018 | Reported to network Mortality sub group | Neonatal Quality Oversight Group |
| Improve the offer of and uptake of post mortems | Develop and implement a web based Neonatal Post Mortem Training Package | Jo Cookson Network Practice Educator / Asha Shenvi Medical Education Lead | 31/12/2018 | Reported to network Mortality and Education and Workforce sub groups | Neonatal Quality Oversight Group |
| Increase the number of babies receiving mother's breastmilk on discharge from neonatal units in SSBCN ODN | Lead a Network wide project to facilitate the attainment of the Neonatal BFI standards in each neonatal service. Review progress in each Trust to commit to the standards and identify any barriers to this. Share details of project and SSBC progress with SWM and Specialised commissioner in order to promote the implementation of the Neonatal BFI standards across West Midlands. | Chair Network Feeding and Nutrition Group Jo Cookson Network Practice Educator | 31/03/2019 | Reported to Network Feeding and Nutrition and Quality Improvement Groups | Neonatal Quality Oversight Group |

**Staffordshire, Shropshire & Black Country Neonatal Operational Delivery Network Work Programme 2018-2019**

NHS Outcomes Framework Indicators (February 2018)

## 2 Domain 2: Improving quality of life for people with long-term conditions

| Intention | Deliverables | Leads Responsible | Timeframe | Audit indicator | Specialised Commissioning Governance Route |
|---|---|---|---|---|---|
| Improve long term outcomes for babies who receive care in SSBCN ODN | Review the data and outcomes in the network quarterly benchmark report and make recommendations to improve outcomes. | Kate Palmer Effectiveness and Audit Lead, Chair, Network NNAP/Badger Champions Meeting | 01/12/2018 | Reported to network NNAP/Badger Champions and QI Groups and SSBCN ODN Board | Neonatal Quality Oversight Group |
| | Add the NNAP report on the proportion of eligible women who receive Magnesium Sulphate prior to delivery less than 30 weeks gestation to the quarterly network benchmark report in 2018/19 and monitor progress in increasing the proportion of eligible women who receive it. | | 10/04/2018 | Reported to network NNAP/Badger Champions and QI Groups and SSBCN ODN Board | Neonatal Quality Oversight Group |
| | Agree metrics for quality and outcomes across both networks with the Specialised Commissioning Quality Lead and how recommendations and actions will be taken forward working at Trust, Network and Commissioner level | Ruth Moore SSBCN ODN Manager/ Lead Nurse | 30/09/2018 | Reported to network NNAP/Badger Champions and QI Groups and SSBCN ODN Board | Neonatal Quality Oversight Group |
| | Develop a network wide two year developmental assessment guideline to reflect changes required in the network process to reflec the NICE development follow up of preterm babies guideline | Chair Network Long Term Follow-Up Group TBC Ruth Moore SSBCN ODN Manager/ Lead Nurse | 31/07/2018 | Reported to network Long term Follow-Up and Guidelines Groups | |

**Staffordshire, Shropshire & Black Country Neonatal Operational Delivery Network Work Programme 2018-2019**

NHS Outcomes Framework Indicators (February 2018)

**3 Domain 3: Helping people to recover from episodes of ill- health or following injury.**

3a Emergency admissions for acute conditions that should not usually require hospital admission

3b Emergency readmissions within 30 days of discharge from hospital

| Intention | Deliverables | Leads Responsible | Timeframe | Audit indicator | Specialised Commissioning Governance Route |
|---|---|---|---|---|---|
| Support trusts and commissioners to develop Transitional care services to reduce avoidable admissions to neonatal units and keep mothers and babies together | Facilitate a meeting with all providers to review benchmark report of current provision and reporting and agree standard recording and reporting of Transitional care (TC) to enable clear demarcation of TC activity and its location.<br>Support development and implementation of unit action plans for future TC services required to meet needs of babies in SSBCN ODN | Ruth Moore,<br>Network Manager/lead Nurse | 31/10/2018 | Reported to network QI group and SSBCN ODN board | Reported to Service Specialist |
| Support trusts and commissioners to identify gaps in the existing community neonatal outreach services to ensure safe and effective discharge to home | Support development of Neonatal Community Outreach Business Cases for Trust submission to Specialised Commissioner. | Ruth Moore,<br>Network Manager/lead Nurse | 31/10/2018 | Reported to network QI group and SSBCN ODN board | Reported to Service Specialist |
| | Participate in the review of business cases and provide support to Trust implementation plans. | Ruth Moore,<br>Network Manager/lead Nurse | 31/12/2018 | Reported to network QI group and SSBCN ODN board | CQUIN Review Meeting |

**Staffordshire, Shropshire & Black Country Neonatal Operational Delivery Network Work Programme 2018-2019**

NHS Outcomes Framework Indicators (February 2018)

**4 Domain 4: Ensuring that people have a positive experience of care**

4c Friends & family Test

4.5 Women's experience of maternity services

4.9 Improving people's experience of integrated care

| Intention | Deliverables | Leads Responsible | Timeframe | Audit indicator | Specialised Commissioning Governance Route |
|---|---|---|---|---|---|
| Ensure parent's views and experiences of neonatal services are refelcted in developing high quality neonatal services | Work with SWM Neonatal ODN to develop and implement a joint Patient Voice and Insight role across both ODNs | Sarah Carnwell<br>Chair Network PPI Group | 31/03/2019 | Patient Voice and Insight role in place | Neonatal Quality Oversight Group<br>Reported to Service Specialist |
| | Support neonatal parents experiences to inform LMS work programmes | Sarah Carnwell<br>Chair Network PPI Group | 31/05/2018 | Neonatal parents recorded as attending LMS meetings | Reported to Service Specialise |
| Ensure parents are fully integrated as partners in their baby's care | Support neonatal services to develop and implement family integrated care (FIC) in SSBCN ODN. Review unit action plans for implementation of FIC and monitor progress with implementation in each unit. | Chair Network Developmental Care Group | 31/03/2020 | Reported to Network Education and Workforce Group | Neonatal Quality Oversight Group<br>Reported to Service Specialist |
| Ensure local neonatal issues are addressed and included within local maternity systems (LMS) | Work with neonatal services and each of the three LMS's in SSBC area to ensure appropriate neonatal representation in each LMS work streams. | Babu Kumaraaratne<br>Network Lead Clinician<br>Ruth Moore,<br>Network Manager/lead Nurse | 30/09/2018 | Neonatal service representation recorded at LMS meetings | Reported to Service Specialise |

**Staffordshire, Shropshire & Black Country Neonatal Operational Delivery Network Work Programme 2018-2019**

NHS Outcomes Framework Indicators (February 2018)

**5 Domain 5: Treating & caring for people in a safe environment and protect them from avoidable harm** 5.5

Admission of full term babies to neonatal care

| Intention | Deliverables | Leads Responsible | Timeframe | Audit indicator | Specialised Commissioning Governance Route |
|---|---|---|---|---|---|
| Support providers and commissioners to plan for safe occupancy and staffing levels in neonatal services | Complete and circulate an updated SSBCN ODN capacity and demand report with 2016/17 and 2017/18 activity and nurse staffing data | Ruth Moore, Network Manager/lead Nurse | 31-Oct-18 | Report discussed at SSBCN ODN QI and Education/Workforce subgroups and Network Board meetings | Reported to Service Specialist<br>Contract Review Meeting |
| | Agree data items for quarterly capacity and demand reporting to Supplier Managers | Ruth Moore, Network Manager/lead Nurse | 30-Sep-18 | Quarterly capacity and demand reporting to supply managers in place and reported to SSBCN ODN board | Contract Review Meeting |
| | Finalise and fully implement the West Midlands Procedure for Escalation of Operational Pressures in Neonatal Services (OPEL) | Sarah Tranter Network Quality Improvement Lead | 31-Jan-19 | Final OPEL Procedure approved by SSBCN ODN board | Reported to Service Specialist |
| | Review Trust workforce plans and monitor staffing levels quarterly to identify progress made against these. | Joanne Gregory and Asha Shenvi Joint Chairs Network Education and Workforce Group | Quarterly in 2018/19 | Reported to network Education and Workforce group and SSBCN ODN Board | Neonatal Quality Oversight Group<br>Reported to Service Specialist |
| | Work with neonatal services and education providers to agree appropriate new roles and training routes for staff in neonatal services including the nursing associate role and apprenticeship training | | 31-Mar-19 | Reported to network Education and Workforce group and SSBCN ODN Board | |
| | Evaluate the effectiveness of the network neonatal nurse foundation programme in the recruitment and retention of neonatal nurses in SSBCN ODN | Lynsey Clarke Network Practice Educator | 31-Oct-18 | Reported to network Education and Workforce group and SSBCN ODN Board | |
| Support Trusts to reduce avoidable term admissions to neonatal units, provide leadership to facilitate the implementation of the NHS England Improving Value Scheme – Avoiding Term Admissions into Neonatal Units (ATAIN) across the ODN | Identify the Neonatal and Maternity ATAIN leads in each Trust. | Ruth Moore, Network Manager/lead Nurse | 30-Jun-18 | Reported to network QI group and SSBCN ODN board | |
| | Complete and submit the data template requested by Midlands and East Regional Hub | | 30-Apr-18 | | |
| | Support Trusts with high levels of Term admissions to develop and implement action plans to reduce this to 3% of Live Births | | 31-Mar-20 | | Reported to Service Specialist<br>QIPP Board<br>Contract Review Meeting |
| Ensure quality of neonatal services through comparative benchmarking and auditing of services | Review each neonatal service NHS England QST national peer review reports and action plans, supporting each service/trust to meet the Neonatal Critical care Peer review measures. | Ruth Moore, Network Manager/lead Nurse | 31-Oct-18 | Reported to network QI group and SSBCN ODN board and AGM | |
| | Identify any cross cutting themes from the individual trust reports and the national report when published that require a network wide action plan | | 31-Oct-18 | Reported to network QI group and SSBCN ODN board | Neonatal Quality Oversight Group<br>Reported to Service Specialist |
| | Lead the replacement of the previous SSBCN ODN standards assessment process | Ruth Moore, Network Manager/lead Nurse | 31-Oct-18 | Reported to network QI group and SSBCN ODN board | |
| | Review BAPM/BLISS Quality standards document and make further recommendations to any changes required to the standards assessment process in SSBCN ODN | Shiva Shankar, Chair Network QI Group | 31-Oct-18 | Reported to network QI group and SSBCN ODN board | |

**Staffordshire, Shropshire & Black Country Neonatal Operational Delivery Network Work Programme 2018-2019**

## 6 Fit for purpose neonatal operational delivery network

| Intention | Deliverables | Leads Responsible | Timeframe | Audit indicator | Specialised Commissioning Governance Route |
|---|---|---|---|---|---|
| Ensure robust data monitoring, analysing and reporting | Complete the recruitment of a Joint data analyst with SWMN ODN | Ruth Moore,<br>Network Manager/lead Nurse | 31/10/2018 | Data Analyst in post | Programme Board |
| Ensure good clinical engagement across the network | Complete the integration of the neonatal service at Sandwell and West Birmingham Hospitals NHS Trust into the SSBCN ODN | Ruth Moore,<br>Network Manager/lead Nurse | 31/08/2018 | Birmingham City Neonatal Service is represented at all SSBCN ODN meetings and City data included in network reports | Neonatal Quality Oversight Group |
| Ensure Neonatal ODNs structure in West Midlands meet current and future requirements within existing resources | Work with SWMN ODN, Commissioners and stakeholders to identify a fit for purpose neonatal ODN structure in the West Midlands | Ruth Moore,<br>Network Manager/lead Nurse | 31-Oct-18 | Reported to SSBCN ODN board and NHSE WM Specialised Committioning Programme Board | Programme Board |
| Ensure neonatal care pathways are refreshed in line with the recommendations in the West Midlands Neonatal Service Review Report | Work with SWMN ODN, Commissioners and stakeholders to refresh and improve the SSBCN ODN neonatal care pathways aligning these as appropriate to maternity, paediatric and community pathways | Ruth Moore,<br>Network Manager/lead Nurse<br>Babu Kumararatne<br>Network Lead Clinician | 31/01/2019 | Updated SSBCN ODN neonatal care pathways document approved at SSBCN ODN Board and circulated and available on website | Neonatal Quality Oversight Group Reported to Service Specialist |
| Ensure the National neonatal transformation programme is informed by the issues experienced in SSBCN ODN | Attend national meetings and respond to information requests about neonatal services in SSBCN ODN.<br>Report back to SSBCN ODN progress and issues being addressed by the national neonatal transformation programme | Ruth Moore,<br>Network Manager/lead Nurse<br>Babu Kumararatne<br>Network Lead Clinician | 31/10/2018 | Reported to SSBCN ODN board | Neonatal Quality Oversight Group Reported to Service Specialist |