



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



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Northern Neonatal Network Care Pathways – January 2014

North Cumbria University Hospitals NHS Trust – Cumberland Infirmary, Carlisle & West Cumberland Hospital, Whitehaven

Scope of care

North Cumbria University Hospitals NHS Trust provides neonatal services on two sites – at the Cumberland Infirmary, Carlisle and the West Cumberland Hospital, Whitehaven. These Units are geographically more distant and remote from the other Network NICUs/SCBUs, Whitehaven in particular, providing challenges to the transport teams from Newcastle and Middlesbrough as well as obstetric ante-natal transfers. There is a degree of collaboration and co-operation between the two Units and both are overseen by the same Divisional/Directorate management team, although there are currently no systems in place for staff rotation. The current services provided on each site are as follows;

SCBU, Cumberland Infirmary, Carlisle

Current Unit capacity

12 Special Care cots

Annual number of deliveries

1742 (April 2012 – March 2013 figures)

Annual number of admissions

236 (April 2012 – March 2013 figures)

Current threshold for routine ante-natal transfers

Generally obstetricians will try to transfer <30/40

Current threshold for routine post-natal transfers

Similar to ante-natally, babies born <30/40 are likely to be transferred as they are more likely to be ventilated, but sometimes babies not ventilated who are <30 weeks gestation will be kept at Carlisle if there are no feeding issues.

Other thresholds for routine post-natal transfer

Babies who can be cared for and requiring investigations that can be undertaken at Carlisle will usually not be transferred. Examples of those who we *will* require transfer include: Surgical babies, babies with HIE if ventilated or if fits can't be stabilised, feeding difficulties and where TPN is needed, diagnostic difficulties requiring opinion and or for certain tests (EEG, Echo)

Routine investigations/tests/screening currently undertaken

Cerebral, abdominal & hip Ultrasounds, ROP screening, Hearing testing. CT and MRI might be done on a case-by-case basis but require special arrangement. Often PACS transfers for tertiary radiology opinion

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

Many surgical cases will go home direct from Newcastle. Carlisle SCBU will care for Stent babies and have done so both on SCBU and children's ward. Some babies who have had a tracheostomy may be cared for on the on SCBU but these children tend to go to children's ward rather than SCBU in view on on-going care needs and instances of this are very rare.

Cooling for H.I.E undertaken?

The SCBU is currently passively cooling babies through environmental measures. No specific equipment is being used for this.

T.P.N. provided on-site?

No

Neonatal community outreach team/services provided?

The Community Children's Nursing team arrange installation of oxygen and supervision of patients at home on O₂. Tube feeding (NG and PEG) babies and those requiring ongoing, Tracheostomy care will also be cared for by them; however, this is not a neonatal nurse team from the SCBU.

Transitional Care provision on-site?

This is very limited. Babies needing antibiotics IV can reside with mother on postnatal but come through to SCBU for treatments. Heel prick SBRs or glucose samples are done by midwives but venous samples are required to be done on SCBU. Babies can have Phototherapy on post natal ward with this proviso while SBR levels are monitored. Babies needing tube feeds are admitted to SCBU.

SCBU, West Cumberland Hospital, Whitehaven

Current Unit capacity

10 Special Care cots

Annual number of deliveries

1387 (April 2012 – March 2013 figures)

Annual number of admissions

212 (April 2012 – March 2013 figures)

Current threshold for routine ante-natal transfers

Generally obstetricians will try to transfer <32/40, unless in established labour, in which case they would normally be delivered at Whitehaven and then transferred post-natally as required.

Current threshold for routine post-natal transfers

Whitehaven will normally transfer all babies that need ventilation (end tracheal ventilation). If babies require CPAP and short term ventilation, they will usually be cared for internally and not transferred out. This was not determined by gestation only.

Other thresholds for routine post-natal transfer

Babies who can be cared for and requiring investigations that can be undertaken at Whitehaven will usually not be transferred. Examples of those who we *will* require transfer include: Surgical babies and babies where TPN is needed.

Routine investigations/tests/screening currently undertaken

Various routine bloods (some done locally and others sent away) ROP, U/S, CT scan

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

No surgery for less than babies/children under 2yrs of age is currently provided at Whitehaven.

Cooling for H.I.E undertaken?

The SCBU is currently providing passive cooling babies through environmental measures.

T.P.N. provided on-site?

No

Neonatal community outreach team/services provided?

There are neonatal community nurses, who will usually discuss babies approaching discharge and that may require ongoing care via ward rounds but this will also be workload-dependent.

Transitional Care provision on-site?

Pre-discharge only.