

Neonatal Service Review

Terms of Reference

1. Purpose

The Neonatal Service Review forms part of the Specialised Commissioning QIPP portfolio of work. The definition of 'Local Service Review' is taken from the work done over November 2014 by the national team to define a framework for service reviews.

'Local Service Review – A commissioner led review which considers the performance of the current provider delivering a service, to determine operational, performance or service model changes required, to address a known issue (e.g. poor patient feedback / 18 week problems, funding issues) and ensures the existing service can meet future local health needs'.

The neonatal service review will consider local need, current provider capacity, future capacity required to meet that need, factors impacting both need and capacity that are to be reflected in local arrangements (pathways and protocols) and quality improvements. The output in the form of a revised service model across the proposed provider landscape is likely to lead to significant incremental change in the current service.

2. Background

- 2.1. The case for change is due to the rising birth rates, increasing medical and social complexity of the demographic population, financial and workforce constraints (meeting BAPM standards for nursing staff) and the national choice agenda that all put pressure on maternity and newborn services.
- 2.2. Across the West Midlands there are problems with capacity and meeting demand in NICU Units and variation in cot occupancy levels across the different levels of care. The numbers of neonatal births is predicted to rise over the coming years. The predicted growth for 2015/16 is 3.99% (national financial team forecast). There are expected to be further resource implications in line with more complex pregnancies, increase in caesarean section and instrumental deliveries.
- 2.3. There are issues with flow and discharge and variations to the model of transitional care and early supported discharge to community settings
- 2.4. There are 7 Units with derogations in place and mixed utilisation rates ranging from 40 to 120% occupancy

3. Aims

- 3.1. The purpose of the local neonatal review is specifically to:
 - Review required changes to unit configurations in each network and designated levels of care at the 14 Units in West Midlands. This is to be done by an assessment of capacity and demand across the 14 Units based on two year's activity data; ensuring all factors affecting demand are factored into the assessment.

- Provide options for revisions to network configurations and levels of care
- Appraise options via assessing impact to activity levels, cost, price, workforce and quality at each unit
- Support actions towards improved clinical outcomes, access and flow, clinical utilisation by e.g. standardising admission and discharge criteria, revising repatriation procedures, updating local care pathways and protocols to mitigate issues of flow
- Make recommendations for the revised service model across West Midlands. This includes improving discharge to community settings and the model of transitional care.
- Provide summary information to ensure 2016/17 contract activity is set in line with information from the review and standard information flows to the contract
- Provide information for procurement if required.

3.2. This is to be achieved by a thorough assessment of capacity and demand and impact of options on activity, price, workforce and quality followed by options appraisal and proposal for new service model and contract planning with providers.

4. Milestones and Deliverables

4.1. Key milestones and timescales for the review are as follows:

Quarter 1	Completed capacity and demand templates and analytical assessment across the four information parameters
Quarter 2	Options for reconfiguration of units and changes to levels of care
Quarter 3	Impact assessment and recommendations for future service model
Quarter 3/4	Public Consultation (depending on changes required)
Quarter 4	Implementation

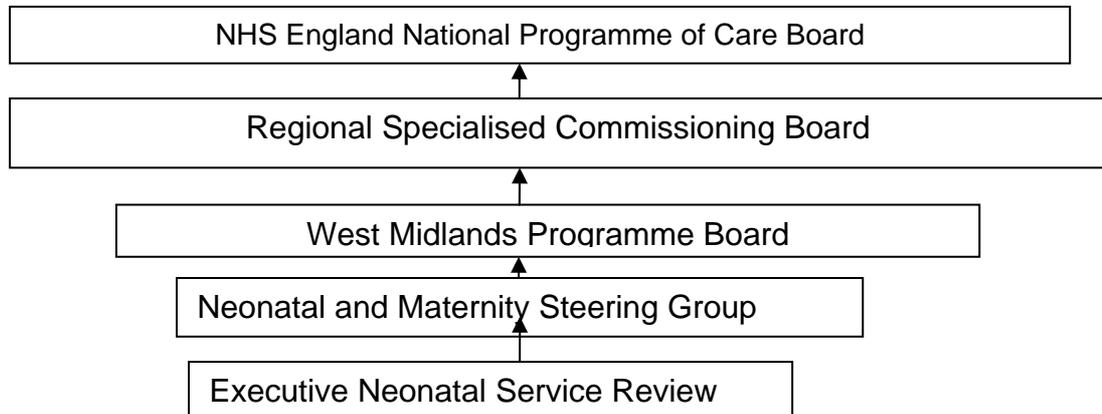
5. Accountability

5.1. An Executive Service Review Group has been especially set up for the review

5.2. The purpose of the group is to:

- 5.2.1. Oversee project progress, agree actions from highlight reports and make timely decisions at agreed decision points - see Gantt chart, section 8.4 of PID
- 5.2.2. To provide executive advice and guidance to the review
- 5.2.3. To make a recommendation to the programme boards for formal approval
- 5.2.4. Oversee communications and ensure public consultation is initiated as required
- 5.2.5. Agree revisions to the service model
- 5.2.6. Oversee the implementation plan and benefits monitoring plan
- 5.2.7. Review Contract and Badger in month activity and bring issues relating to capacity for discussion and decision making

5.3. The group is accountable as follows (to be updated post regional governance model being established):



6. Membership

6.1. Group membership is the project group described in the resource plan section 4 of the PID and is to include:

- Rachel O Connor, Head of Specialised Services, Chair
- Alison Bedford Russell, Clinical Director for Maternity and Neonatal Services, West Midlands Strategic Clinical Network
- Kate Burley, Maternity and Children Network Manager, West Midlands Strategic Clinical Network
- Kate Branchett, Patient Experience Lead, West Midlands Strategic Clinical Network
- Louise Stead, Senior Supplier Manager, NHS England, Specialised Commissioning – as required
- Philippa Turner, CCG Representative, Worcestershire CCGs
- Simon Jenkinson, Obstetric Representative
- Ruth Moore, North ODN Network
- Tony Dining, Central ODN Network
- Vishna Rasiah, South ODN Network Clinical Lead
- Vandna Najran, Local Service Specialist, NHS England, Specialised Commissioning
- Chris Capewell, Communications Lead
- Angela Young, Quality Lead

7. Interdependencies and Interfaces

7.1. Key interdependencies and interfaces include:

- National Maternity Review (Dr Alan Fenton, Consultant Neonatal Paediatrician, Newcastle-Upon-Tyne Hospitals NHS FT)– March to December 2015
- Fetal Medicine
- Paediatric Specialised Services – Surgery (particularly cardiology) and Paediatric Intensive Care

8. Frequency of Meetings

8.1. The Group will meet bimonthly.

Date produced: March 2015

Date for review: April 2016