



Northern Neonatal Network

Quarterly Report

Q1 Apr-Jun 18



This report is a summary of the dashboard data submitted every month by each of the 9 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, NOT the previous BAPM 2001 ones. There are differences in how these latest levels of care are calculated and these reports need to be considered accordingly. There are significant differences, for example, in how IC no longer routinely includes babies on CPAP by default, rather taking account of other clinical indicators – weight, gestation etc.
- The BAPM 2011 definitions include a new “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 future reporting purposes.***
- The staffing level reports are calculated by mapping nurse staffing levels submitted against the activity generated by the new BAPM 2011 definitions and have altered from typical levels under BAPM 2001 accordingly.
- 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.

We continue to invite constructive criticism and feedback from all our Stakeholders across the Network and have taken into account some of these in this latest version of quarterly reports. 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.

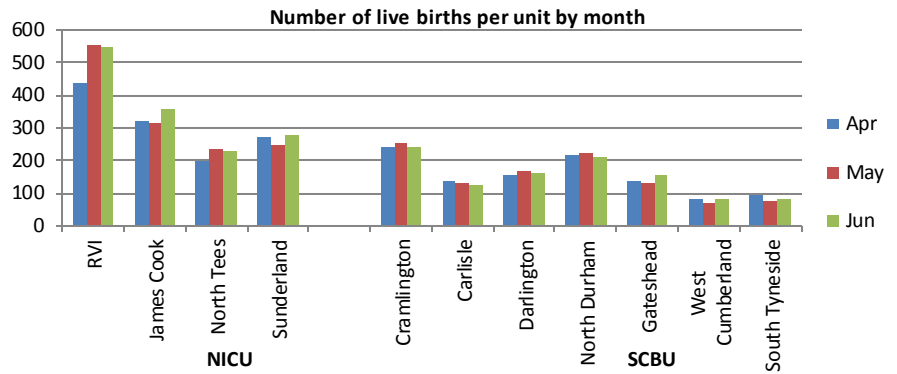
As always, the aim of this is to provide the very best service available to the babies and families within our Network and thus meet our one core principle – *“To give the highest possible standard of safe, effective care to babies and their families.”*

Martyn Boyd, Network Manager/Mark Green, Network Data Manager
August 2018

Section 1 - Activity

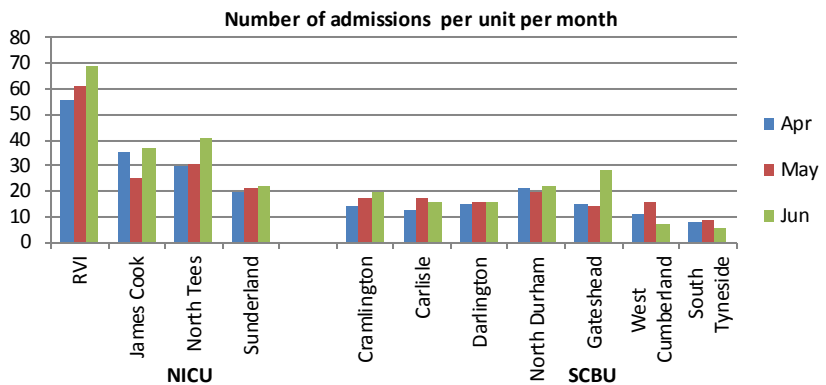
Live Births

Unit	Apr	May	Jun	Total
RVI	440	551	547	1538
James Cook	321	316	356	993
North Tees	198	238	229	665
Sunderland	271	248	275	794
Cramlington	239	254	241	734
Carlisle	139	131	123	393
Darlington	153	165	162	480
North Durham	219	224	213	656
Gateshead	139	131	156	426
West Cumberland	85	68	85	238
South Tyneside	97	74	84	255
Total	2301	2400	2471	7172



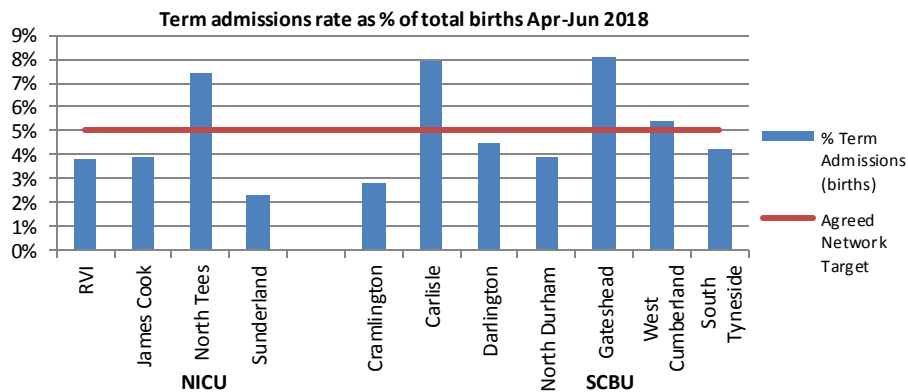
Admissions

Unit	Apr	May	Jun	Total
RVI	56	61	69	186
James Cook	35	25	37	97
North Tees	30	31	41	102
Sunderland	20	21	22	63
Cramlington	14	17	20	51
Carlisle	13	17	16	46
Darlington	15	16	16	47
North Durham	21	20	22	63
Gateshead	15	14	28	57
West Cumberland	11	16	7	34
South Tyneside*	8	9	6	23
Total	238	247	284	769



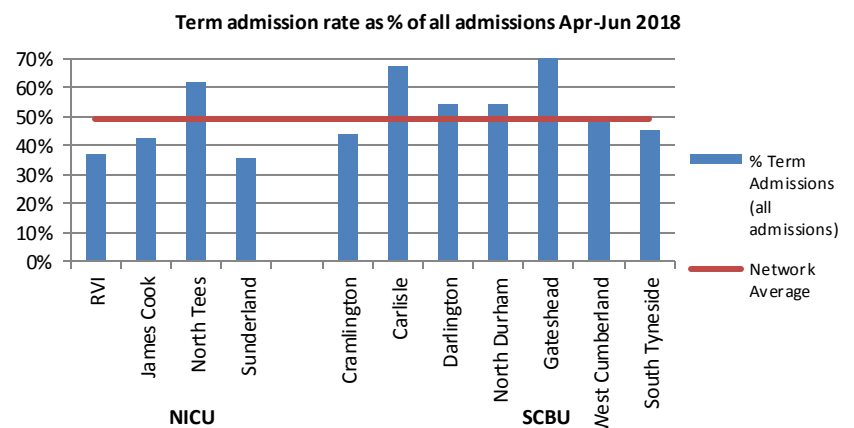
Term Admissions¹

Unit	Apr	May	Jun	Average
RVI**	3.9%	3.9%	3.7%	3.8%
James Cook	5.4%	2.7%	3.6%	3.9%
North Tees	6.0%	8.1%	8.0%	7.4%
Sunderland	2.4%	1.7%	2.7%	2.3%
Cramlington	4.0%	2.5%	1.8%	2.8%
Carlisle	6.2%	10.7%	7.0%	7.9%
Darlington	4.9%	3.8%	3.0%	3.9%
North Durham	4.9%	3.8%	3.0%	3.9%
Gateshead	3.9%	9.0%	11.0%	8.1%
West Cumberland	7.6%	7.9%	1.3%	5.4%
South Tyneside	4.4%	7.3%	1.3%	4.2%
Network Average	4.6%	4.7%	4.2%	4.5%



Term Admissions²

Unit	Apr	May	Jun	Average
RVI**	36.4%	37.0%	38.8%	37.4%
James Cook	50.0%	40.0%	36.4%	42.4%
North Tees	52.4%	75.0%	58.6%	62.2%
Sunderland	33.3%	26.7%	46.7%	35.4%
Cramlington	69.2%	42.9%	25.0%	44.2%
Carlisle	66.7%	81.3%	53.3%	67.4%
Darlington	63.6%	58.3%	42.9%	54.1%
North Durham	66.7%	57.1%	40.0%	54.5%
Gateshead	62.5%	84.6%	76.2%	76.2%
West Cumberland	75.0%	38.5%	25.0%	48.0%
South Tyneside	50.0%	62.5%	16.7%	45.5%
Network Average	51.6%	51.7%	44.7%	49.2%



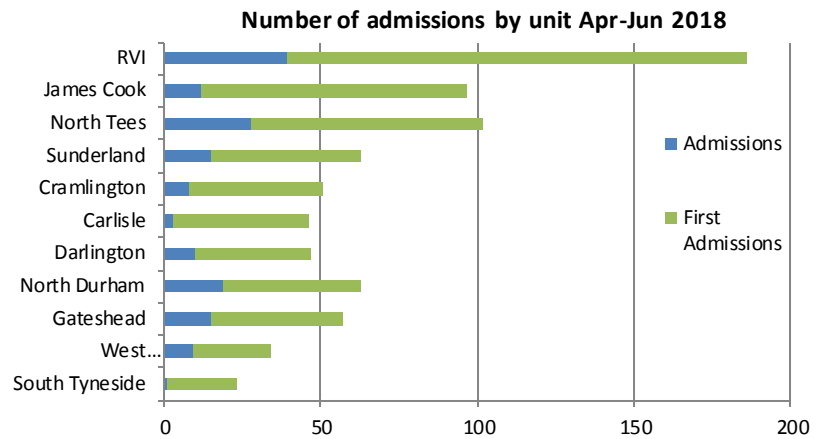
¹ Calculated using 1st episodes admissions and total births less 7% "preterm births" suggested average as per NNN agreement.

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

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

All Admissions

Unit	Total Admissions	1st Admissions	Term Admissions
RVI**	186	147	55
James Cook	97	85	36
North Tees	102	74	46
Sunderland	63	48	17
Cramlington	51	43	19
Carlisle	46	43	29
Darlington	47	37	20
North Durham	63	44	24
Gateshead	57	42	32
West Cumberland	34	25	12
South Tyneside	23	22	10
Total	769	610	300



IC Days

Unit	Apr	May	Jun	Total
RVI	157	224	125	506
James Cook	164	155	87	406
North Tees	50	72	61	183
Sunderland	48	74	60	182
Cramlington	0	1	2	3
Carlisle	2	0	1	3
Darlington	2	2	4	8
North Durham	2	1	2	5
Gateshead	0	0	3	3
West Cumberland	2	1	2	5
South Tyneside	0	0	1	1
Total	427	530	348	1305

HD Days

Unit	Apr	May	Jun	Total
RVI	206	292	358	856
James Cook	217	263	178	658
North Tees	106	53	95	254
Sunderland	77	54	62	193
Cramlington	22	14	12	48
Carlisle	8	4	13	25
Darlington	7	5	7	19
North Durham	17	8	6	31
Gateshead	4	6	4	14
West Cumberland	5	6	0	11
South Tyneside	8	1	3	12
Total	677	706	738	2121

SC Days

Unit	Apr	May	Jun	Total
RVI	420	309	390	1119
James Cook	266	191	281	738
North Tees	258	235	176	669
Sunderland	194	223	220	637
Cramlington	70	115	176	361
Carlisle	154	70	112	336
Darlington	155	134	120	409
North Durham	171	142	201	514
Gateshead	194	158	159	511
West Cumberland	143	168	88	399
South Tyneside	51	45	60	156
Total	2076	1790	1983	5849

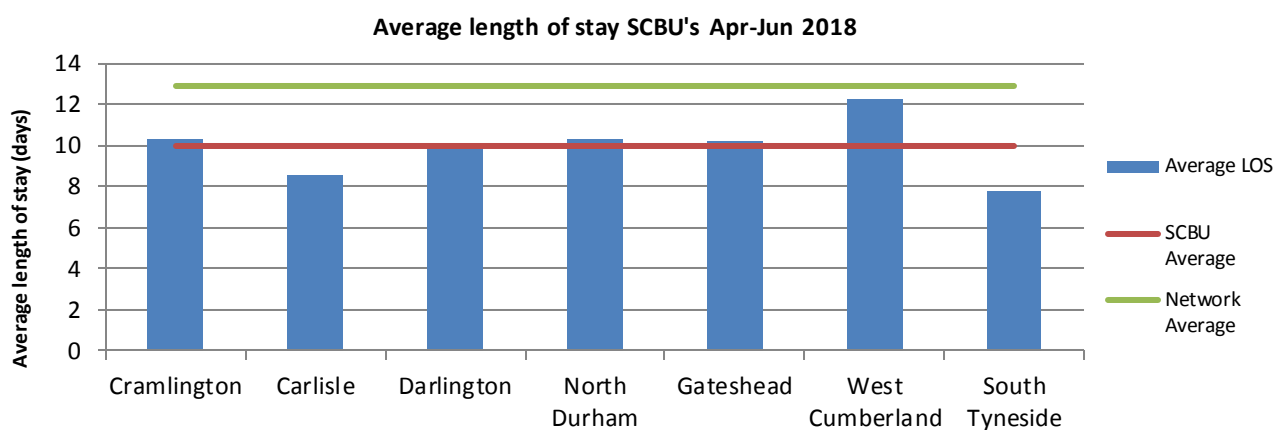
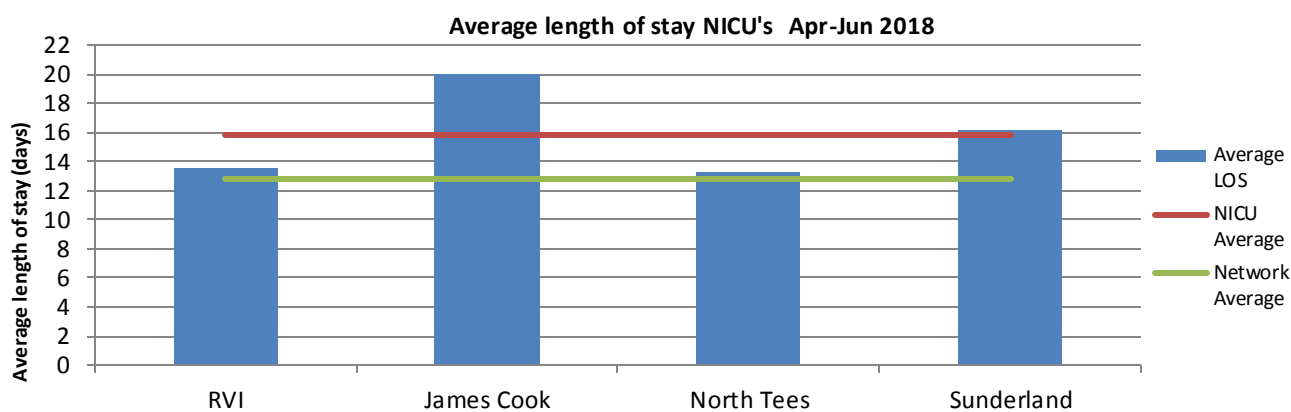
NC Days

Unit	Apr	May	Jun	Total
RVI	29	30	33	92
James Cook	0	0	1	1
North Tees	10	8	13	31
Sunderland	0	0	0	0
Cramlington	8	12	7	27
Carlisle	6	1	8	15
Darlington	7	4	0	11
North Durham	4	4	5	13
Gateshead	11	16	8	35
West Cumberland	0	0	2	2
South Tyneside	0	4	1	5
Total	75	79	78	232

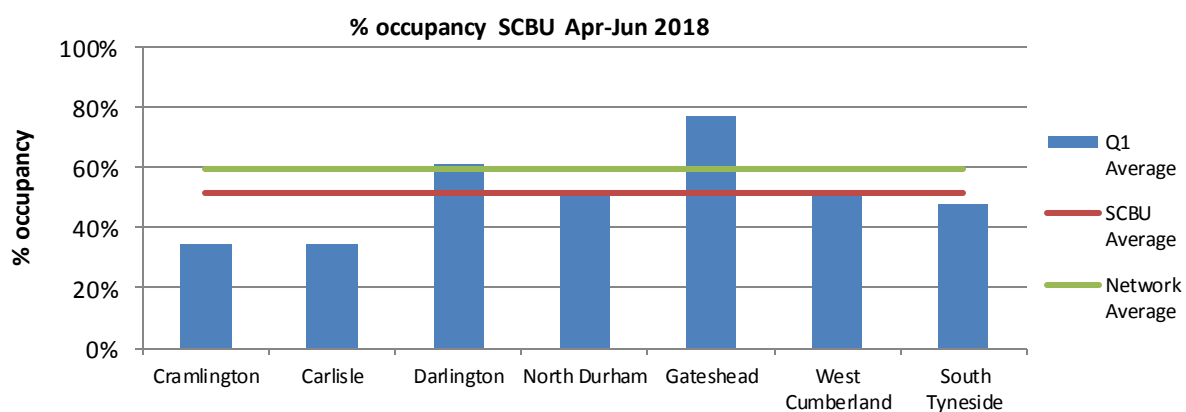
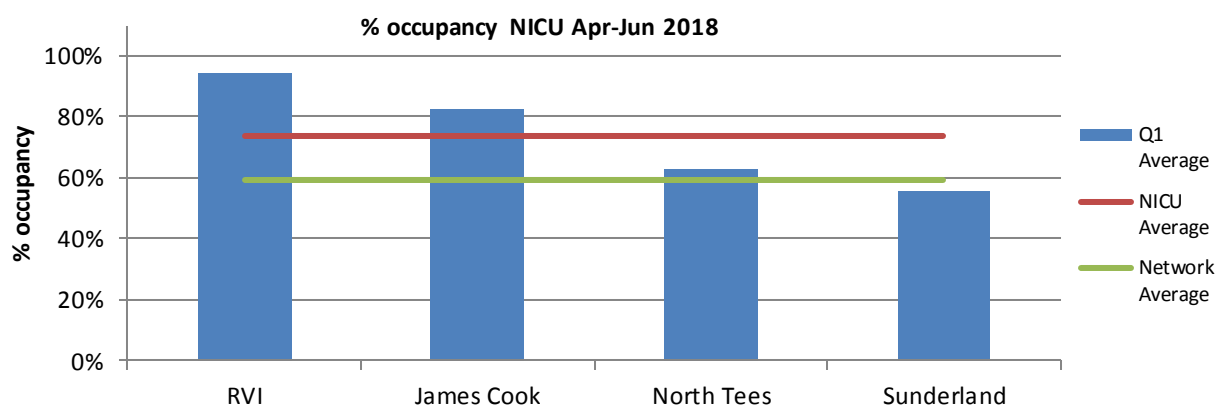
TC Days

Unit	Apr	May	Jun	Total
RVI	347	365	430	1142
James Cook	271	185	245	701
North Tees	21	15	12	48
Sunderland	0	0	0	0
Cramlington	47	70	64	181
Carlisle	24	20	27	71
Darlington	92	91	76	259
North Durham	114	122	94	330
Gateshead	1	5	4	10
West Cumberland	0	0	14	14
South Tyneside	0	0	0	0
Total	917	873	966	2756

Section 2 – Length of Stay³



Section 3 – Occupancy⁴



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

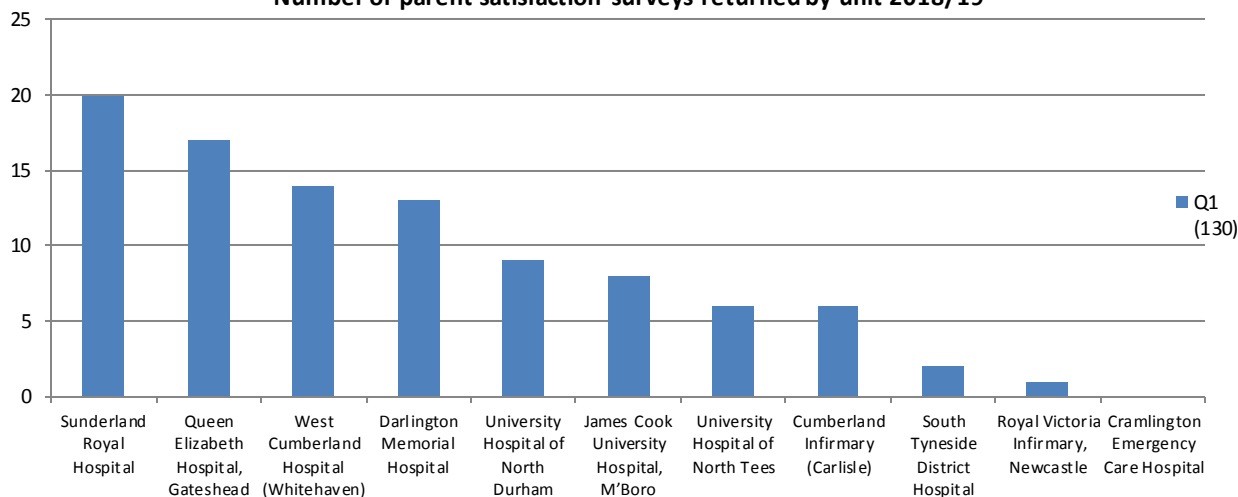
⁴ Calculated using available total cot numbers and occupancy levels.

Section 4a – Clinical Indicators⁵

Period:	National CQUIN				NNAP					
	Q1 18-19				Q1 18-19					
Unit	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 (<33/40)	ROP screening	Temperature Taken within 1hr (<32/40)	Mag Sulph (Benchmarking)
RVI	0%	100%	75%	93%	59%	41%	31%	83%	96%	33%
James Cook	67%	100%	100%	100%	97%	78%	47%	80%	100%	79%
North Tees	33%	N/A	33%	100%	100%	85%	0%	78%	100%	100%
Sunderland	100%	100%	25%	100%	86%	98%	33%	93%	100%	56%
Cramlington	60%	N/A	100%	100%	100%	97%	100%	100%	100%	N/A
Carlisle	100%	N/A	100%	75%	100%	85%	50%	100%	100%	N/A
Darlington	50%	N/A	0%	92%	86%	76%	0%	83%	100%	100%
North Durham	0%	N/A	0%	100%	70%	59%	50%	90%	100%	100%
Gateshead	50%	N/A	0%	100%	100%	84%	0%	91%	100%	N/A
West Cumberland	0%	N/A	N/A	100%	100%	80%	50%	67%	100%	N/A
South Tyneside	0%	N/A	N/A	100%	100%	94%	N/A	N/A	100%	N/A
Northern	42%	100%	48%	96%	91%	80%	36%	87%	100%	78%

Section 4b – Non-clinical Indicators

Number of parent satisfaction surveys returned by unit 2018/19



Section 5 – Network Audit & data/information compliance⁶

Unit	Dashboard returns
RVI	
JCUH	
North Tees	
Sunderland	
Cramlington	
Carlisle	
Darlington	
North Durham	
Gateshead	
West Cumberland	
South Tyneside	

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

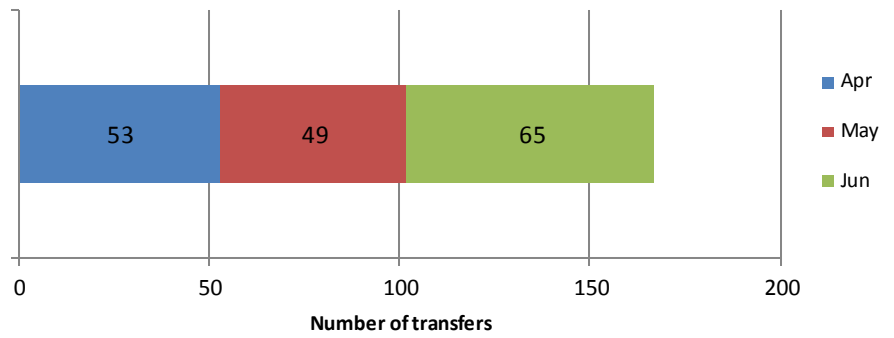
⁵ These are taken from the BadgerNet Dashboard reports for national CQUINs and NNAP Metrics. The former may not be what individual Units have signed up to but are included with the NNAP figures (which will appear on their reports in due course) for benchmarking purpose only

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)

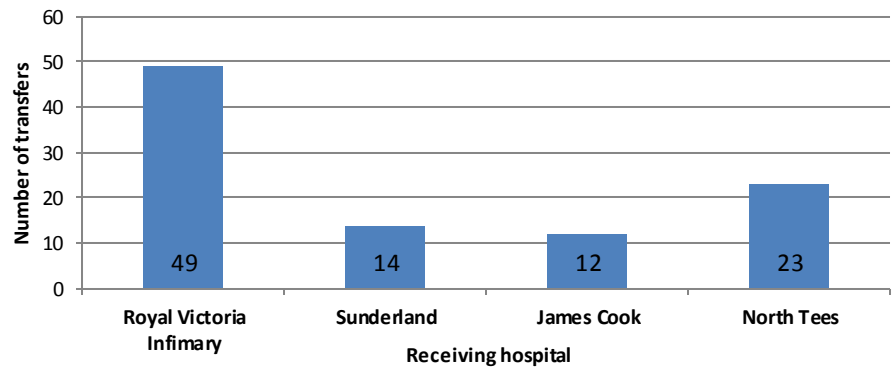
These figures represent the total number of transfers undertaken by each team per month, including back-transfers

Total transfers - Q1 2018/2019



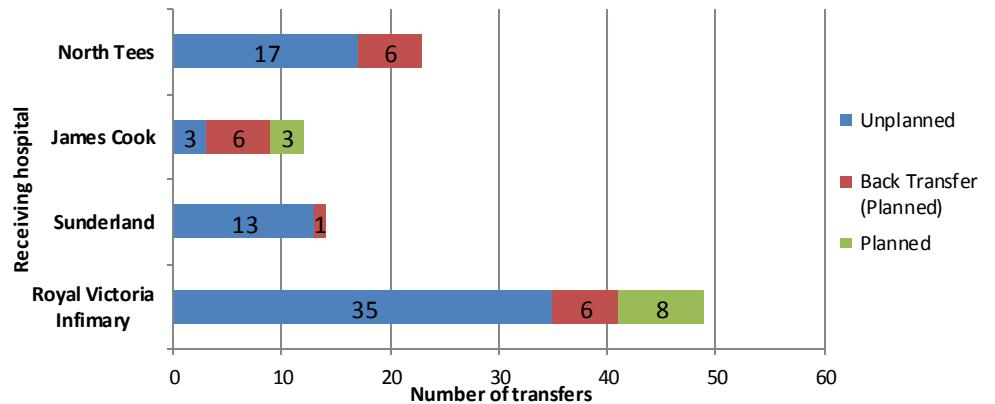
These figures represent the total number of transfers from each of the Level 3 (NICU) Units across the quarter. These include back-transfers (see next chart below).

Transfers - Receiving hospital - Q1 2018/2019



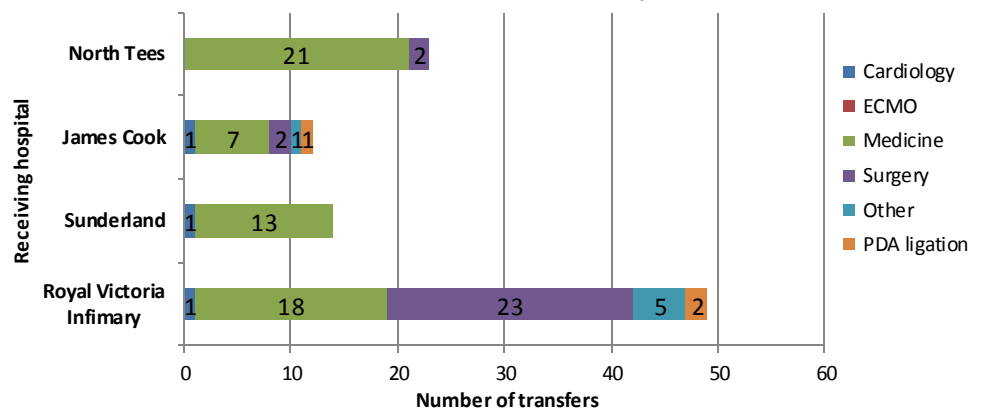
Definitions of urgency are subjective apart from planned back-transfers. The definition of "planned" here is where the need for transfer appears to have been known – such as for surgical cases and cardiac investigations etc. Unplanned would be defined as where transfer could not have been foreseen –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

Transport Urgency Q1 2018/2019



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.

Reason for transfer Q1 2018/2019



Non-clinical transfers due to cot availability Q1 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	5
JCUH	2
Sunderland	0
North Tees	0

Non-clinical transfers out due to cot capacity Q1 2018-2019

