

Board of Directors Meeting in Public - Cover Sheet

Subject:	Neonatal Critical Care Review (NCCR)	Date: 5 March 2020								
Prepared By:	Lisa Gowan, General Manager									
Approved By:	Julie Hogg, Chief Nurse									
Presented By:	Julie Hogg, Chief Nurse									
Purpose										
The attached paper is to update Trust Board on the Women & Children's Divisional response to the recommendations from the recently released Neonatal Critical Care Review		<table border="1"> <tr> <td>Approval</td> <td>x</td> </tr> <tr> <td>Assurance</td> <td>x</td> </tr> <tr> <td>Update</td> <td>x</td> </tr> <tr> <td>Consider</td> <td></td> </tr> </table>	Approval	x	Assurance	x	Update	x	Consider	
Approval	x									
Assurance	x									
Update	x									
Consider										
Strategic Objectives										
To provide outstanding care	To promote and support health and wellbeing	To maximise the potential of our workforce	To continuously learn and improve	To achieve better value						
x	x	x	x							
Overall Level of Assurance										
	Significant	Sufficient	Limited	None						
		x								
Risks/Issues										
Financial	Five year investment plan to deliver the recommendations									
Patient Impact	Improved access across the System minimising the need for out of area transfers									
Staff Impact	Harmonises services across the system									
Services	Aligns to the Mid-Notts ICS for delivery of Neonatal Services									
Reputational	Offers patients and their families a local solution across the Mid-Notts ICS system rather than out of area transfer									
Committees/groups where this item has been presented before										
PSQG - 19 February 2020 TMT – 4 March 2020										
Executive Summary										
<p>The paper represents the Women and Children's response to the recently released Neonatal Critical Care Review. The Neonatal Service has undertaken a gap analysis against the recommendations made and provided PQSG with the mandated five year plan to address these gaps along with some indicative costs. This was discussed and noted at PSQG on 19 February 2020. Overview of the delivery of the action plan will be maintained via the W&C Divisional Governance meeting and by exception through PSQG</p> <p>Alongside the presentation at PSQG, the Women and Children's division have presented the detail of the proposed investment required at Trust Management Team (TMT) on 4 March ahead of presentation at Trust Board on 5 March 2020.</p> <p>The Women & Children's Division would wish it to be noted that nationally the Operational Delivery Networks (ODN) were mandated to have signed off actions plans by 31 March 2020 with evidence that each of these actions plans had been discussed at provider Trust Boards prior. Therefore, the division has only had three weeks to review, undertake a gap analysis and make recommendations. This continues to be an evolving picture and the investment attached is an indicative picture rather than a final worked up business case. The Women & Children's division will continue to follow the Trust's financial governance arrangements and will pick up the investment requirements as part of the annual budget setting process.</p>										

Conclusion

The Women and Children's division ask Trust Board to note the action plan and investment that has been proposed following the release of the Neonatal Critical Care Review.

Recommendations

- To note the proposed workforce solutions to address the recommendations from the NCCR
- To request Trust Board's approval for this action plan to be sent to ODN
- To note the indicative investment requirements attached
- To note that the Women & Children's Division will follow the Trust's financial governance arrangements in relation to any developed business cases.
- To note that TMT colleagues have awareness of the proposed investment following discussion on 4 March 2020
- To note that the action plan will be tracked through the Divisional Governance meeting and by exception to PQSG

Introduction

The paper represents the Women and Children's response to the recently released Neonatal Critical Care Review. The Neonatal Service has undertaken a gap analysis against the recommendations made and provided PQSG with the mandated five year plan to address these gaps along with some indicative costs. Alongside presentation at PSQG, the Women and Children's division have presented this at Trust Management Team (TMT) on 4 March ahead of presentation at Trust Board on 5 March 2020 due to the proposed financial investment required.

Background

The NHS Long Term Plan has committed to new investment over the next 5 years to meet this action plan. Its three key commitments are focused on:

1. Developing neonatal capacity: redesigning and expanding neonatal critical care services to further enhance safety, effectiveness and the experience of families, to improve neonatal capacity and triage within expert maternity and neonatal centres.
2. Further developing the expert neonatal workforce required: extra neonatal nurses and expanded roles for some allied health professionals to support clinical care.
3. Enhancing the experience of families through care coordinators and investment in improved parental accommodation.

The action plan is aligned with these commitments and the "Making it happen" section sets out how to ensure delivery of the actions contained in the plan, and how to track outcomes.

Workforce Investment

There are two workforce options that are currently being explored by the Neonatal team (Appendix A). There is one that includes the development of an Advanced Neonatal Nurse Practitioner (ANNP) service and one that relies on further recruitment using the traditional medical model. Below is an example of the investment required over the next five years.

To invest in an ANNP service will incur a further £500k worth of investment over the next five years. Whilst the ANNP model is not a cheap option, the service has to recognise that against current workforce models, there is not enough Tier 2 paediatric trainees for the current rota and virtually none in the staff grade market so to assume that the medical model would be the preferred option carries risk.

The local Operational Delivery Network (ODN) has been advised that there will be national monies attached to this for both capital and revenue. Due to the pace that has been required to develop this action plan around so that it can be signed off at Trust Board in March and then the Regional ODN by 31 March 2020, the service has put forward the ANNP model as their preferred model and await further feedback from the ODN on whether there is some funding available during 2020/21.

Partnership Working

It is imperative that we work together with our NUH colleagues to deliver this agenda and to ensure that we are able to offer a system solution that minimises out of area transfers and ensures that we have the right cots in the right place to look after our babies.

The tracking of this development will be via the LMNS Board of which the ODN, NUH and we are all Board members. There will also be close working between the two triumvirates to ensure our plans compliment and deliver against the required actions.

Next Steps

The team have had a very short turnaround time to produce the action plan attached (appendix B). We will continue to work through the detail of this aligned to our colleagues at NUH and await further feedback from the ODN on the process to bid for monies.

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Roles costed as at Midpoint of banding				
Role	Grade	£ annual	£ ph	Assumptions/Notes
ANNP	B7	49,107	25.11	assumed 2 a year for 3 years and it taking 4 years to train
Tier 2 - SPR - Incl Intensity		72,886	34.95	Intensity is 30% of base salary as an indication
Tier 1 - SHO/FY2 - Include Intensity		50,848	24.38	Intensity is 30% of base salary as an indication
Training 3-5yrs of training £5kpa		5,000		
Costing of gaps - SR paper				
1)	Mon - Fri 5 hours per day = 25 hours per week			
	ANNP	627.85		
	Tier 2	873.63		
2)	Sat - Sun 13 hours per day = 26 hours per week			
	ANNP	652.96		
	Tier 2	908.58		
3)	Mon - Fri 5pm - 9pm = 4hours per day = 20 hours per week			
	Tier 1	487.58		
4)	Sat - Sun 9am - 9pm & 9pm - 9am 24 hours a day = 48hours per week			
	Tier 1	1170.20		
Total Costings				
	ANNP	Tier 2		
1)	627.85	873.63		
2)	652.96	908.58		
3)	487.58	487.58		
4)	1170.20	1170.20		
Total Weekly Cost	2,938.59	3,439.99		
Annual Costing - Year 1				
	ANNP	Tier 2		
Staffing - 2 x ANNP's	98,214.00	178,879.33		
Training Costs £5k per year	10,000.00	-		
	108,214.00	178,879.33		
Annual Costing - Year 2				
	ANNP	Tier 2		
Staffing - 4 x ANNP's	196,428.00	178,879.33		
Training Costs £5k per year - Yr 1 Trainees	10,000.00	-		
Training Costs £5k per year - New Trainees	10,000.00	-		
	216,428.00	178,879.33		
Annual Costing - Year 3				
	ANNP	Tier 2		
Staffing - 6 x ANNP's	294,642.00	178,879.33		
Training Costs £5k per year - Yr 1 Trainees	10,000.00	-		
Training Costs £5k per year - Yr 2 Trainees	10,000.00	-		
Training Costs £5k per year - New Trainees	10,000.00	-		
	324,642.00	178,879.33		
Annual Costing - Year 4				
	ANNP	Tier 2		
Staffing - 6 x ANNP's	294,642.00	178,879.33		
Training Costs £5k per year - Yr 1 Trainees	10,000.00	-		
Training Costs £5k per year - Yr 2 Trainees	10,000.00	-		
Training Costs £5k per year - Yr 3 Trainees	10,000.00	-		
	324,642.00	178,879.33		
Annual Costing - Year 5				
	ANNP	Tier 2		
Staffing - 6 x ANNP's	294,642.00	178,879.33		
Training Costs £5k per year - Yr 1 Trainees	-	-		
Training Costs £5k per year - Yr 2 Trainees	10,000.00	-		
Training Costs £5k per year - Yr 3 Trainees	10,000.00	-		
	314,642.00	178,879.33		
Annual Costing - Year 6				
	ANNP	Tier 2		
Staffing - 6 x ANNP's	294,642.00	178,879.33		
Training Costs £5k per year - Yr 1 Trainees	-	-		
Training Costs £5k per year - Yr 2 Trainees	-	-		
Training Costs £5k per year - Yr 3 Trainees	10,000.00	-		
	304,642.00	178,879.33		
Total Costs for 6 years	1,593,210.00	1,073,275.99		
Difference - Investment needed using ANNP model		(519,934.01)		