

Children and Young People Committee

CYP(4)-16-12 Paper 1

Neonatal Care – Evidence to Committee – Minister for Health and Social Care

Purpose of Paper

I updated the Children and Young People's Committee in February 2012 on the current position against each of the recommendations in the former Committee's report. This paper provides further updates on action since February and confirms my expectations of Local Health Boards (LHBs) ahead of my oral evidence on 31 May.

Background

LHBs are responsible for securing and funding safe, sustainable and high quality neonatal care across Wales. For intensive care and high dependency care provided in Cardiff and Swansea, LHBs fulfil this role through their joint planning work on the Welsh Health Specialised Services Committee (WHSSC). Other high dependency care and special care baby services are planned and secured by individual LHBs.

In 2010, the former Health, Well Being and Local Government Committee published a series of recommendations following its enquiry into neonatal care. The then Minister for Health and Social Services accepted the recommendations and LHBs were tasked with taking prompt action, supported by the All Wales Neonatal Network, a sub committee of WHSSC.

The Network has published 6 monthly audits of compliance with standards and has shown considerable progress in all areas of Wales but there are still a number of high risk areas, especially nurse and medical staffing and cot acuity (mis-match of low dependency babies in higher dependency cots) .

Action since last update to Committee in February 2012

Despite some good work having been undertaken, I am still not satisfied with the overall pace of improvements in neonatal services across Wales, particularly in terms of compliance with the All Wales Neonatal Standards and staffing levels following the second review of capacity. There are issues with poor acuity which offer potential for more efficient configuration of cots, also reducing the need for transport of pregnant mothers out of Wales for delivery.

I, therefore, wrote to LHBs Chairs in February, expressing my concerns and expectation that LHBs take urgent action to ensure operational risks and issues are addressed. In addition, David Sissling, Chief Executive of NHS Wales, wrote to LHB Chief Executives seeking written assurances they have effective neonatal action plans in place to address those risks and issues identified by the All Wales Neonatal Network led review of capacity and staffing levels. LHBs were asked to take urgent action to update their action plans and to submit their plans to him.

Current Position

Overall the action plans do not fully address all the issues, including the need to re-organise current services to ensure they are being used efficiently and effectively. The organisation of neonatal care is pivotal to the organisation of obstetric and paediatric services and, therefore, must form part of the broader service reorganisation plans being developed by LHBs for consultation later this year. The action plans do not sufficiently recognise this nor demonstrate the necessary level of collaboration on the matter with neighbouring LHBs

To provide strategic leadership and guidance, Welsh Government senior health professionals and the Lead Clinician of the Neonatal Network, will be meeting LHBs in South West Wales, South East Wales and Betsi Cadwaladr University (BCU) LHB over the next few weeks to develop the plans further. This process will look to identify 'quick wins' ahead of the need to consult on re-organisation and make optimal use of existing resources.

They will be tasked with examining many of the issues previously raised by the Committee including:

- staffing and activity levels to meet future demands
- staffing ratio guidelines in compliance with the British Association of Perinatal Medicine as set out in the All Wales Neonatal Standards
- delivery and monitoring of the All Wales Neonatal Standards
- cot usage, acuity efficiency and supportive services
- staff training

The future organisation of neonatal services is being discussed within three planning areas – Hywel Dda, South Wales and BCU – each collaborating with Powys LHB and other bordering authorities. These regions are all engaging in wide engagement with clinical staff and, in the case of Hywel Dda, with the public. Plans will be developed for public consultation due in the summer or autumn of 2012. These time scales are required for the proper due process of service re-configuration.

Each organisation will have to present its plans for scrutiny by the National Clinical Forum. The forum includes, within its membership, representatives of the National Specialty Advisory Groups for Child Health, Women's Health and Royal College of Midwives. The session held in April 2012 was dedicated to paediatric services and included extensive discussions about the challenges within neonatal services. Fully formed plans for neonatal services are not yet available for this independent scrutiny.

Progress by the All Wales Neonatal Network

My paper to Committee in February set out the large amount of work undertaken by the Neonatal Network since it was set up in 2010.

Key achievements include:

- the introduction of the cot locator system to help optimise critical care capacity across Wales and supports individual units in facilitating transfers as well as supporting the return of babies back to their home;

- the introduction and rollout of the BadgerNet clinical information system throughout Wales in 2011 which is now in all units in Wales. All Neonatal units have committed to submitting data to the Annual National Neonatal Audit Programme in 2012 which will enable a direct comparison in Wales with services in England. I expect LHBs to use this audit report to inform their current work to make rapid improvements to services and I expect the NHS Wales to participate in the 2012 audit;
- In January 2011, neonatal transport services commenced in both North and South Wales, providing dedicated transport teams capable of retrieving babies during the 12 hour period 8.00 am – 8.00 pm. The Neonatal Network worked with the Welsh Ambulance Service (WAST) on the design and procurement of a dedicated ambulance and crew in South Wales. In July 2011, I officially launched the Cymru Inter Hospital Acute Neonatal Transfer Service (CHANTS). In North Wales. The transport team continues to use the services of WAST as the transfer numbers did not necessitate a dedicated vehicle. Both services are reporting excellent outcomes and during the first quarter of 2012, 133 transfers were undertaken in South Wales and 18 in North Wales. The number of transfers by English transport teams have significantly reduced since the Welsh service became operational. The network is continuing to monitor the capacity of the 12 hour transport service and the Neonatal Steering group is due to receive an update report in July 2012.

I will continue to monitor Local Health Boards' action to address and improve the safety, sustainability and quality of neonatal care.