



The Northern Neonatal Network
An Operational Delivery Network
Website - www.nornet.org.uk



Chair: Deborah Jenkins

deborah.jenkins@stees.nhs.uk

Clinical Lead: Dr Sundeep Harigopal

sundeep.harigopal@nuth.nhs.uk

P.A. 0191 2825755

Nurse Lead: Lynne Paterson

lynne.paterson@stees.nhs.uk

(01642) 854871

Manager: Martyn Boyd

Northern Neonatal Network, Trust Headquarters (Room 248), Sunderland Royal Hospital, Kayll Road, Sunderland, SR4 7TP

martyn.boyd@chsft.nhs.uk

Office line (0191) 541 0139

Mobile 07795062535

Northern Neonatal Network Care Pathways – July 2015

Gateshead Health NHS Foundation Trust - Queen Elizabeth Hospital

Scope of care

Gateshead Health NHS Foundation Trust provides neonatal services on its Queen Elizabeth Hospital site. Because of the very close proximity of the Unit to the Royal Victoria Infirmary, Newcastle NICU, there is a strong link between the two sites and babies requiring ongoing intensive care will routinely be transferred there. The current services provided on this site are as follows;

SCBU, Queen Elizabeth Hospital, Gateshead

Current Unit capacity

12 Special Care cots

Annual number of deliveries

1884 (April 2014 – March 2015 figures)

Annual number of admissions

252 (April 2014 – March 2015 figures)

Current threshold for routine ante-natal transfers

Generally obstetricians will try to transfer <30/40 gestation mothers to a Level 3 NICU hospital.

Current threshold for routine post-natal transfers

<30/40 are routinely transferred to a Level 3 NICU for Intensive care.

Other thresholds for routine post-natal transfer

Babies who can be cared for and requiring investigations that can be undertaken at Gateshead will usually not be transferred. Examples of those who we will require transfer include: babies with significant congenital abnormalities, babies with HIE or Babies with difficult to control seizures. Severely growth restricted babies that are likely to need TPN. Surgical referrals. Those Babies requiring exchange transfusion (rather than a specific bilirubin threshold). Also, babies requiring a cardiac assessment - usually involving an unexpected post-natal finding or a PDA in a pre-term. Other cases will be discussed on an individual case by case basis with clinicians in one of the Level 3 NICUs, typically Newcastle.

Very occasional babies requiring liver assessment will be transferred to St James Hospital, Leeds.

Routine investigations/tests/screening currently undertaken

ROP screening is performed on-site by the consultant Ophthalmologist, (currently Miss Hillier) from Newcastle(RVI). EEG's are not done on-site and would require transfer. MRI and CT scan may be done on an individual basis.

Surgical procedures undertaken or post-surgical care provided if not?

No surgery is currently provided at Gateshead. If babies require laser treatment for ROP, they will be transferred to Newcastle.

Cooling for H.I.E undertaken?

The SCBU is currently passively cooling babies for HIE prior to transfer to a NICU for active cooling if required/indicated.

T.P.N. provided on-site?

No. There are no on-site facilities for care of indwelling long lines and TPN.

Neonatal community outreach team/services provided?

Gateshead does provide a neo-natal community nursing service - mostly related to oxygen dependant babies, feeding or developmental issues but once again these are often decided on a case by case basis.

Transitional Care provision on-site?

Gateshead does provide some limited transitional care facilities on their post-natal ward with oversight by the neo-natal team.