



Northern Neonatal Network

Quarterly Report

Q4 Jan-Mar 20



This report is a summary of the dashboard data submitted every month by each of the 8 Trusts that make up the Northern Neonatal Network. These figures are taken from both the BadgerNet Database where the required data is available and the Dashboard returns that have been supplied to Mark each month.

It is important to note the following when looking at these reports;

- All reports use the BAPM 2011 definitions. This includes a “Normal Care” category. If ONLY “Carer resident – caring for baby” or the “None or >4hourly intervals” for observations/monitoring on the “general summary” page is ticked, this will classify as a “normal care” day. Under current commissioning guidance, unlike “special care” days, these are not funded. We have included these days as they are what the system reflects for each Unit. ***You may wish to check these for accuracy of reporting purposes.***
- Transitional Care (TC) activity is usually supplied manually via the Monthly data Dashboards and reported where available. Some Units are moving to admit TC babies onto Badgernet but currently other “TC days” on the system typically refer to pre-discharge “rooming in” activity or “place of care” being wrongly ticked. However, all are included as available
- The staffing level reports are calculated by mapping nurse staffing levels submitted by Unit managers via Badgernet against the activity (baby numbers and their level of care) generated by the new BAPM 2011 definitions.
- The definitions for each of the included items are those given on the dashboard.
- The reports relating to transfers in Section 3 are taken entirely from the transport record sheets completed by NNeTS (Northern Neonatal Transport Service). Interpretation of these in respect of some of the coding (particularly relating to “urgency”) is often highly subjective, but to minimise this, we have tried to rely on just a few key definitions that may still provide a useful indication of our Network’s transport team’s activity. The charts are therefore accompanied by some boxes that explain the basis for the definitions used.
- Many of these metrics and reports are replicated for the three Local Maternity Systems (LMS) in our region and distributed separately to the appropriate stakeholders in them where they are discussed in their relevant Board meetings
- We are working with the Maternity Network to try and get gestational birth data for more accurate reporting, however, this is a work in progress, hence the incomplete charts on page 2 but this remains our aim and will be in the format as laid out there once available.

We continue to invite constructive criticism and feedback from all our Stakeholders across the Network to further refine and improve them. It is our hope that these quarterly Reports will continue to provide a rich but useful source of data for both Network and individual Units/Trusts and help determine issues across the Network in all our Units in relation to their activity and capacity, thus informing future strategic discussions and planning of neonatal services.

As always, the aim of this is to provide the very best service available to the babies and families within our Network and thus meet our one core principle – *“To give the highest possible standard of safe, effective care to babies and their families.”*

Martyn Boyd, Network Manager/Mark Green, Network Data Manager
May 2020

Section 1 - Activity

Indicator	RVI	James Cook	Sunderland	North Tees	Cramlington	Carlisle	Darlington	UHND	Gateshead	West Cumberland
Births										
Live Births	1485	1026	927	621	661	394	451	607	459	262
Live births by gestation (wks.)										
<23										
23-27										
28-31										
32-36										
=>37										
Unknown										
Live births by birthweight (g)										
<750										
750-999										
1000-1499										
1500-1999										
2000-2499										
>2500										
Admissions										
Total Admissions	189	144	88	68	68	61	44	60	56	21
1st Admissions	150	104	58	57	47	46	31	43	36	16
Term admissions	68	44	20	34	25	24	18	19	15	6
% term admissions (births)	4.9%	4.6%	2.3%	5.9%	4.1%	6.5%	4.3%	3.4%	3.5%	2.5%
% term admissions (admissions)	45.3%	42.3%	34.5%	59.6%	53.2%	52.2%	58.1%	44.2%	41.7%	37.5%
Care Days										
IC days	769	537	265	12	9	14	2	7	2	6
HD days	694	721	356	50	27	49	23	79	17	23
SC days	946	1022	676	466	600	434	405	462	498	160
NC days	36	0	0	31	14	20	1	21	47	1
TC days	1152	369	200	266	193	84	297	412	273	68

<30 week Exceptions

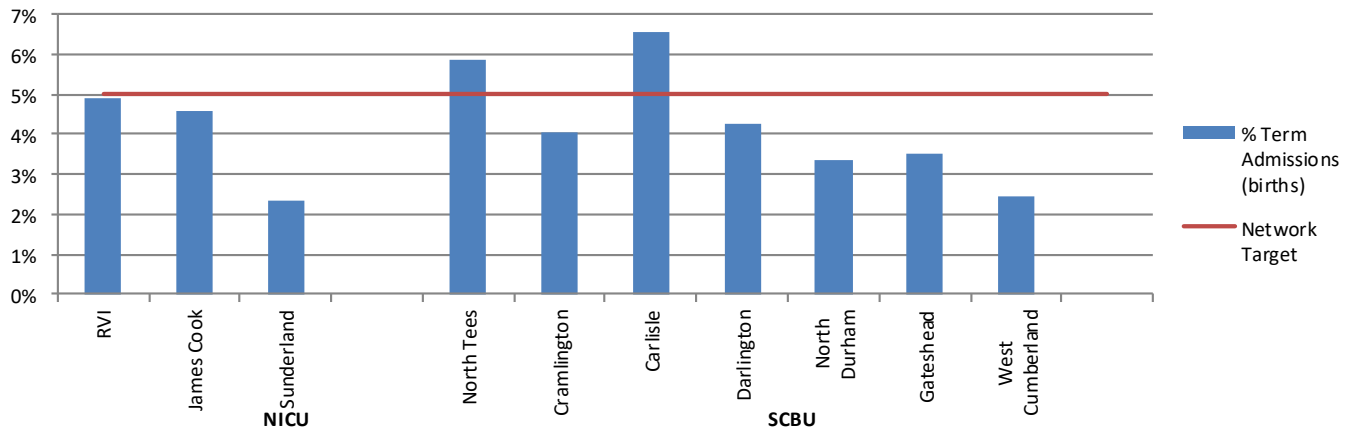
BookingName	PlaceOfBirthName	GestationWeeks	DischargeHospitalName
Cumberland Infirmary	Cumberland Infirmary	29	Wishaw General Maternity Hospital
Cumberland Infirmary	Cumberland Infirmary	29	Wishaw General Neonatal Unit
Cumberland Infirmary	Cumberland Infirmary	28	The Royal Victoria Infirmary (Newcastle)
Northumbria Specialist Emergency Care Hospital	James Cook University Hospital	29	
Northumbria Specialist Emergency Care Hospital	James Cook University Hospital	27	
Northumbria Specialist Emergency Care Hospital	James Cook University Hospital	29	
Northumbria Specialist Emergency Care Hospital	Northumbria Specialist Emergency Care Hospital	25	Sunderland Royal
Northumbria Specialist Emergency Care Hospital	Sunderland Royal	29	
Northumbria Specialist Emergency Care Hospital	Sunderland Royal	29	
Queen Elizabeth Gateshead	Queen Elizabeth Gateshead	28	Sunderland Royal
Queen Elizabeth Gateshead	Queen Elizabeth Gateshead	27	Sunderland Royal
Univ. Hospital of North Durham	Sunderland Royal	26	
Univ. Hospital of North Tees	Univ. Hospital of North Tees	28	James Cook University Hospital
Univ. Hospital of North Tees	Univ. Hospital of North Tees	28	James Cook University Hospital
West Cumberland Hospital (Mat)	West Cumberland Hospital	25	The Royal Victoria Infirmary (Newcastle)

Pathway Exception 60%

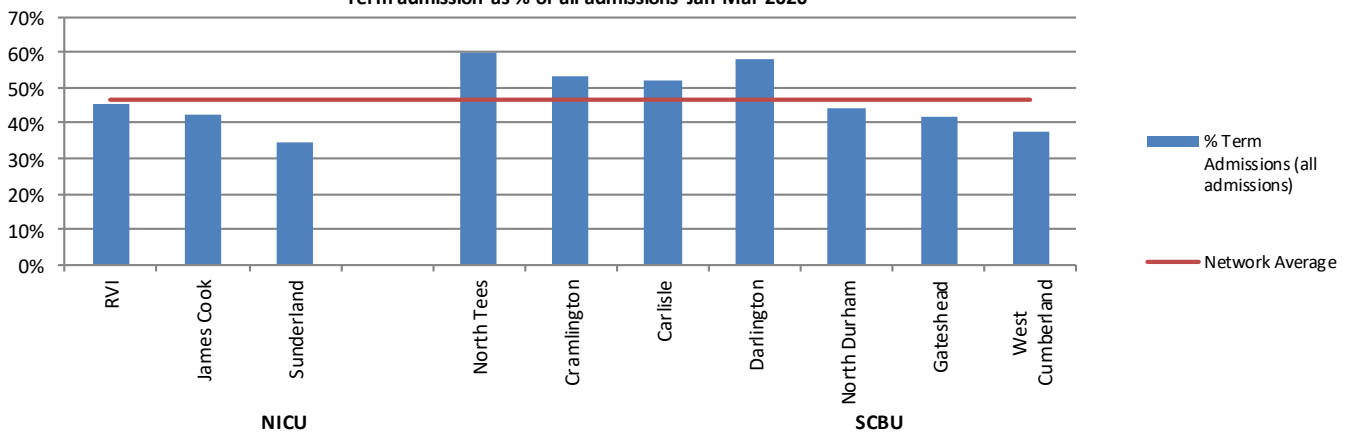
Inpatient after 44 weeks

Unit	Admissions	I/P after 44wks	% still inpatient
RVI	189	1	0.5%
James Cook	144	0	0
Sunderland	88	1	1.1%
North Tees	68	1	1.5%
Cramlington	68	0	0
Carlisle	61	0	0
Darlington	44	0	0
North Durham	60	0	0
Gateshead	56	1	1.8%
West Cumberland	21	0	0

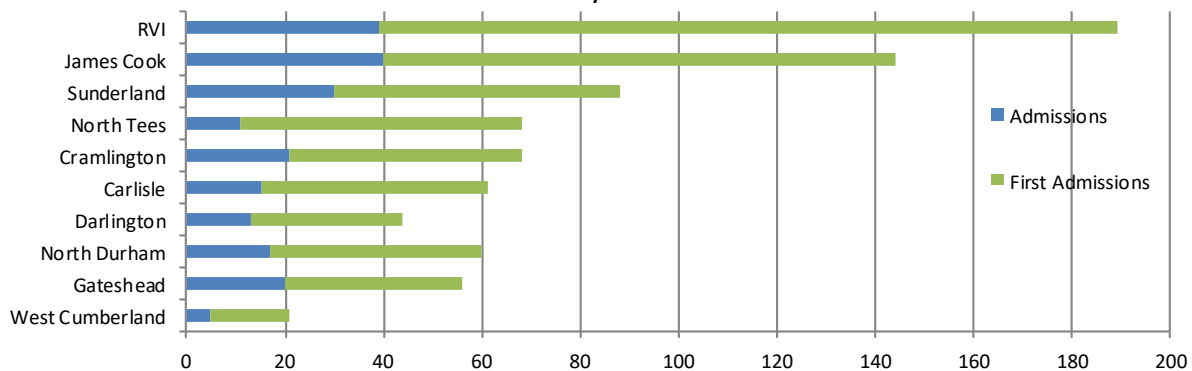
Term admissions rate as % of total births Jan-Mar2020



Term admission as % of all admissions Jan-Mar 2020



Number of admissions by unit Jan-Mar 2020



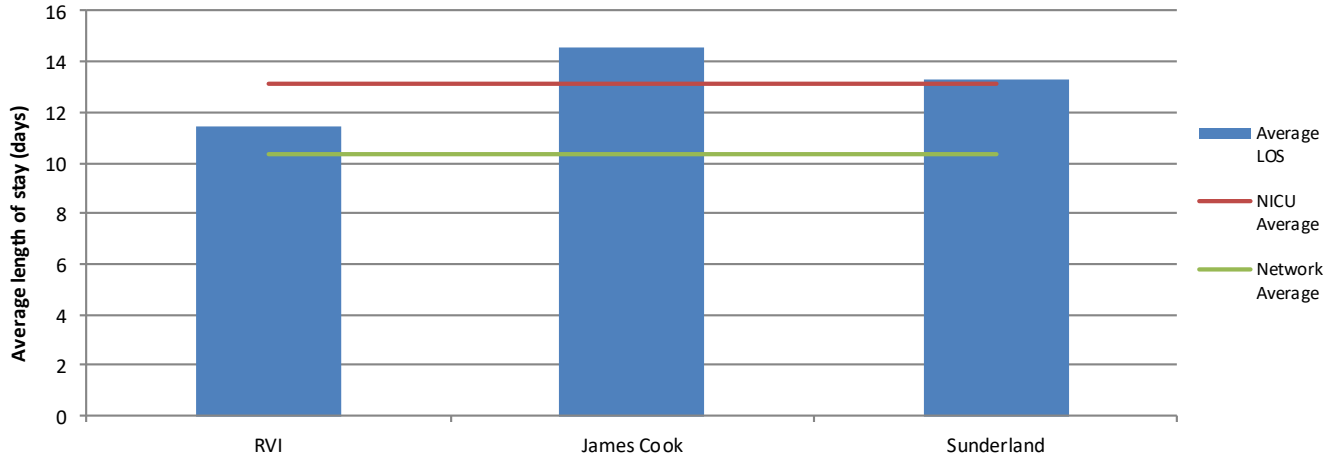
¹ Calculated using 1st episodes admissions and total births less 7% "preterm births" suggested average as per NNN agreement.

² Calculated using 1st episodes term admission as a percentage of 1st admissions.

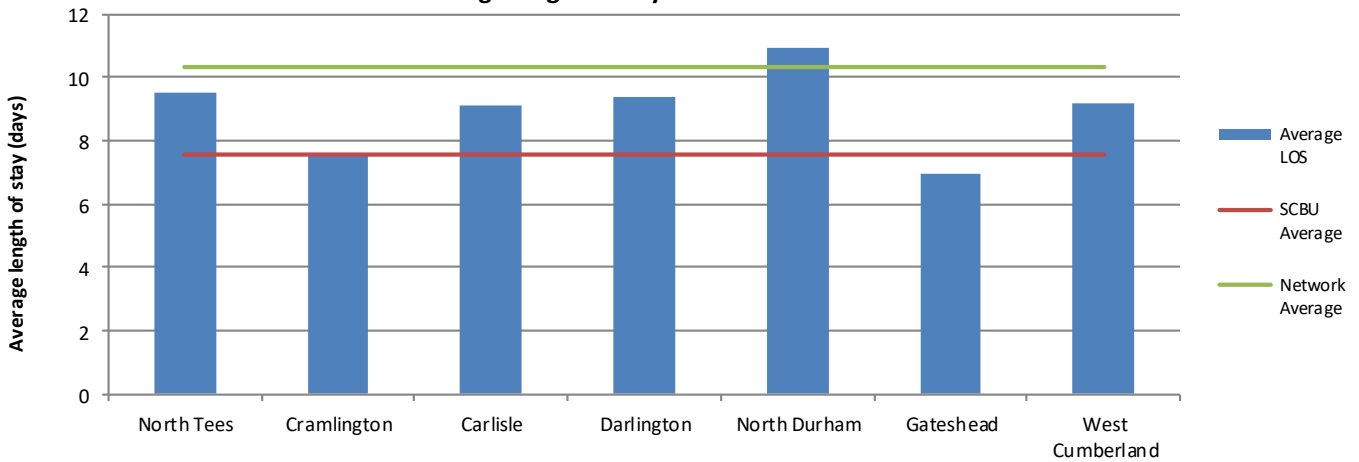
**Excludes unavoidable "congenital abnormality" term admissions (admit principal reason = 22)

Section 2 – Length of Stay³

Average length of stay NICU's Jan-Mar 2020

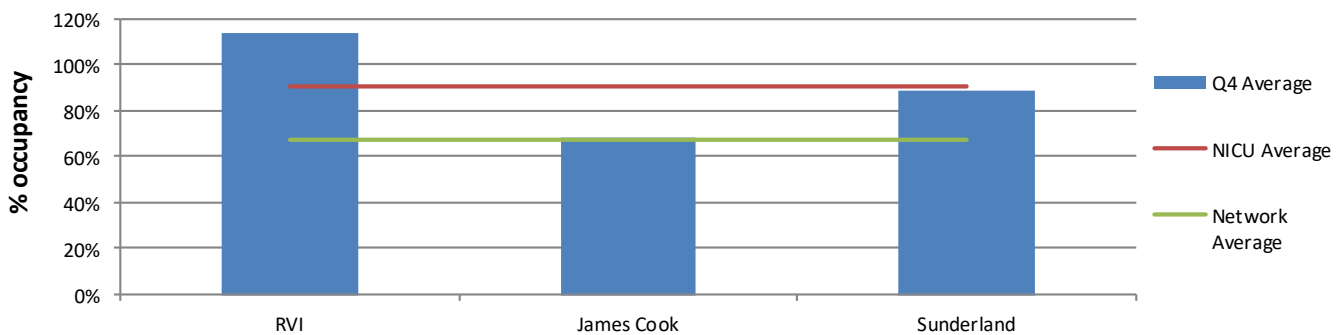


Average length of stay SCBU's Jan-Mar 2020

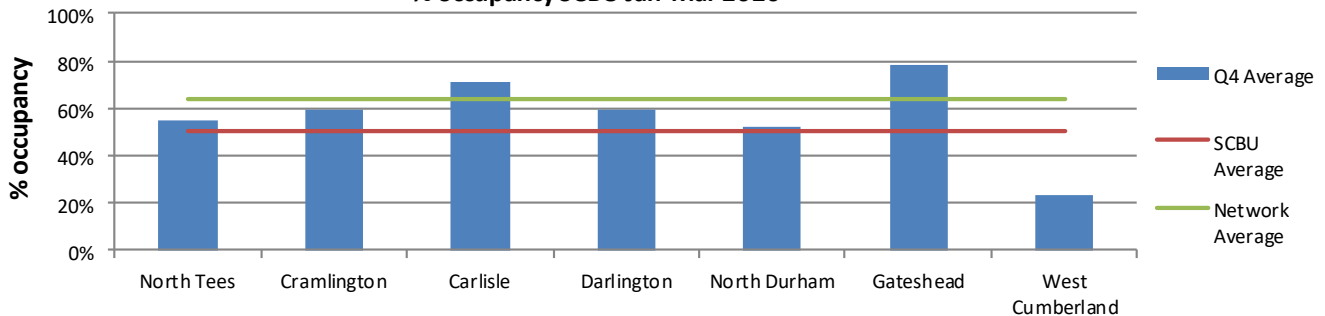


Section 3 – Occupancy⁴

% occupancy NICU Jan-Mar 2020



% occupancy SCBU Jan-Mar 2020



³ Calculated using total discharges >4hrs, not died, and total length of stay.

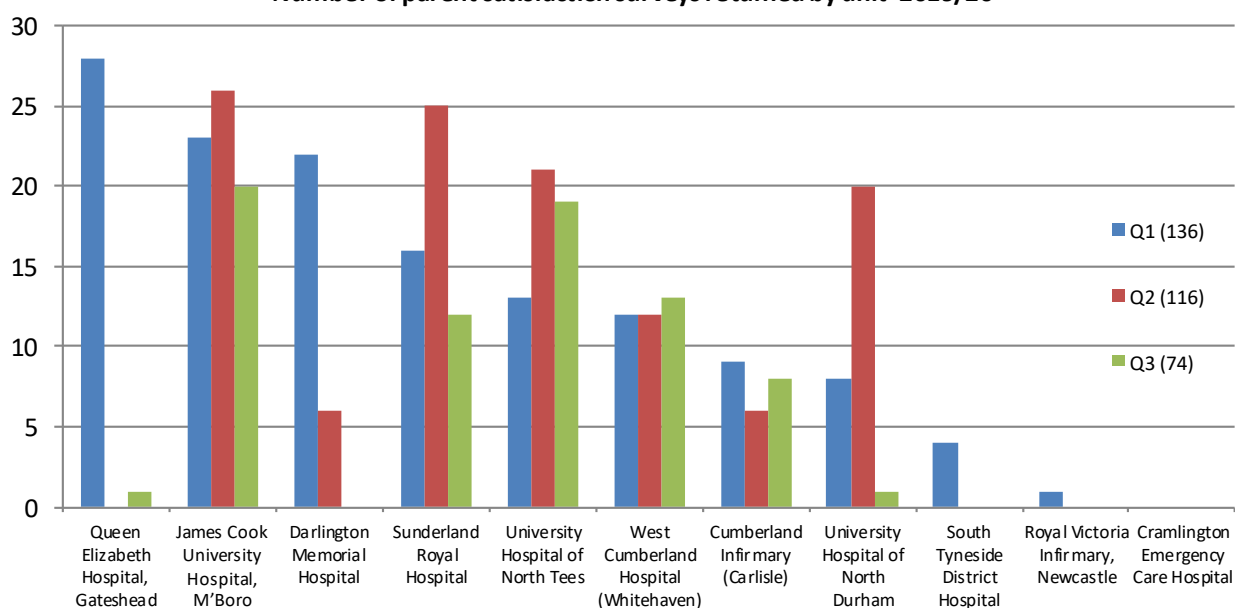
⁴ Calculated using available total cot numbers and occupancy levels.

Section 4a – Clinical Indicators⁵

Period:	National CQUIN				NNAP					
	Q4 19-20				Q4 19-20					
	Timely discharge eligible babies	TPN by Day 2 of Life	2yr Follow up	Temperature on admission >=36	Antenatal Steroids Given	First Consultation within 24hrs	Breast Milk at Discharge Home (<32/40)	ROP screening	Temperature Taken within 1hr (<32/40)	Mag Sulph (80%)
RVI	N/A	93%	88%	93%	89%	60%	44%	58%	96%	82%
James Cook	67%	85%	100%	97%	97%	97%	11%	82%	94%	88%
Sunderland	100%	100%	100%	91%	96%	95%	38%	100%	100%	93%
North Tees	100%	N/A	100%	100%	80%	88%	25%	67%	100%	100%
Cramlington	67%	N/A	50%	100%	100%	93%	62%	80%	100%	50%
Carlisle	0%	N/A	0%	89%	67%	59%	33%	100%	86%	33%
Darlington	67%	N/A	0%	100%	100%	77%	43%	80%	100%	N/A
North Durham	0%	N/A	100%	100%	80%	68%	0%	100%	50%	0%
Gateshead	75%	N/A	0%	88%	89%	69%	57%	88%	100%	100%
West Cumberland	100%	N/A	N/A	100%	67%	57%	0%	100%	100%	0%
Northern	64%	93%	60%	96%	87%	76%	31%	86%	93%	61%

Section 4b – Non-clinical Indicators

Number of parent satisfaction surveys returned by unit 2019/20



Section 5 – Network Audit & data/information compliance⁶

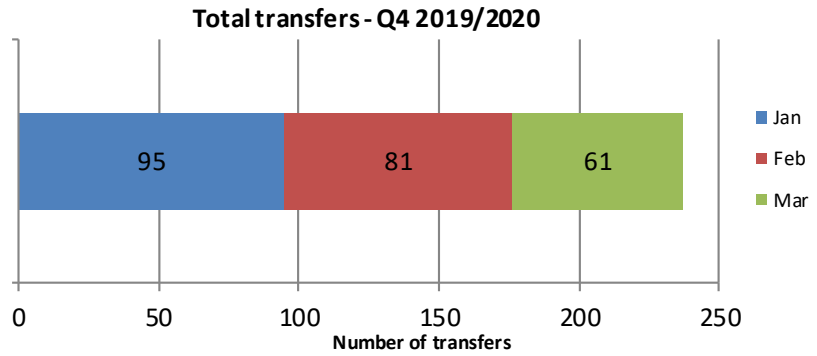
Latest Annual Reports – Northern Neonatal Network		
Unit/Trust	Year	Produced
Sunderland	2018	May-20
North Cumbria	2018	Nov-19
CDDFT	2018	Aug-19
RVI	2017	Sep-18
North Tees	2017	Jul-18
JCUH	2016	Nov-17
Cramlington	2016	Aug-17
Gateshead	2016	Dec-17

⁵ These are taken from the BadgerNet Dashboard reports for national CQUINs and NNAP Metrics. The former may not be what individual Units have signed up to but are included with the NNAP figures (which will appear on their reports in due course) for benchmarking purpose only

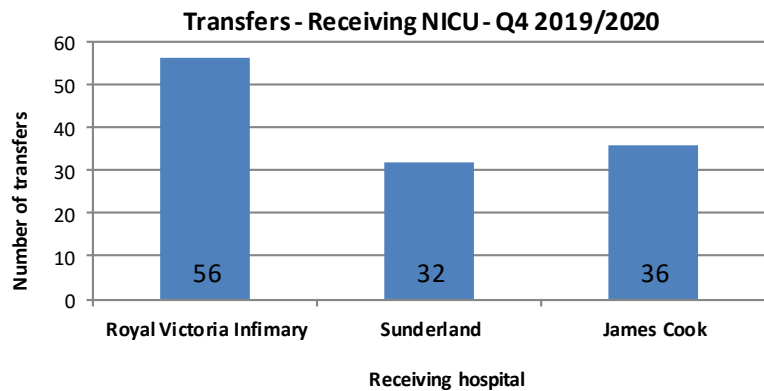
⁶ Requested items as identified and defined by the Network as auditable – green if returned by deadline, amber if returned following reminder, red if no response received. For Dashboard returns, the deadline for submission will be 6 weeks after the end of the quarter being requested.

Section 6 – Northern Neonatal Transport Service (NNeTS)

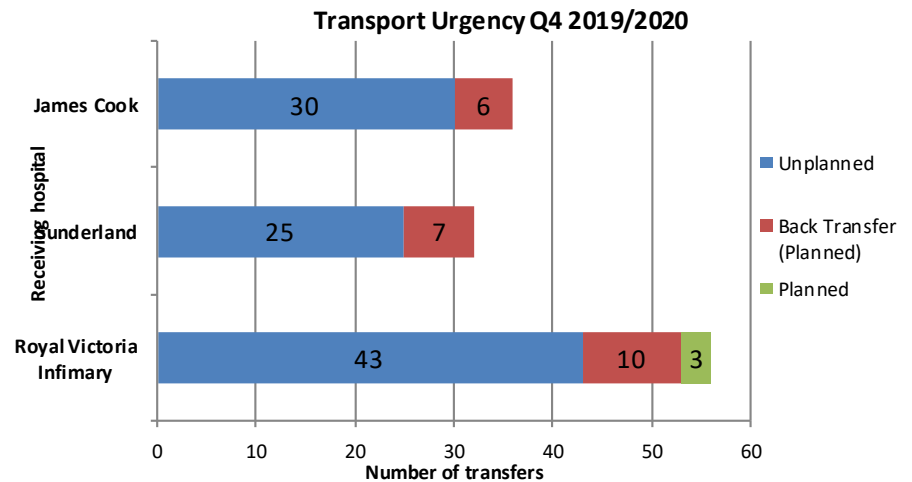
These figures represent the total number of transfers undertaken by each team per month, including back-transfers



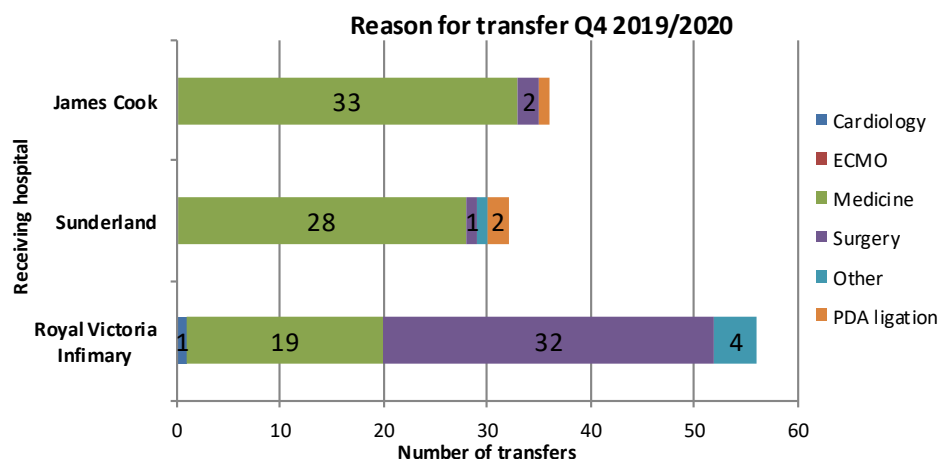
These figures represent the total number of transfers from each of the Level 3 (NICU) Units across the quarter. These include back-transfers (see next chart below).



Definitions of urgency are subjective apart from planned back-transfers. The definition of “planned” here is where the need for transfer appears to have been known – such as for surgical cases and cardiac investigations etc. Unplanned would be defined as where transfer could not have been foreseen – such as a baby requiring ongoing care at another Unit that could not be provided at their own.



Such classifications can again also be subjective, but where there is enough clarity to suggest it, they have been coded as such in the following table. “Other” covers occasional cases such as ROP screening or laser surgery. PDA ligations usually go direct to the Freeman, but if they are referred to another NICU first, they will be coded as a PDA Ligation accordingly.



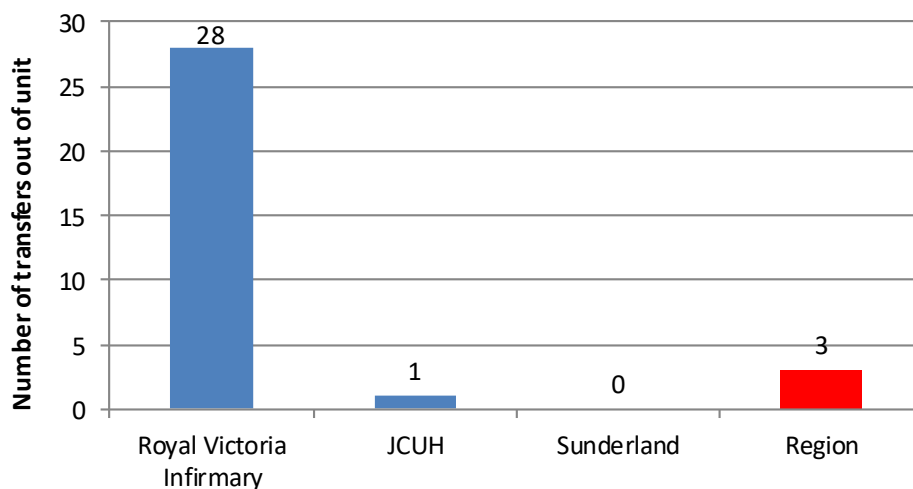
Non-clinical transfers due to cot availability Q4 2018/19

These transfers refer to those cases where babies need to be moved following birth from their hospital of booking and delivery for non-clinical reasons – lack of capacity and cots. We are monitoring these as part of our reconfiguration data work on patient flows.

These figures are taken directly from the Infant Transport Records (ITRs) that the teams complete and state that the Unit is “full” and/or then cross-referenced with Badger if necessary to check occupancy levels.

NICU	Transfers out
RVI	28
JCUH	1
Sunderland	0
Region	3

Non-clinical transfers out due to cot capacity Q4 2019-2020



Out of network activity/transfers

NNN IUT'S THAT WENT OUT OF REGION BECAUSE REGION FULL		
Gest	FROM	TO
22+1	Darlington	Wishaw
38+5	RVI	QE Glasgow
37+2	RVI	EDINBURGH