

Children & Young People Committee Meeting on Thursday 7 March 2013

Evidence Paper on Progress against the Neonatal Capacity Review

Purpose of Paper

To update the Children and Young People's Committee on progress against the second Neonatal Capacity Review published in January 2012.

Neonatal Capacity Review 2013

The 2013 update of the Neonatal Capacity Review was discussed and agreed by the Neonatal Network on the 7 February 2013. The Neonatal Network will be providing a copy of the review to the Committee and providing evidence to the Committee.

I acknowledge there has been improvement over the last year in many areas, however I know there is more to do to continue to drive up service standards in this area.

Progress since January 2012

Cot Capacity and Locations

There has been a modest overall improvement in cot numbers. During 2012, a number of units revised their cot allocations to implement recommendations of the 2012 Review.

In February 2012, the Intensive Care cot at Nevill Hall was re-designated for high dependency care. In November 2012, 2 Intensive Care cots were moved to Singleton Hospital from Princess of Wales, allowing better use of this capacity which was previously under utilised. Correspondingly, 4 special care cots were moved to Princess of Wales from Singleton. In Ysbyty Glan Clwyd, cots were re-designated in July 2012 to better reflect the activity taking place across the three levels of care.

Workforce

Staffing issues remain a major challenge and this is highlighted in the latest capacity review. It is recognised there is more to do and I have set this out in the challenges section below. In most areas there has been a modest improvement in hands-on nurse staffing levels. The gap in nursing shortfall has fallen by nearly 50% from 82.64 whole time equivalent (wte) in the previous review to 42.027 wte in this review.

There has been an improvement over the last year in the coordination of teaching and training, including the development of multi professional training opportunities.

Data and Information

The implementation of the BadgerNet Neonatal Information Technology system has seen a dramatic improvement in the information available to support service planning. Health Boards and the network now have a much better understanding of activity and patient flows within and between neonatal services.

This information is also being used to drive better communication between units enabling them to focus activity across geographical areas and not focus on individual LHB activity.

The Network has been working with all units in Wales to support the adoption of a neonatal nurse acuity tool which has been developed by Abertawe Bro Morgannwg University Health Board (ABMU). The tool measures, on a daily basis, the staff available on a unit and patient acuity and links to a Unit's escalation policy. It identifies cot acuity against the staff available and shows when safe levels of care are being breached.

The introduction of the nurse acuity tool across all units in Wales will provide, in future, an assessment of compliance on a shift by shift basis. This is in addition to what is currently collected, based on recruited establishment which takes no account of whether cots are occupied or not.

Further Areas of Progress

- The appointment of a Neonatal Network Lead Nurse (5 February 2013)
- Neonatal Network web site launched January 2013
- Appointment of an additional parent representative from South Wales to the Network
- Work has started to establish an All Wales Neonatal Quality Dashboard
- The Network is working with BLISS to support parents and gain their feedback
- Maintenance and monitoring of the 12 hour transport service to ensure it meets the needs of the service. Work is in progress to identify options to extend the hours of the Cymru Inter Hospital Neonatal Transfer Service (CHANTS)
- Regular meetings established with English transport teams and Networks to review arrangements for cross border transfers of patients, repatriations and cot availability

Challenges and Priorities for 2013

Cot Capacity

There is still a shortfall in cot capacity. Some of these capacity issues are compounded by appropriate cot usage and babies not being appropriately stepped down through the system to free intensive care cots. Welsh Health Specialised Services Committee (WHSSC) has approved a business case to provide 2 additional HD cots. These new cots will improve service by repatriating funds currently used to pay for cots outside the Wales network due to insufficient surge capacity.

The Network is working with LHBs and WHSSC to improve cot numbers in line with recommendations in the Capacity Review 2013.

The Capacity Review underlines the importance of using a service model in all parts of Wales which complies with agreed standards, to achieve the best possible outcomes for sick and premature babies.

Workforce

Making progress to resolve workforce issues is a key priority. The Neonatal Network is:

- Developing a robust neonatal workforce plan (medical, nursing, therapies) for the next 5-10 years
- Working with LHBs to establish nurse clinical rotation programmes to support competency development

- Developing multi-professional training, based on an audit of needs across LHBs
- Implementing the nurse acuity tool.

Transport

The Neonatal Network is:

- Working with LHBs, via a working group, to agree plans to extend the current 12 hour transport service
- Continuing to work with partners to realise potential synergies from the development of air ambulance retrieval
- Engaging with LHBs on transport requirements which fall out of reconfiguration plans.

Physical Infrastructure

There is a need to improve the physical environment in a number of units. In order to achieve this, I recently agreed £3.24 million capital funding for the major refurbishment of the Neonatal Unit at Singleton Hospital, Swansea.

The Unit provides services across South West Wales for mothers with high risk pregnancies who are transferred from other units to give birth. It also cares for sick babies born as early as 23 weeks, transferred from other units for intensive care.

The refurbishment will provide isolation facilities and allow the Neonatal Unit to 'flex' cots from 12 to 18 Intensive Treatment/High Dependency cots depending on the level of care required. Also included in the plans are beds for parents, a quiet room and new storage facilities.

Accountability

Since 2012 I have taken and approved the following actions:

- In February 2012 I wrote to LHB Chairs expressing my concerns and expectation LHBs take urgent action to ensure operational risks and issues were addressed.
- David Sissling, Chief Executive of NHS Wales wrote to LHB Chief Executives seeking written assurances they have effective neonatal action plans in place and to take urgent action to update their action plans
- All units were visited in summer 2012 by senior Welsh Government health professionals with follow up discussions held in November and December 2012 to help LHBs maintain focus and priority. Since 2012, neonatal cot status has been included in the daily Executive conference call in order to manage service pressures
- The Neonatal Network is visiting all LHBs this week.

I will continue to hold LHBs to account using advice on achievement of standards from the Neonatal Network.

Lesley Griffiths AM
Minister for Health and Social Services