



NHS

North West Neonatal

Operational Delivery Network



Neonatal Activity, Capacity and Demand Report

1st April 2023 to 31st March 2024

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1. Introduction

The purpose of this report is to provide an overview of the demand, activity and capacity of the neonatal units across the North West Neonatal Operational Delivery Network for the period April 2023 to March 2024, inclusive.

To ensure clarity and consistency for the purpose of this report, capacity in neonatal services is defined by the physical, equipped cots available and the nurse staff available to provide this care. Demand is defined as the anticipated need for admissions in relation to the number of live births and potential case mix, particularly with regards to the number of extremely preterm births due to the high levels of neonatal care needed with increasing prematurity.

This report is derived from the data entered by providers into the Badgernet data system. Where appropriate, narrative is provided to assist understanding of the data and any changes from previous years. The impact of the COVID 19 pandemic during 2020/21 and 2021/22, whilst not impacting directly on Neonatal services to the same extent as Adult and Paediatric services, should be considered when reviewing this report.

The tables and charts presented in this report exclude data from postnatal wards or transitional care, unless otherwise stated. The definitions of care are:

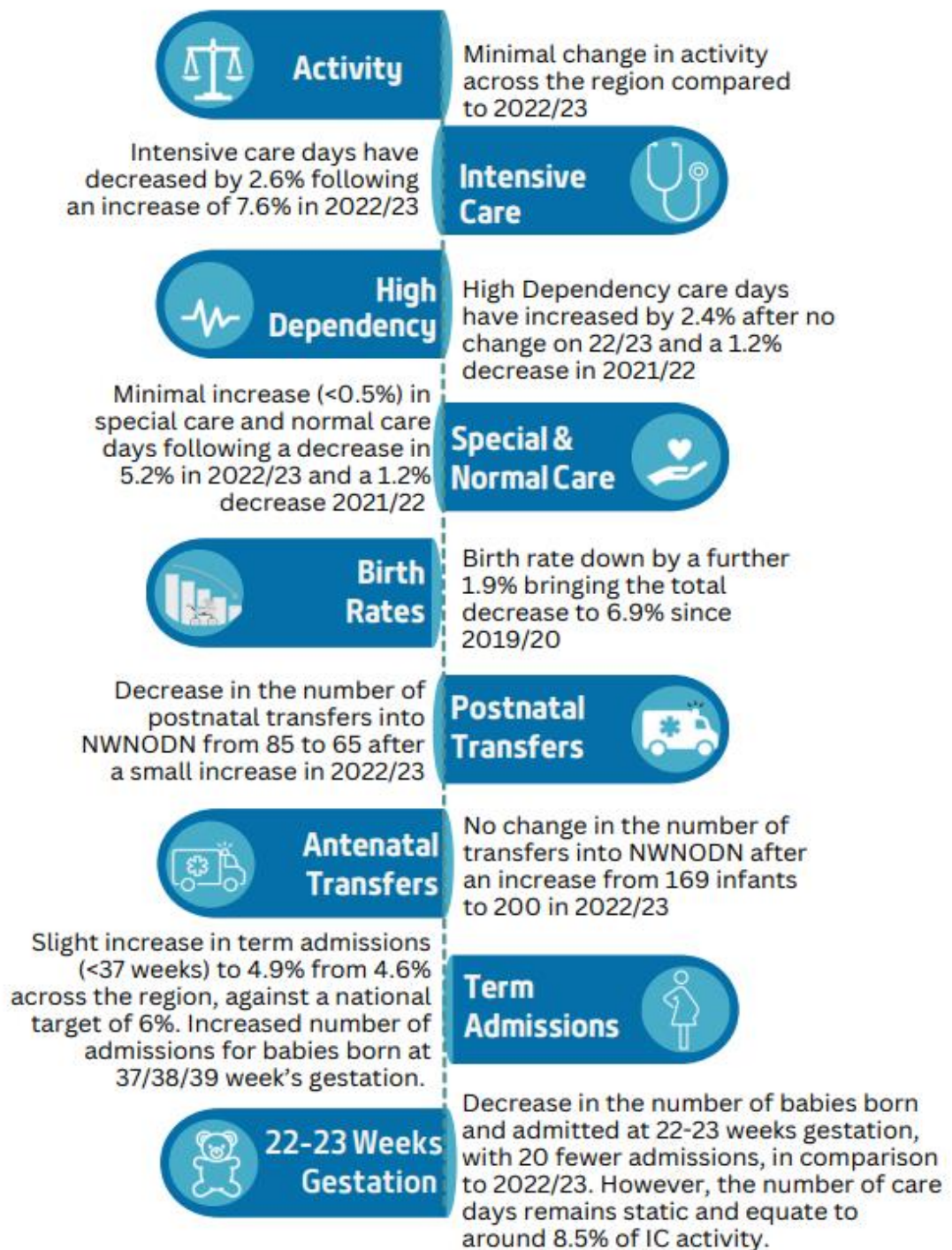
- XA01Z Intensive Care
- XA02Z High Dependency Care
- XA03Z Special Care, Carer not resident alongside baby
- XA04Z Special Care, Carer Resident at cot side and caring for baby
- XA05Z Normal Care

Where the data in this report suggests that the capacity in any unit is not aligned to demand or activity the Provider, NWNODN and NHS England Specialised Commissioning will follow the NWNODN Cot Base Guideline to review capacity and make any changes based on system wide considerations.

The Cot Base Guideline can be viewed at <https://www.neonatalnetwork.co.uk/nwnodn/wp-content/uploads/2023/01/PD-ODN-06-Cot-Base-Admission-Criteria-Change.pdf>

Data from within this report will be used to facilitate individual Trust conversations around cot capacity and wider strategic discussions as part of the National Neonatal Critical Care Review.

1.1 Overview Summary



1.2 Key Recommendations

Within each locality section the Network Clinical Leads have provided comments, observations and recommendations for development (sections 6, 7 & 8) in each locality. These recommendations have been discussed at locality steering groups and where appropriate been incorporated into the NWNODN work plan.

The key recommendations are relevant for all localities within the North West ODN:

Neonatal Critical Care Review (NCCR)

- To continue to use the data as part of the Commissioner led NCCR, which will be supported by the NWNODN.
- Review the NWNODN repatriation guideline, in line with BAPM recommendations, including monitoring delays of repatriations from Neonatal Intensive Care Units (NICUs) to Local Neonatal Units (LNUs) and reviewing activity carried out in NICUs when care could have potentially been delivered at the family's LNU.

< 27week gestational age deliveries in non-NICU maternity units

- To continue to review all deliveries born in the wrong place, in conjunction with the Local Maternity & Neonatal System (LMNS) and to further raise awareness of the implications of maternity unit closures at units with a NICU.
- To complete in-utero transfer audit and work in collaboration with maternity teams to identify common themes for inappropriate deliveries outside of a NICU.

Term/late pre-term admissions

- Continue to support the LMNS to further understand where Quality Improvement can be made and embedded to ensure a comprehensive Transitional care offer across all units.
- Continue sharing monthly separation reports to assist units with reviewing TC, term and late pre-term admission data as Maternity Incentive Scheme (MIS) evidence.

Nursing and medical staffing

- All units to continue working towards being consistently compliant with British Association for Perinatal Medicine (BAPM) standards for medical staffing.
- Neonatal unit leads to continue to work towards improving their position against national standards for nursing, allied health professionals & medical staffing.
- Continue to work with network the Allied Health Professionals, Psychologist & Pharmacist to improve the AHP, P & P offer to our families.

Data completeness & triangulation of data

- To consider how discharge pathways influence variation in length of stay between similar units, to support the development of an ideal outreach service across the NW.
- To review data collection for surgical activity and harmonize reporting systems between Alder Hey and SMH, ideally linking into a national data set for surgical babies.

1.3 Data Collection and Verification Process

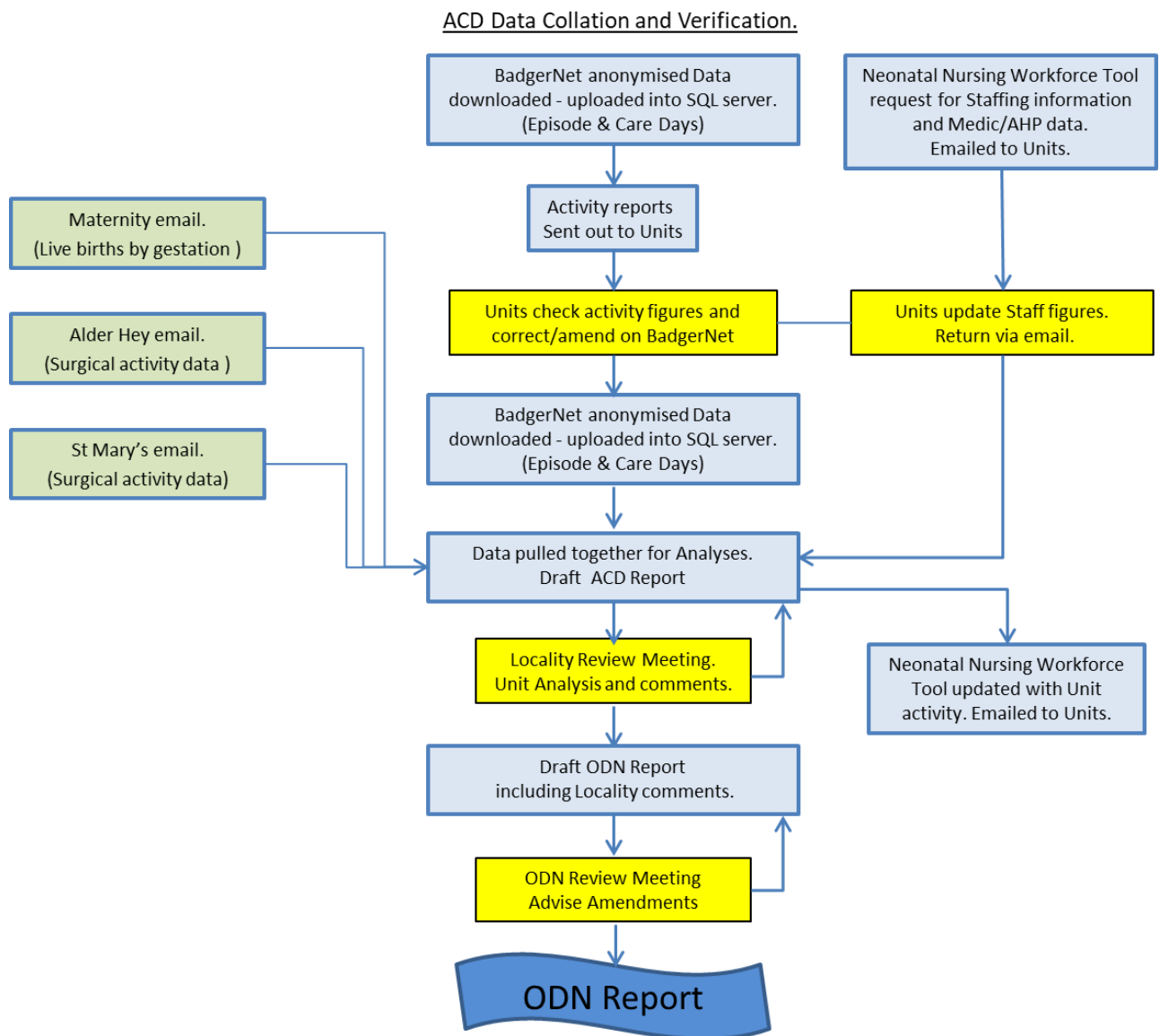


Diagram 1

Approvals and Review Process:

June 2024	Greater Manchester / Cheshire & Merseyside / Lancashire & S Cumbria Neonatal Steering Groups for agreement of locality sections
August 2024	Neonatal Senior Management Team for agreement of full report
July 2024	NWNODN Board for ratification
July 2024	NHSE Specialised Commissioning review

1.4 Capacity Reference Tables

Tables 1.3.1 – 1.3.3 show an overview of NWNODN units by designation level and cot capacity for each level of care.

		NICU	LNU	SCU	Surgical	Trust					
Greater Manchester		Abbrev.	Unit Level	IC Cots	HD Cots	SC Cots	Total				
Manchester Foundation Trust		MFT									
•	North Manchester	MFT – NMGH	LNU	2	2	15	19				
•	St Mary's Hospital*	MFT – SMH	NICU	19	19	31	69				
•	Wythenshawe Hospital	MFT – WYTH	LNU	2	4	15	21				
Royal Bolton Hospital		RBH	NICU	9	7	19	35				
Royal Oldham Hospital		ROH	NICU	9	9	19	37				
Stepping Hill Hospital		SHH	LNU	2	3	12	17				
Tameside General Hospital		TGH	LNU	1	3	9	13				
Royal Albert Edward Infirmary		WWL	LNU	1	3	10	14				
Total				45	50	130	225				

North Manchester currently only accepts deliveries of 29 weeks' gestation and above
*SMH is also a surgical unit as well as a NICU

Table 1.3.1

Cheshire & Merseyside		Abbrev.	Unit Level	IC cots	HD cots	SC cots	Total				
Arrowe Park Hospital		APH	NICU	6	8	10	24				
Countess of Chester Hospital		COC	LNU	1	2	10	13				
Macclesfield Hospital*		ECH	SCU	0	0	8	8				
Liverpool Neonatal Partnership		LNP									
•	Alder Hey Hospital	LNP – AHCH	Surgical	0	9	0	9				
•	Liverpool Women's	LNP – LWH	NICU	12	12	20	44				
Leighton Hospital		MCHT	LNU	3	4	8	15				
Mersey & West Lancs NHS Trust		MWL									
•	Ormskirk Hospital	ODGH	LNU	1	1	8	10				
•	Whiston Hospital	STHK	LNU	0	2	13	15				
Warrington Hospital**		WHH	LNU	2	4	8	14				
Total				25	42	84	152				

Countess of Chester currently only accepts deliveries of 32 weeks' gestation and above.

*Macclesfield was closed throughout the 2021/2022 & 2022/2023 reporting periods. Reopened June 2023.

**Cot capacity at Warrington reduced to 14 during 2023/24

Table 1.3.2

Lancashire & South Cumbria		Abbrev.	Unit Level	IC Cots	HD Cots	SC Cots	Total				
Blackpool Victoria		BTH	LNU	2	2	12	16				
Burnley Hospital		ELHT	NICU	6	8	20	34				
Royal Preston Hospital		LTHTR	NICU	6	8	14	28				
Morecambe Bay Hospital Trust		MBHT									
•	Furness General Hospital	MBHT – FGH	SCU	0	0	4	4				
•	Royal Lancaster Infirmary	MBHT – RLI	LNU	1	2	7	10				
Total				15	20	57	92				

Table 1.3.3

2. Births & Admissions

2.1 Births by Locality & Unit

Tables 2.1.1 to 2.1.4 show the number of births for babies born 22 weeks' gestational age & above. Therefore, birth numbers may differ from those reported by the LMS which include below 22 weeks.

Locality	2019/20	2020/21	2021/22	2022/23	2023/24
Greater Manchester	35,150	34,492	35,589	34,268	33,174
Cheshire & Merseyside	26,465	24,012	24,926	24,023	23,935
Lancashire & South Cumbria	15,821	15,212	15,538	15,177	14,979
Total	77,436	73,716	76,053	73,468	72,088

Table 2.1.1

Greater Manchester	2019/20	2020/21	2021/22	2022/23	2023/24
MFT – NMGH	3,591	3,365	3,583	3,511	3,459
MFT – SMH	8,769	8,204	8,041	7,912	7,670
MFT – WYTH	4,146	4,468	4,922	4,804	4,805
RBH	5,862	5,632	5,655	5,245	5,056
ROH	5,071	4,820	5,172	4,894	4,720
SHH	3,051	3,438	3,452	3,250	2,872
TGH	2,220	2,186	2,208	2,107	2,119
WWL	2,440	2,379	2,556	2,545	2,473
Total	35,150	34,492	35,589	34,268	33,174

Table 2.1.2

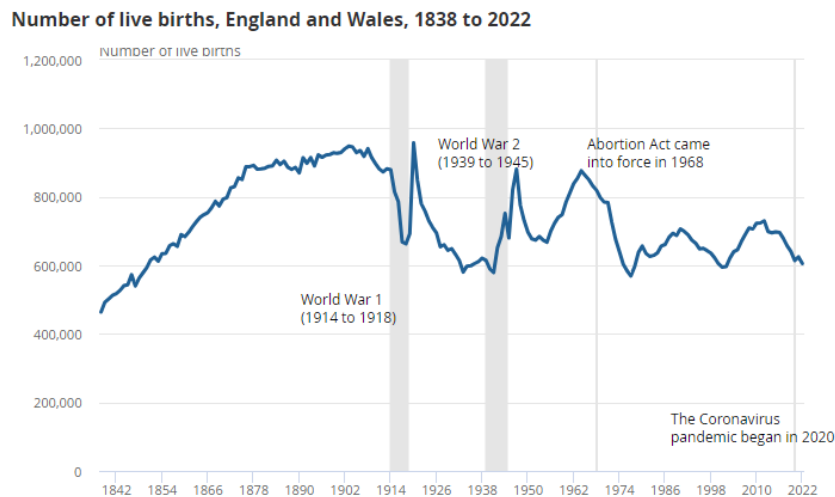
Cheshire & Merseyside	2019/20	2020/21	2021/22	2022/23	2023/24
APH	3,018	2,886	2,990	3,007	2,857
COC	2,384	2,358	2,156	2,159	2,017
ECH	1,525	-	-	-	905
LNP – LWH	7,733	7,297	7,527	7,221	6,961
MCHT	2,838	3,162	3,237	3,133	2,857
MWL - ODGH	2,330	2,089	2,384	2,203	2,077
MWL - STHK	3,970	3,726	3,986	3,759	3,843
WHH	2,667	2,494	2,646	2,541	2,418
Total	26,465	24,012	24,926	24,023	23,935

Table 2.1.3

Lancashire & South Cumbria	2019/20	2020/21	2021/22	2022/23	2023/24
BTH	2,688	2,604	2,596	2,515	2,407
ELHT	6,156	5,737	5,981	5,869	5,848
LTHTR	4,169	4,188	4,269	4,149	4,117
MBHT – FGH	1,090	1,013	1,051	972	977
MBHT – RLI	1,718	1,670	1,641	1,672	1,630
Total	15,821	15,212	15,538	15,177	14,979

Table 2.1.4

The final data, from the National Office for Statistics, for births in England and Wales in 2023 is not usually published until August. In 2022 showed a decrease of 3.1% compared to the same period in 2021 where there had been a slight increase, post the pandemic. This is in-line with the long-term trend of decreasing live births. This table will up-dated once the national data becomes available.



2.2 Neonatal Unit First Admissions

Alder Hey is excluded from all first admission and birth data comparisons as they are a surgical unit without maternity provision therefore all admissions into Alder Hey are following referral from a Neonatal Unit either within the NWNODN or from out of area, where the admission will have already been recorded.

2.2.1 NNU first admissions across the network by locality

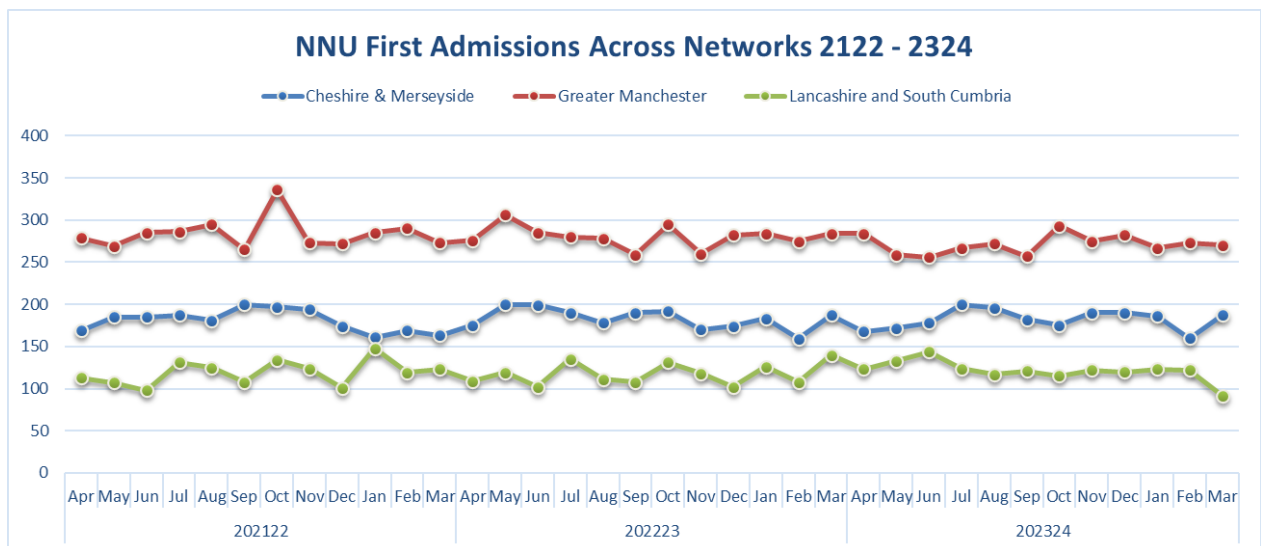


Chart 2.2.1

Month	2021/22			2022/23			2023/24		
	Cheshire & Merseyside	Greater Manchester	Lancashire and South Cumbria	Cheshire & Merseyside	Greater Manchester	Lancashire and South Cumbria	Cheshire & Merseyside	Greater Manchester	Lancashire and South Cumbria
Apr	169	279	113	175	276	109	168	284	123
May	185	269	107	200	306	119	172	259	133
Jun	185	285	98	199	285	102	178	256	144
Jul	187	286	131	190	280	135	200	267	124
Aug	181	295	125	178	278	111	196	272	117
Sep	200	265	108	190	259	108	182	257	121
Oct	197	336	134	192	295	131	175	293	115
Nov	194	273	124	170	260	118	190	275	122
Dec	174	272	101	174	282	102	190	282	120
Jan	161	285	148	183	284	126	186	267	123
Feb	169	290	119	159	275	108	160	273	122
Mar	163	273	123	187	284	140	187	270	92
Total	2,165	3,408	1,431	2,197	3,364	1,409	2,184	3,255	1,456

Table 2.2.1

2.2.2 NNU first admissions against the number of live births across the ODN

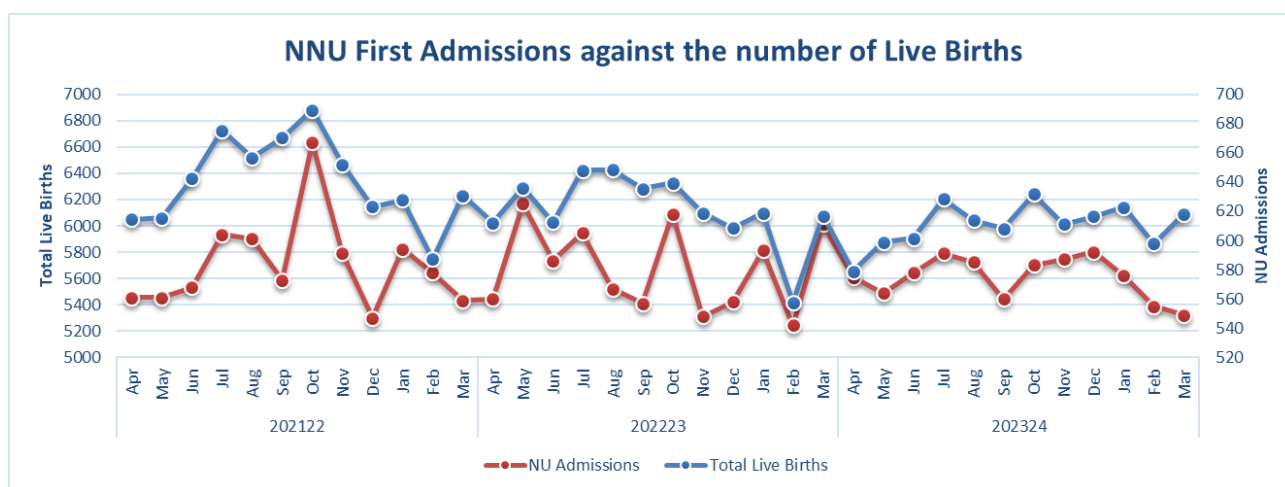


Chart 2.2.2

The admission rate to an NNU in comparison to overall birth rate across the NW has generally followed the same pattern across the past 3 years. In 2023/24 the trend shows more consistency in births and admissions with no large peaks or dips compared to previous years.

Month	2021/22		2022/23		2023/24	
	Live Births	Admissions	Live Births	Admissions	Live Births	Admissions
Apr	6,049	561	6,024	560	5,653	575
May	6,061	561	6,290	625	5,877	564
Jun	6,362	568	6,026	586	5,906	578
Jul	6,726	604	6,423	605	6,204	591
Aug	6,518	601	6,426	567	6,043	585
Sep	6,670	573	6,283	557	5,978	560
Oct	6,882	667	6,328	618	6,243	583
Nov	6,469	591	6,097	548	6,013	587
Dec	6,144	547	5,982	558	6,072	592
Jan	6,197	594	6,096	593	6,143	576
Feb	5,746	578	5,418	542	5,864	555
Mar	6,229	559	6,075	611	6,092	549
Total	76,053	7,004	73,468	6,970	72,088	6,895

Table 2.2.2

2.2.3 First admissions across the NWNODN by gestation

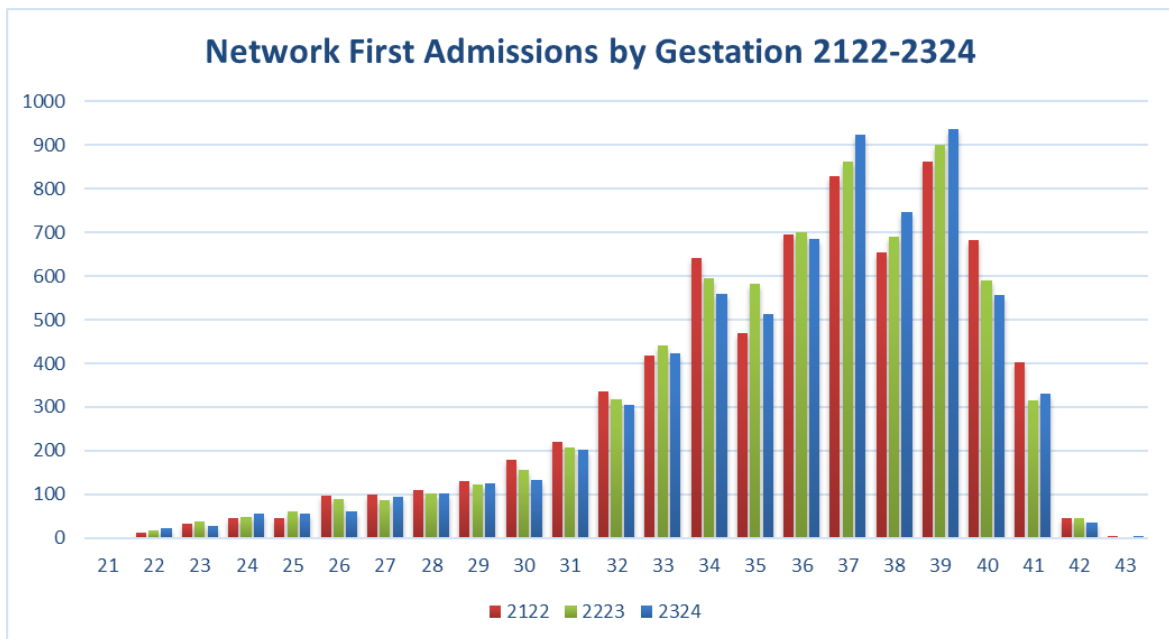


Chart 2.2.3

2.3 First Admissions and Birth data

Tables 2.3.1 – 2.3.3 show the number of live births and NNU first admissions only. Postnatal transfers in, including Alder Hey admissions are excluded.

2.3.1 First Admissions and Live Births by Locality

Locality	2020/21		2022/23		2023/24	
	L.births	NNU	L.births	NNU	L.births	NNU
Greater Manchester	35,589	3,408	34,268	3,364	33,174	3,255
Cheshire & Merseyside	24,926	2,165	24,023	2,197	23,935	2,184
Lancashire & South Cumbria	15,538	1,431	15,177	1,409	14,979	1,456
Total	76,053	7,004	73,468	6,970	72,088	6,895

Table 2.3.1

2.3.2 First Admissions and Live Births as a Percentage by Unit

Greater Manchester	Live Births	NNU	% 2021/22	% 2022/23	% 2023/24
MFT – NMGH	3,459	294	8%	8%	8%
MFT – SMH	7,670	881	11%	11%	11%
MFT – WYTH	4,805	344	7%	7%	7%
RBH	5,056	543	11%	11%	11%
ROH	4,720	458	11%	11%	10%
SHH	2,872	263	8%	8%	9%
TGH	2,119	196	9%	10%	9%
WWL	2,473	276	9%	11%	11%
Total	33,174	3,255	10%	10%	10%

Table 2.3.2

Cheshire & Merseyside	Live Births	NNU	% 2020/21	% 2022/23	% 2023/24
APH	2,857	252	8%	8%	9%
COC	2,017	140	8%	8%	7%
ECH	905	54	-	-	6%
LNP – LWH	6,961	729	10%	11%	10%
MCHT	2,857	210	8%	7%	7%
MWL - ODGH	2,077	204	8%	8%	10%
MWL – STHK	3,843	323	9%	10%	8%
WHH	2,418	272	10%	10%	11%
Total	23,935	2,184	9%	9%	9%

Table 2.3.3

Lancashire & South	Live Births	NNU	% 2021/22	% 2022/23	% 2023/24
BTH	2,407	271	11%	10%	11%
ELHT	5,848	606	10%	10%	10%
LTHTR	4,117	347	7%	7%	8%
MBHT – FGH	9,77	84	8%	8%	9%
MBHT – RLI	1,630	148	9%	10%	9%
Total	14,979	1,456	9%	9%	10%

Table 2.3.4

2.4 Total admissions across the NWNODN including out of area postnatal transfers.

Locality	NNU First Admissions	Post Natal Transfers into NNUs*	Total Admissions
Greater Manchester	3,255	15	3,270
Cheshire & Merseyside	2,184	78	2,262
Lancashire & South Cumbria	1,456	11	1,467
Total	6,895	104	6,999

Table 2.4

*Includes out of area babies transferred in postnatally, as detailed in section 4, or repatriations back to the region.

See Section 4 for details of Post Natal Transfers from out of area.

2.5 Term & Late Preterm Admissions

2.5.1 Term Admissions (≥ 37 Weeks)

Table 2.5.1 shows the number of NNU first admissions of 37 weeks and over by unit and locality with the totals shown as a percentage of live births. Trend data for previous two years is also included.

Locality/Unit	2021/22 ≥ 37 weeks admissions	2021/22 % of Live births	2022/23 ≥ 37 weeks admissions	2022/23 % of Live births	2023/24 ≥ 37 weeks admissions	2023/24 % of Live births
Greater Manchester	1,651	4.6%	1,686	4.9%	1,639	4.9%
MFT – NMGH	164	4.6%	159	4.5%	179	5.2%
MFT – SMH	443	5.5%	460	5.8%	433	5.6%
MFT – WYTH	163	3.3%	182	3.8%	178	3.7%
RBH	331	5.9%	299	5.7%	284	5.6%
ROH	248	4.8%	217	4.4%	207	4.3%
SHH	103	3.0%	114	3.5%	116	4.1%
TGH	93	4.2%	91	4.3%	91	4.3%
WWL	106	4.1%	164	6.4%	151	6.1%
Cheshire & Merseyside	1,133	4.5%	1,040	4.3%	1,128	4.7%
APH	101	3.4%	76	2.5%	113	4.0%
COC	77	3.6%	62	2.9%	56	2.8%
ECH	-	-	-	-	35	2.9%
LNP – LWH	363	4.8%	343	4.8%	358	5.1%
MCHT	112	3.5%	107	3.4%	115	4.0%
MWL - ODGH	119	5.0%	95	4.3%	115	5.5%
MWL - STHK	205	5.1%	221	5.9%	185	4.8%
WHH	156	5.9%	136	5.4%	151	6.3%
Lancashire and South Cumbria	694	4.5%	678	4.5%	770	5.1%
BTH	128	4.9%	92	3.7%	123	5.1%
ELHT	310	5.2%	316	5.4%	354	6.1%
LTHTR	142	3.3%	150	3.6%	181	4.4%
MBHT – FGH	42	4.0%	48	4.9%	48	5.0%
MBHT – RLI	72	4.4%	72	4.3%	64	3.9%
Grand Total	3,478	4.6%	3,404	4.6%	3,537	4.9%

Table 2.5.1

Term admissions include any baby admitted for the first episode of care onto a NNU, regardless of whether Day 1 or later. In addition, surgical admissions are included, as per the national ATAIN criteria. Term admission data is presented on the NWNODN dashboards every quarter. The NWNODN

and locality Local Maternity Systems (LMS) have worked collaboratively to continually reduce term admissions. The North West region remains under the 6% national target, and as in previous years work continues in line with CNST to further improve the Transitional Care offer across the network. Secondary data on term and late pre-term separation, demonstrates that whilst continuing to decrease the percentage of term admissions is it also important to reduce the average number of special or normal care days and unnecessary separation, which is potentially achievable by facilitating earlier discharge back to the post-natal ward, transitional care or home.

2.5.2 Late Preterm Admissions (≥ 34 and <37 Weeks)

Table 2.5.2 shows the number & percentage of first admissions between ≥34 weeks to < 37 weeks by unit and locality. Trend data for previous two years is also included.

Locality/Unit	2021/22 34-36 weeks admissions	2021/22 % of 34-36 weeks births	2022/23 34-36 weeks admissions	2022/23 % of 34-36 weeks births	2023/24 34-36 weeks admissions	2023/24 % of 34-36 weeks births	2023/24 Mean avoidable separation days 34-36
Greater Manchester	904	40%	877	38%	880	38%	6.1
MFT – NMGH	76	39%	89	45%	70	35%	8.0
MFT – SMH	208	40%	199	38%	224	37%	5.4
MFT – WYTH	101	34%	90	36%	84	33%	5.4
RBH	131	42%	132	44%	142	42%	8.4
ROH	155	46%	149	35%	134	36%	5.7
SHH	101	42%	98	37%	91	44%	5.1
TGH	64	42%	59	38%	60	37%	5.8
WWL	68	39%	61	37%	75	49%	4.9
Cheshire & Merseyside	511	37%	612	43%	520	39%	5.2
APH	54	41%	63	45%	59	40%	2.9
COC	50	36%	81	56%	53	43%	5.4
ECH	-	-	-	-	15	37%	4.3
LNP – LWH	166	35%	167	36%	153	35%	3.8
MCHT	64	38%	81	43%	46	37%	9.1
MWL - ODGH	43	34%	55	42%	50	39%	5.8
MWL - STHK	69	36%	89	41%	73	37%	5.7
WHH	65	46%	76	55%	71	59%	6.4
Lancashire and South Cumbria	390	44%	390	42%	357	40%	5.1
BTH	93	53%	101	49%	93	46%	5.8
ELHT	138	40%	138	43%	124	40%	4.3
LTHTR	73	35%	74	32%	72	36%	6.9
MBHT – FGH	30	63%	19	37%	18	38%	3.3
MBHT – RLI	56	45%	58	48%	50	38%	4.6
Grand Total	1,805	40%	1,879	41%	1757	39%	5.7

Table 2.5.2

2.5.3 Term Admissions (≥37 weeks) by Length of Stay

Table 2.5.3 shows the Length of Stay for babies with a first admission within the NWNODN.

LOS Hourly Group only includes care on the NNU.

Locality / Unit	First admissions 2021/22				First admissions 2022/23				First admissions 2023/24			
	0-6h	7-12h	13-24h	Over 24h	0-6h	7-12h	13-24h	Over 24h	0-6h	7-12h	13-24h	Over 24h
Greater Manchester	5%	4%	10%	81%	5%	3%	8%	84%	3%	3%	6%	89%
MFT – NMGH	4%	2%	9%	85%	3%	4%	6%	87%	5%	5%	1%	90%
MFT – SMH	4%	5%	11%	80%	4%	3%	10%	83%	2%	1%	3%	94%
MFT – WYTH	4%	2%	14%	79%	1%	3%	14%	82%	3%	2%	9%	86%
RBH	1%	2%	8%	88%	3%	2%	7%	89%	0%	3%	5%	92%
ROH	8%	4%	8%	80%	3%	4%	5%	88%	1%	1%	4%	94%
SHH	8%	9%	5%	79%	10%	4%	7%	78%	9%	2%	8%	82%
TGH	6%	9%	19%	66%	11%	7%	4%	78%	5%	0%	13%	82%
WWL	8%	7%	14%	71%	10%	4%	11%	75%	6%	10%	13%	72%
Cheshire & Merseyside	8%	7%	15%	70%	6%	8%	13%	74%	5%	5%	13%	77%
APH	9%	5%	14%	72%	3%	9%	12%	76%	5%	5%	19%	71%
COC	9%	6%	14%	70%	3%	5%	21%	71%	5%	0%	5%	90%
ECH	-	-	-	-	-	-	-	-	0%	0%	14%	86%
LNP – LWH	6%	6%	11%	77%	7%	8%	9%	76%	6%	5%	5%	84%
MCHT	1%	4%	14%	81%	2%	4%	13%	81%	6%	6%	19%	70%
MWL - ODGH	17%	15%	15%	53%	11%	13%	14%	63%	12%	2%	14%	71%
MWL - STHK	6%	11%	22%	60%	4%	8%	20%	68%	2%	10%	20%	69%
WHH	8%	5%	14%	73%	5%	5%	7%	83%	3%	4%	14%	80%
Lancashire and S.Cumbria	3%	6%	11%	80%	4%	4%	10%	82%	4%	4%	8%	84%
BTH	2%	6%	6%	85%	0%	5%	5%	91%	5%	3%	5%	87%
ELHT	2%	6%	11%	81%	2%	4%	10%	84%	2%	1%	9%	88%
LTHTR	2%	7%	12%	79%	4%	7%	10%	78%	4%	10%	6%	79%
MBHT – FGH	7%	2%	24%	67%	16%	0%	19%	65%	11%	21%	16%	53%
MBHT – RLI	6%	6%	11%	78%	9%	0%	3%	88%	4%	4%	4%	87%
Total	5%	6%	12%	77%	5%	5%	10%	80%	4%	4%	9%	84%

Table 2.5.3

2.6 Appropriate place of delivery (<27 weeks, <28 weeks if multiple & <800g)

2.6.1 Appropriate place of delivery by locality

Tables 2.6.1 shows the number of deliveries of less than 27 weeks, multiple births less than 28 weeks and babies born weighing <800g by locality, if delivered in an appropriate place of birth (NICU), as reported to NHSE. A multiple birth counts as one delivery.

NWNODN	2021/22	2022/23	2023/24
Total <27/40 born in NICU	187	232	210
Total <27/40 born in LNU	37	43	32
Total <27/40 born in all categories	224	275	242
% <27/40 born in NICU	83%	85%	87%
Greater Manchester			
Total <27/40 born in NICU	86	109	93
Total <27/40 born in LNU	14	20	18
Total <27/40 born in all categories	100	129	111
% <27/40 born in NICU	86%	84%	84%
Cheshire & Merseyside			
Total <27/40 born in NICU	62	84	72
Total <27/40 born in LNU	14	13	11
Total <27/40 born in all categories	76	97	83
% <27/40 born in NICU	82%	87%	87%
Lancashire & South Cumbria			
Total <27/40 born in NICU	39	39	45
Total <27/40 born in LNU	9	10	3
Total <27/40 born in all categories	48	49	48
% <27/40 born in NICU	81%	80%	94%

Table 2.6.1

In 2021/22 home births were attributed to the neonatal unit where the 1st episode of care was delivered. From 2022/23 any babies born outside of a hospital with a neonatal unit (including home births) are included but attributed to the locality. Additional babies <800g have only been included from 2022/23 onwards.

2.6.2 Appropriate place of delivery by unit

Tables 2.6.2 – 2.6.4 show the number of deliveries of less than 27 weeks, or multiple births less than 28 weeks, and from 2022/23 <800g by locality and unit. A multiple birth counts as one delivery & home births are attributed to the 1st episode of care for 2021/22 but are recorded as 'other' in 2022/23 & 2023/24.

Greater Manchester	Unit category	2021/22	2022/23	2023/24
Total <27/40 born in NICU		86	109	93
MFT – SMH	NICU	34	37	40
RBH	NICU	27	34	29
ROH	NICU	25	38	24
Total <27/40 born in LNU or SCBU		14	20	18
MFT – NMGH	LNU	3	3	3
MFT – WYTH	LNU	3	4	2
SSH	LNU	1	3	4
TGH	LNU	3	3	4
WWL	LNU	4	2	4
Other - Home and In-transit	LNU	-	5	1
Total <27/40 born in all unit categories		100	129	111
% <27/40 born in NICU		86%	84%	84%

Table 2.6.2

Cheshire & Merseyside	Unit category	2021/22	2022/23	2023/24
Total <27/40 born in NICU		62	84	72
APH	NICU	22	23	24
LNP – LWH	NICU	40	61	48
Total <27/40 born in LNU or SCBU		14	13	11
COC	LNU	4	1	2
ECH	LNU	0	0	1
MCHT	LNU	2	6	0
MWL – ODGH	LNU	2	0	4
MWL – STHK	LNU	3	3	1
WHH	LNU	3	2	2
Other - Home and In-transit	LNU	-	1	1
Total <27/40 born in all unit categories		76	97	83
% <27/40 born in NICU		83%	87%	87%

Table 2.6.3

Lancashire & South Cumbria	Unit category	2021/22	2022/23	2023/24
Total <27/40 born in NICU		39	39	45
ELHT	NICU	27	24	29
LTHTR	NICU	12	15	16
Total <27/40 born in LNU or SCBU		9	10	3
BTH	LNU	6	7	3
MBHT – FGH	SCBU	2	0	0
MBHT – RLI	LNU	1	2	0
Other - Home and In-transit	LNU	-	1	0
Total <27/40 born in all unit categories		48	49	48
% <27/40 born in NICU		81%	80%	94%

Table 2.6.4

In 2023/24 the NWNODN exception reporting process showed that most deliveries outside of a centre with a NICU were unavoidable. Despite an increase in babies born in the wrong place in Q4, in 2023/24 87% of babies <27 weeks (or 800g or <28wks if multiple) were born at a NICU, making the NW one of the best performing regions for appropriate place of birth. The NWNODN continues to work collaboratively with each LMS to review any births in the wrong place, to establish if with more robust pathways and earlier triage, antenatal transfers could have been achieved.

The following chart is an extract from the NNAP Audit Programme 2022 Annual Report (Published November 2023), showing that in 2022 the NWNODN was one of the best performing ODNs for babies less than 27 weeks' gestational age being born at a centre with a NICU. Further statistics from the NNAP Annual Report can be accessed at [nnap 2022 data extended analysis report v1.0.pdf \(rcpch.ac.uk\)](https://www.rcpch.ac.uk/resources/nnap-2022-data-extended-analysis-report-v1.0.pdf)

Figure 18. Caterpillar plot of the proportions of birth in a centre with a NICU, by neonatal network or operational delivery network (ODN).

Network proportions are represented by dots. The 95% confidence intervals for a network are shown by a vertical line with each dot. Full results are available on NNAP Online.

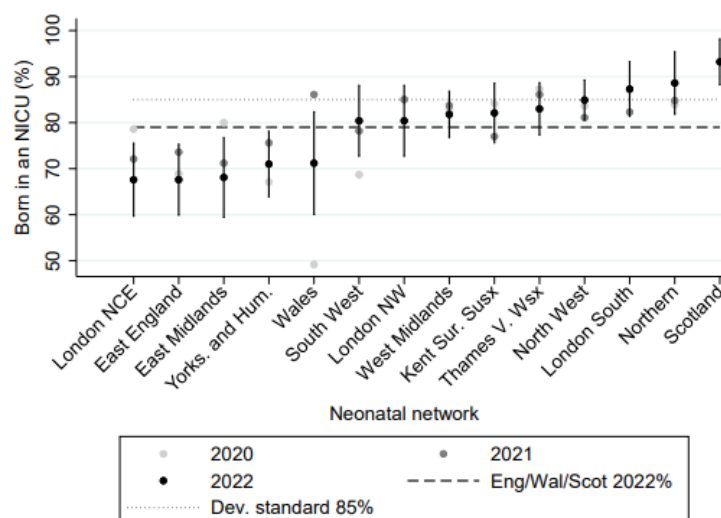


Chart 2.6.2

3. Activity and workload

3.1 NWNODN Activity by Level of Care

Table 3.1 shows the number of care level days by Locality & across the ODN, HRG (2016) codes. Excludes Alder Hey data & XA04Z care delivered in TC.

HRG 2016	XA01Z			XA02Z			XA03Z + XA04Z + XA05Z			Total		
Locality	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
Greater Manchester	9,823	10,083	9,890	16,517	16,284	16,065	34,828	31,688	31,450	61,168	58,055	57,405
Cheshire & Merseyside	5,273	6,113	5,614	7,534	7,684	7,637	18,990	19,925	19,478	31,797	33,722	32,729
Lancashire & South Cumbria	3,221	3,531	3,703	5,152	5,096	6,048	13,314	12,008	12,986	21,687	20,635	22,737
Total across the NWNODN	18,317	19,727	19,207	29,203	29,064	29,750	67,132	63,621	63,914	111,620	112,412	112,871

Table 3.1

3.2 NWNODN NICU Activity by Level of Care

Table 3.2 shows the percentage of care, for each level, delivered within NICUs. XA04Z care if delivered in TC is not included.

HRG 2016	XA01Z %			XA02Z %			XA03Z + AX04Z + XA05Z %		
NICUs	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
Greater Manchester	91%	92%	92%	77%	75%	77%	52%	50%	53%
Cheshire & Merseyside	83%	86%	85%	61%	64%	62%	43%	46%	40%
Lancashire & South Cumbria	91%	93%	93%	77%	78%	81%	65%	62%	64%
Mean across the ODN	87%	90%	90%						

Table 3.2

3.3 NWNODN Activity and Workload

3.3.1 NWNODN NICU Activity

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all NICUs should, as a minimum, look after at least 100 very low birth weight (VLBW) infants per year and be delivering >2000 intensive care days (Health Resource Group definition, 2016 & BAPM Optimal Arrangements for Neonatal Intensive Care Units in the UK, 2021). This is in-line with the new Neonatal Critical Care Service Specification (March 2024)

Table 3.3.1 shows all NICU activity, regardless of episode number, and includes surgical care at St. Mary's Hospital.

NICU	Intensive Care HRG XA01Z			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
MFT – SMH	5,347	5,684	5,672	8,681	8,717	8,392	208	183	192
RBH	1,450	1,566	1,562	4,721	4,694	4,799	115	111	106
ROH	2,102	2,026	1,857	4,407	4,784	4,641	128	125	107
APH	1,296	1,361	1,102	2,638	3,068	2,696	72	81	61
LNP – LWH	3,090	3,893	3,691	5,237	5,964	5,677	160	202	163
ELHT	1,714	1,964	2,152	3,834	3,906	4,785	87	89	93
LTHTR	1,230	1,317	1,279	2,420	2,849	2,951	67	57	77
Total	16,229	17,811	17,315	31,938	33,982	33,941	837	848	799

Table 3.3.1

3.3.2 NWNODN LNU Unit Activity

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all LNUs should aim to undertake a minimum of 500 days of combined intensive and high dependency care (Health Resource Group definition, 2016), which is considered the minimum requirement to maintain expertise. LNUs providing ongoing HD should be working towards delivering 1000 combined ITU/HD days per year, in the longer term (i.e. 5 years from publication of NCCR in 2019). Units designated as LNUs should also admit >25 VLBW infants annually (BAPM Optimal arrangements for Local Neonatal Units and Special Care Units in the UK, 2016).

LNU	IC & HD HRG XA01Z & XA02Z			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
MFT – NMGH	1,103	857	928	993	661	613	50	52	57
MFT – WYTH	1,401	1,484	1,263	1,210	1,254	1,098	60	61	45
SHH	912	1,146	783	873	1,073	748	41	41	32
TGH	493	524	693	387	459	513	34	23	33
WWL	826	819	891	736	724	850	34	35	38
COC*	457	332	288	349	231	227	28	18	21
MCHT	946	952	792	672	748	606	35	26	36
MWL - ODGH	528	561	648	441	409	473	20	22	21
MWL - STHK	894	882	967	636	604	618	35	31	31
WHH	998	897	962	753	737	837	26	33	26
BTH	875	809	812	700	698	765	41	27	27
MBHT – RLI	562	517	567	542	473	503	17	22	24
Total	9,995	9,780	9,594	8,292	8,071	7,851	421	391	391

Table 3.3.2

* COC currently only accept deliveries of 32 weeks gestation and above

3.3.3 NWNODN SCU Unit Activity

SCU	IC & HD HRG XA01Z & XA02Z			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
ECH	0	0	50	0	0	50	0	0	3
MBHT - FGH	46	44	47	45	38	46	5	7	7
Total	46	44	97	45	38	96	5	7	10

Table 3.3.3

3.3.4 NWNODN NICU Average Length of Stay by Gestations

Length of stay for babies discharged in 2023/24, attributed to first episode of care location. Only includes babies discharged Home or to Foster Care. Babies who died during their neonatal admission or who transferred to a non-neonatal ward have been excluded. Due to small numbers in the 24-25week bracket if just one baby has a longer stay due to complex needs then the mean can increase considerably.

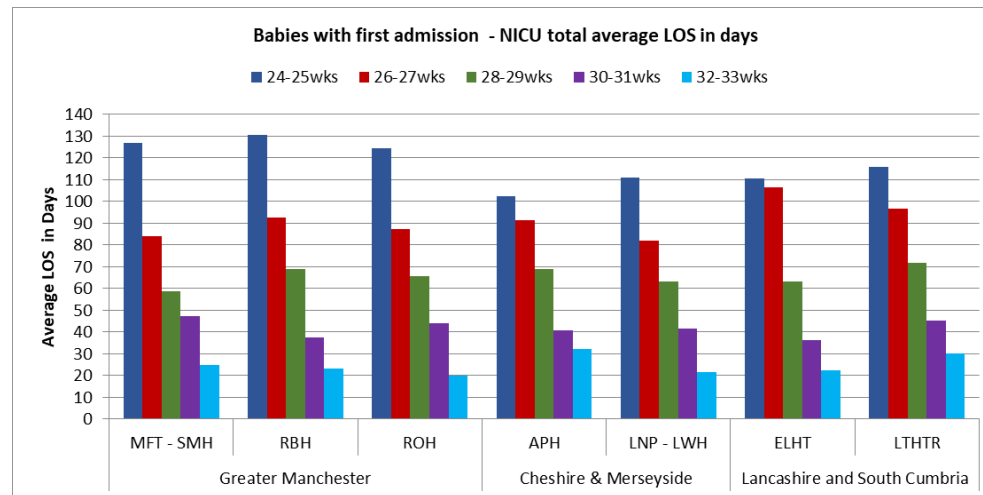


Chart 3.3.4

Length of stay for babies discharged in 2023/24, attributed to first episode of care location. Only includes babies discharged Home or to Foster Care. Babies who died during their neonatal admission or who transferred to a non-neonatal ward have been excluded. Due to small numbers in the 27week bracket if just one baby has a longer stay due to complex needs then the mean can increase considerably.

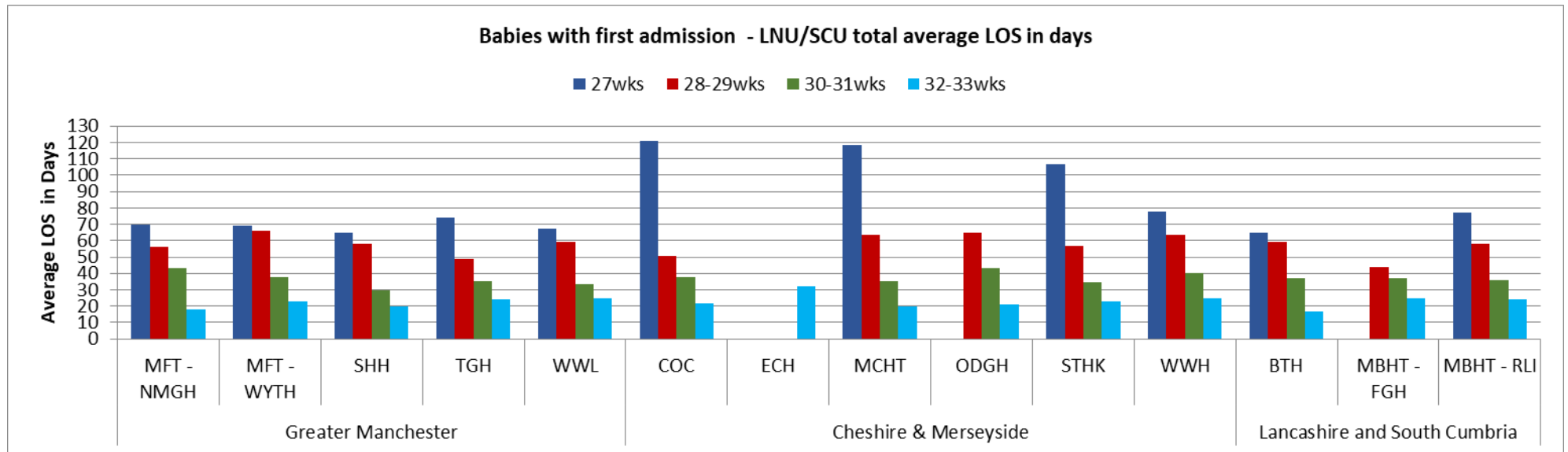


Chart 3.3.5

3.3.5 NWNODN HRG Activity for babies born <24weeks gestation

Table showing NNU ward activity for babies with gestation of birth of 22 or 23 weeks. There were 50 babies admitted in 2023/24, which is lower than the previous year (70 admissions) but the same as 2021/22.

Financial Year	XA01Z	XA02Z	XA03Z	XA04Z	XA05Z	Total
2021/22	1,611	956	520	24	0	3,111
2022/23	1,975	1,358	415	15	0	3,763
2023/24	1,630	1,624	451	30	0	3,735

Table 3.3.5

Although babies born at 22-23 weeks' gestation comprise of less than 1% of total births, they represent 8.5% of the overall intensive care activity delivered by the NWNODN.

3.4 Cot Activity

Table 3.4 shows the demand (D) for cots based upon activity within each of the localities against actual (A) cots. Care Levels are based upon HRG 2016 codes but are referred to as IC, HD & SC cots as these are the commissioned cots in each category. An element of surgical care is included in the figures as it is not possible to separate out surgical activity within the data.

Calculation method which includes 80% capacity: Cot Demand = (Number of care days/366)/0.8) due to leap year

NWNODN	Cots D: Demand A: Actual															
	D	D	D	A	D	D	D	A	D	D	D	A	Total	Total	Total	Total
	IC	IC	IC	IC	HD	HD	HD	HD	SC	SC	SC	SC	D	D	D	A
	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24
Greater Manchester	34	35	34	45	57	56	55	50	119	109	108	130	210	199	197	225
Cheshire & Merseyside	19	23	22	25	30	31	31	43	68	71	69	84	118	125	122	152
Lancashire & South Cumbria	11	12	13	15	18	17	21	20	46	41	44	57	74	71	78	92
Total	64	70	69	85	105	104	107	113	233	221	221	271	402	395	397	469

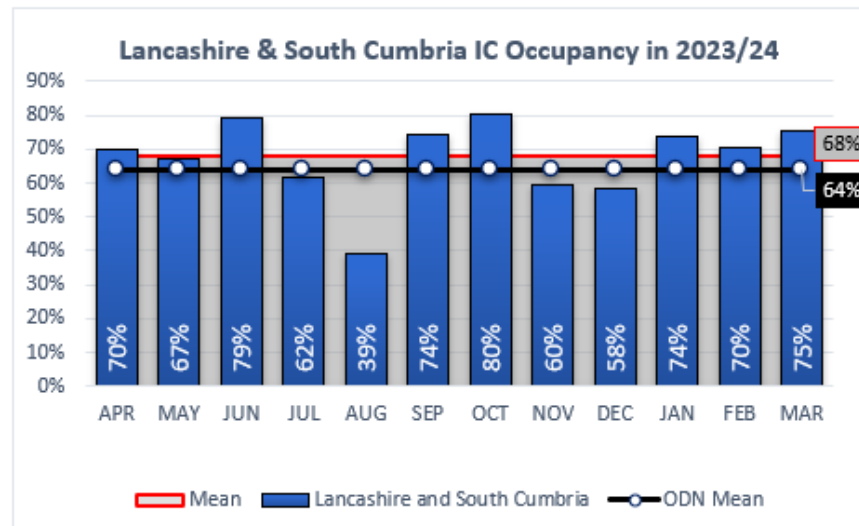
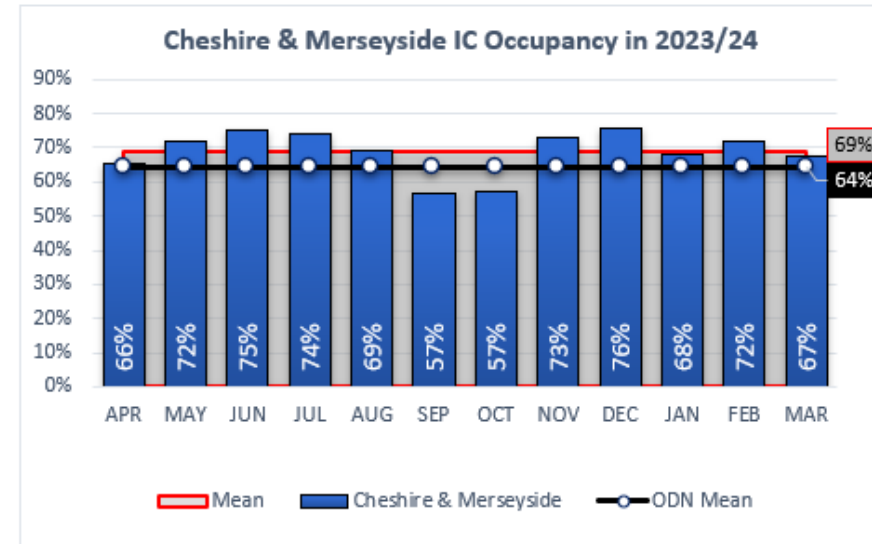
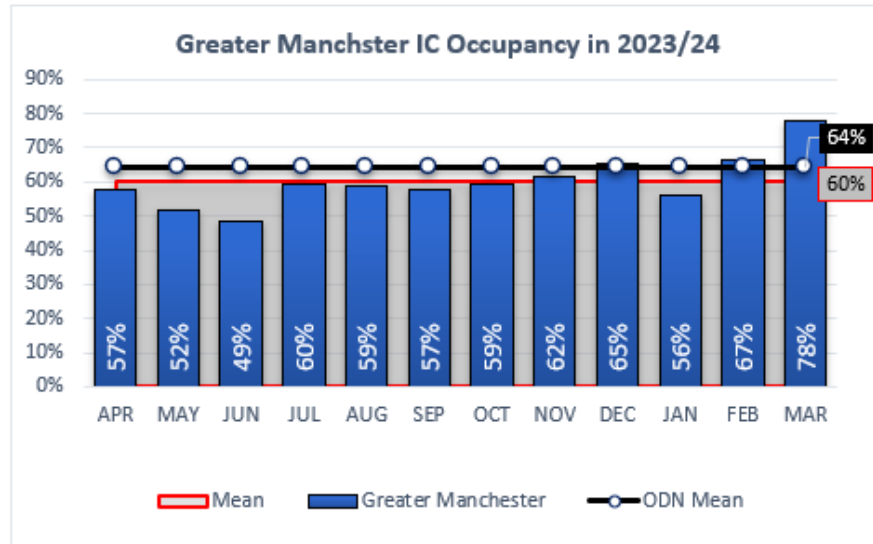
Table 3.4

Key: Red – The demand is higher than the Actual Cots. Amber – The demand is lower than the Actual Cots.

3.5 Overall Occupancy by Care Level

NICU = pink, LNU = blue, SCU = green and surgical unit = purple. Occupancy at $\leq 80\%$ is shown with a green background, $>80\%$ is shown in red.

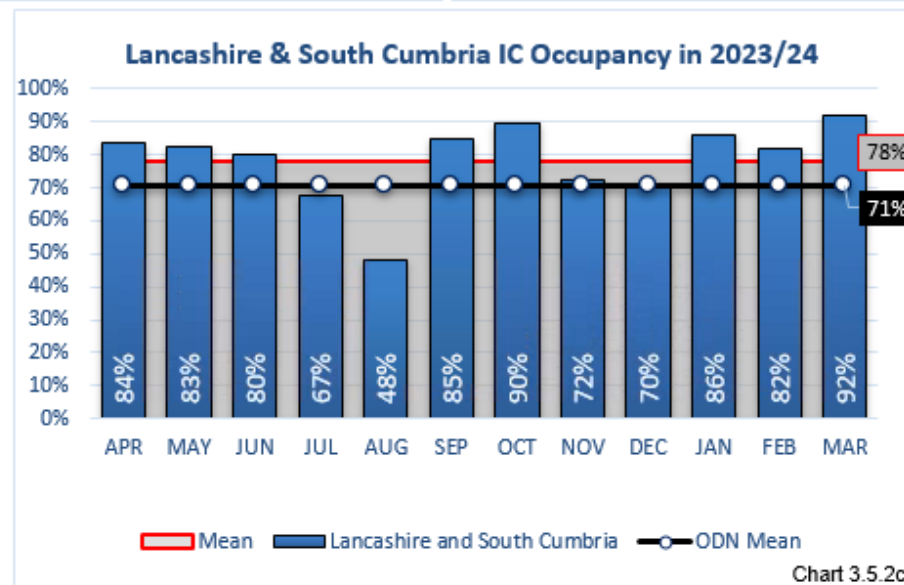
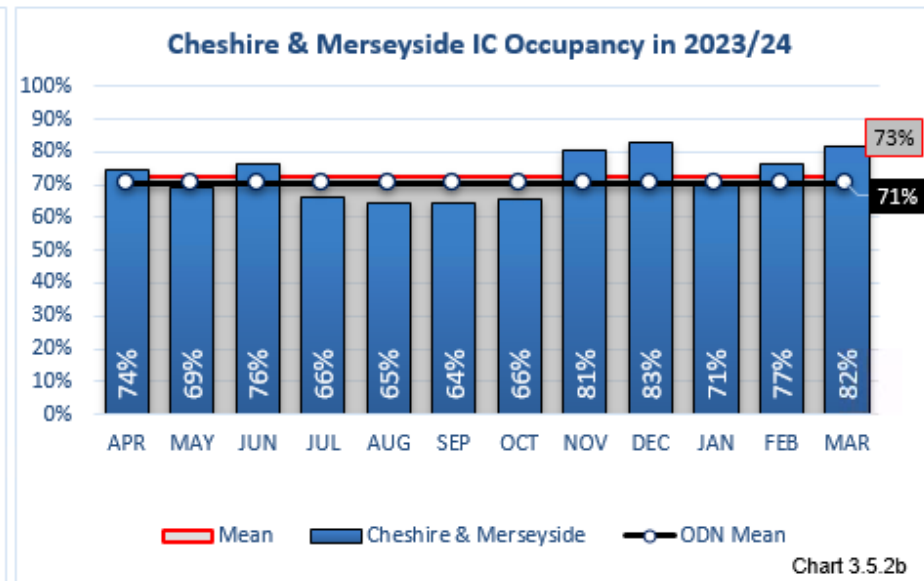
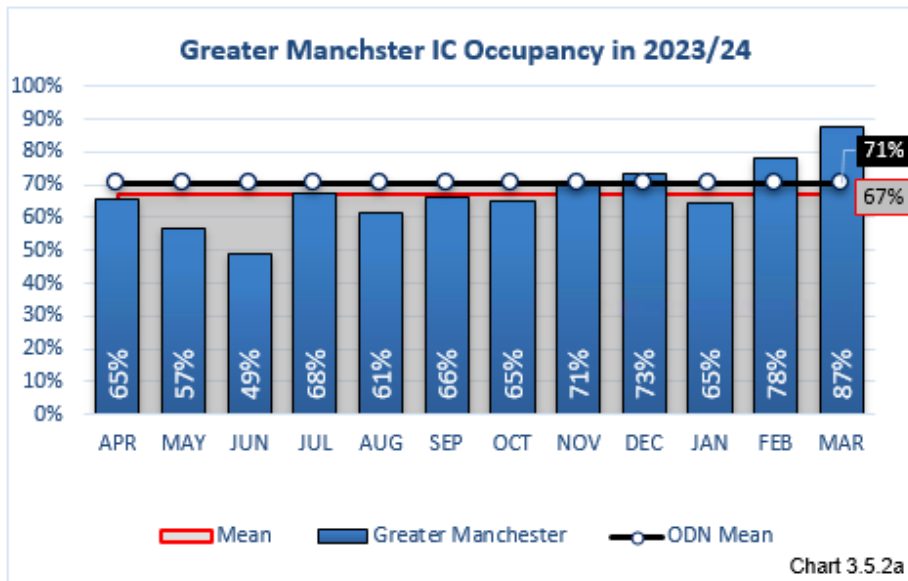
3.5.1 Average Monthly IC (XA01Z) Occupancy by locality and units



XA01Z (IC) Occupancy	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	Mean	2122	2223
Greater Manchester	57%	52%	49%	60%	59%	57%	59%	62%	65%	56%	67%	78%	60%	60%	61%
MFT – NMGH	18%	16%	30%	10%	5%	10%	13%	13%	39%	8%	14%	42%	18%	25%	17%
MFT – SMH	87%	74%	66%	93%	76%	70%	70%	71%	90%	81%	104%	97%	82%	77%	82%
MFT – WYTH	18%	27%	28%	55%	53%	28%	39%	35%	32%	37%	21%	26%	33%	41%	36%
RBH	43%	51%	33%	37%	44%	65%	41%	51%	53%	41%	46%	65%	47%	44%	48%
ROH	43%	28%	29%	45%	49%	59%	79%	90%	57%	53%	56%	89%	56%	64%	62%
SHH	7%	27%	43%	5%	63%	12%	26%	18%	16%	11%	2%	11%	20%	30%	19%
TGH	27%	61%	83%	32%	58%	10%	94%	3%	48%	10%	21%	52%	42%	32%	29%
WWL	53%	23%	93%	10%	65%	27%	10%	17%	6%	13%	14%	65%	33%	30%	49%
Cheshire & Merseyside	66%	72%	75%	74%	69%	57%	57%	73%	76%	68%	72%	67%	69%	60%	70%
APH	54%	26%	36%	54%	50%	37%	41%	34%	72%	67%	68%	62%	50%	59%	62%
COC	10%	42%	3%	19%	16%	7%	10%	13%	26%	6%	10%	3%	14%	19%	15%
ECH													8	-	-
LNP – AHCH													676	383	548
LNP – LWH	85%	91%	97%	72%	72%	78%	78%	104%	89%	72%	81%	91%	84%	71%	89%
MCHT	28%	17%	2%	14%	34%	10%	10%	27%	5%	22%	41%	8%	18%	22%	19%
MWL – ODGH	17%	16%	17%	6%	16%	3%	16%	27%	81%	81%	10%	23%	26%	32%	28%
MWL – STHK													193	163	203
WHH	10%	39%	53%	27%	21%	52%	42%	13%	73%	31%	59%	32%	38%	27%	26%
Lancashire and South Cumbria	70%	67%	79%	62%	39%	74%	80%	60%	58%	74%	70%	75%	68%	59%	64%
BTH	8%	5%	82%	29%	2%	42%	37%	13%	11%	32%	10%	8%	23%	28%	17%
ELHT	107%	96%	112%	87%	75%	99%	123%	111%	75%	109%	95%	89%	98%	78%	90%
LHTR	61%	69%	48%	48%	21%	70%	56%	33%	65%	64%	68%	95%	58%	56%	60%
MBHT – FGH													22	12	19
MBHT – RLI	10%	6%	53%	55%	10%	10%	55%	0%	10%	3%	41%	10%	22%	16%	29%
Grand Total	62%	60%	62%	64%	58%	60%	62%	65%	67%	63%	69%	74%	64%	60%	65%

Table 3.5.1

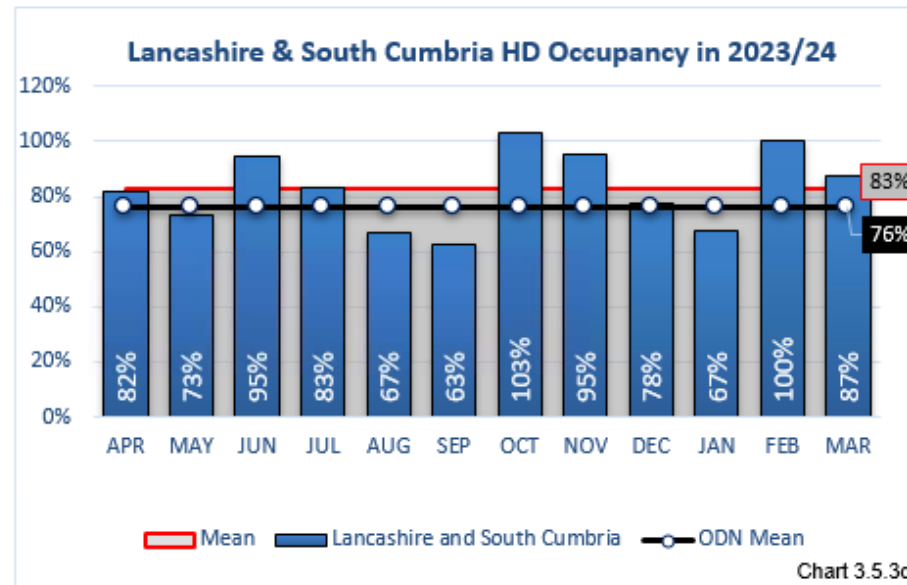
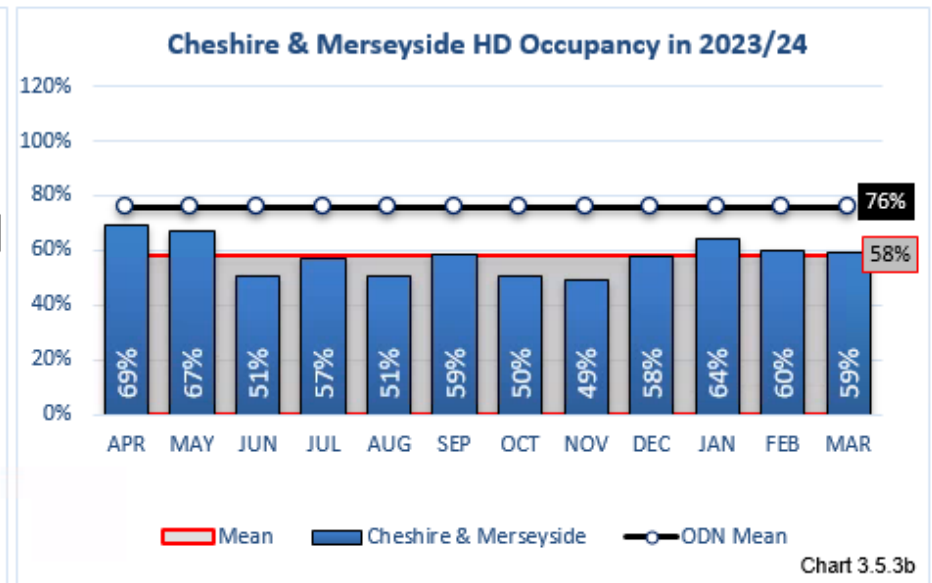
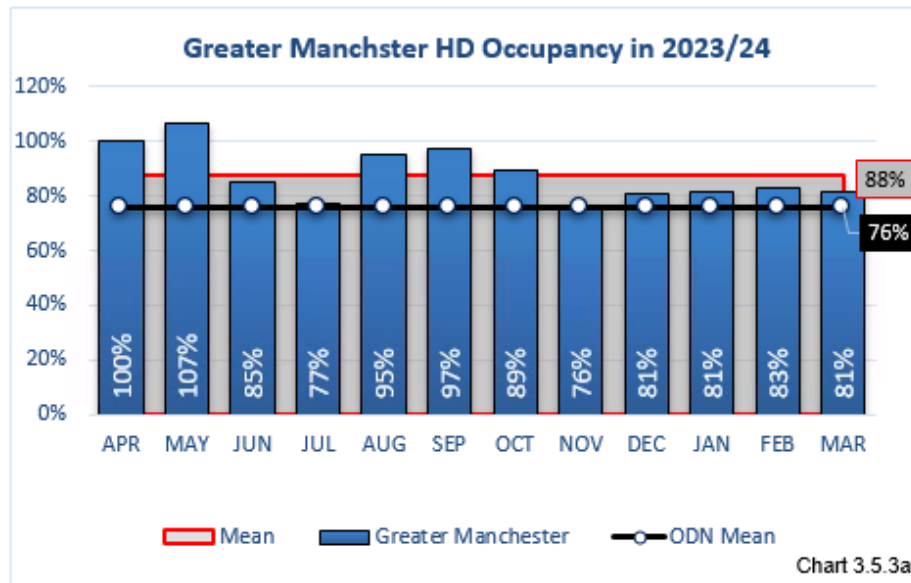
3.5.2 Average Monthly IC (XA01Z) Occupancy for NICUs only by Locality



XA01Z (IC) Occupancy	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	Mean	2122	2223
Greater Manchester	65%	57%	49%	68%	61%	66%	65%	71%	73%	65%	78%	87%	67%	66%	69%
MFT – SMH	87%	74%	66%	93%	76%	70%	70%	71%	90%	81%	104%	97%	82%	77%	82%
RBH	43%	51%	33%	37%	44%	65%	41%	51%	53%	41%	46%	65%	47%	44%	48%
ROH	43%	28%	29%	45%	49%	59%	79%	90%	57%	53%	56%	89%	56%	64%	62%
Cheshire & Merseyside	74%	69%	76%	66%	65%	64%	66%	81%	83%	71%	77%	82%	73%	67%	80%
APH	54%	26%	36%	54%	50%	37%	41%	34%	72%	67%	68%	62%	50%	59%	62%
LNP – LWH	85%	91%	97%	72%	72%	78%	78%	104%	89%	72%	81%	91%	84%	71%	89%
Lancashire and South Cumbria	84%	83%	80%	67%	48%	85%	90%	72%	70%	86%	82%	92%	78%	67%	75%
ELHT	107%	96%	112%	87%	75%	99%	123%	111%	75%	109%	95%	89%	98%	78%	90%
LTHTR	61%	69%	48%	48%	21%	70%	56%	33%	65%	64%	68%	95%	58%	56%	60%
Grand Total	71%	65%	62%	67%	60%	69%	70%	74%	75%	70%	78%	87%	71%	66%	73%

Table 3.5.2

3.5.3 Average Monthly HD (XA02Z) Occupancy by locality and units

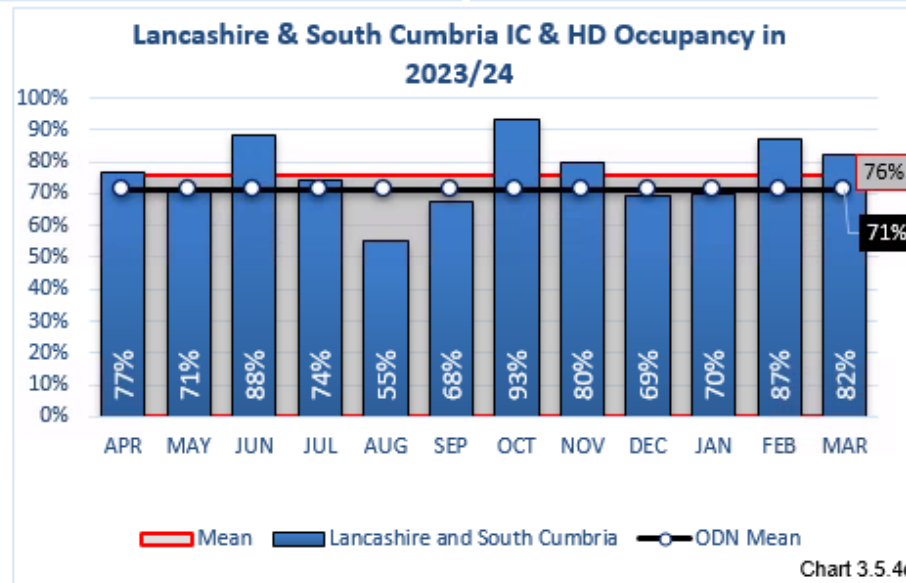
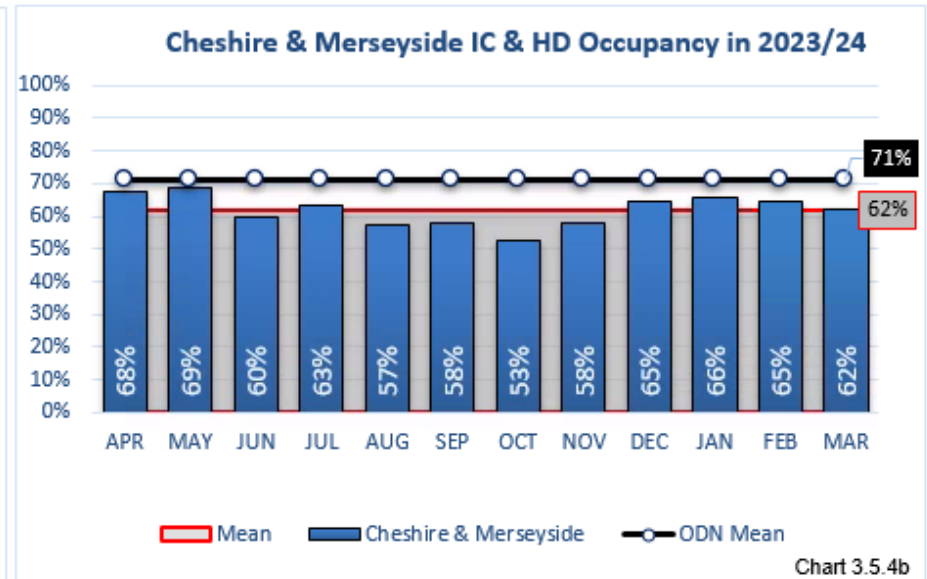
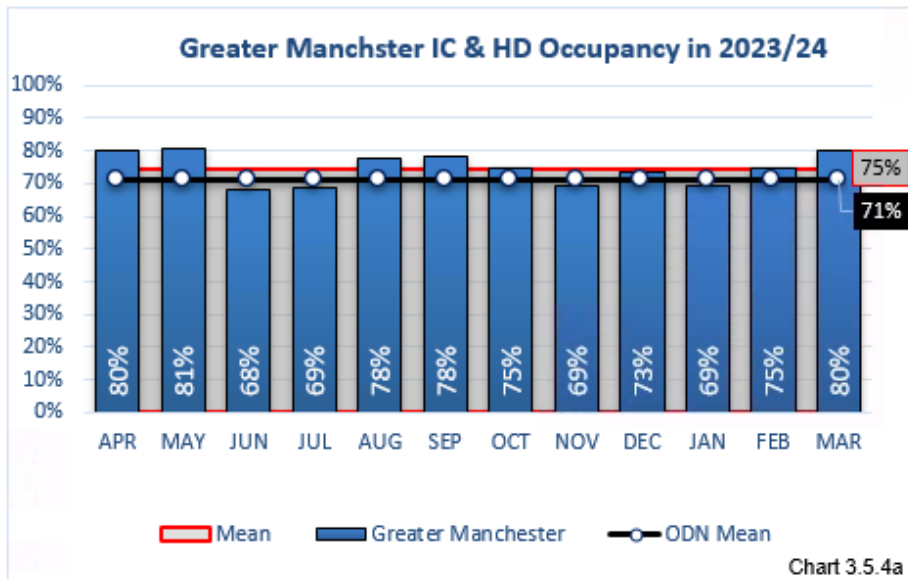


XA02Z (HD) Occupancy	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	Mean	2122	2223
Greater Manchester	100%	107%	85%	77%	95%	97%	89%	76%	81%	81%	83%	81%	88%	91%	89%
MFT – NMGH	137%	132%	80%	81%	73%	118%	71%	85%	148%	152%	114%	113%	109%	127%	101%
MFT – SMH	87%	99%	62%	62%	98%	90%	94%	79%	80%	88%	77%	66%	82%	90%	83%
MFT – WYTH	65%	65%	117%	65%	98%	81%	49%	24%	45%	31%	124%	74%	70%	76%	84%
RBH	152%	122%	129%	134%	159%	148%	166%	139%	122%	140%	105%	134%	138%	141%	133%
ROH	141%	149%	102%	81%	80%	112%	71%	67%	74%	71%	86%	87%	93%	86%	94%
SHH	44%	47%	76%	68%	46%	61%	53%	71%	99%	42%	41%	45%	58%	63%	92%
TGH	53%	70%	76%	73%	45%	50%	53%	32%	30%	28%	41%	39%	49%	35%	38%
WWL	68%	124%	61%	60%	76%	70%	68%	54%	44%	49%	62%	104%	70%	65%	59%
Cheshire & Merseyside	69%	67%	51%	57%	51%	59%	50%	49%	58%	64%	60%	59%	58%	59%	61%
APH	62%	63%	40%	77%	73%	46%	59%	50%	51%	79%	57%	81%	62%	54%	66%
COC	65%	8%	20%	48%	42%	8%	32%	33%	24%	19%	47%	42%	32%	53%	38%
ECH													42	0	0
LNP – AHCH	64%	37%	35%	28%	33%	63%	47%	36%	46%	39%	56%	39%	44%	42%	42%
LNP – LWH	83%	81%	65%	60%	55%	65%	50%	55%	79%	73%	74%	64%	67%	69%	69%
MCTH	66%	77%	33%	15%	26%	53%	52%	38%	23%	27%	34%	43%	41%	48%	51%
MWL - ODGH	80%	248%	240%	148%	26%	100%	77%	197%	177%	242%	124%	148%	151%	113%	126%
MWL - STHK	85%	147%	77%	147%	116%	103%	74%	88%	126%	139%	98%	66%	106%	100%	93%
WHH	47%	39%	49%	65%	49%	67%	41%	29%	31%	51%	43%	52%	47%	64%	55%
Lancashire and South Cumbria	82%	73%	95%	83%	67%	63%	103%	95%	78%	67%	100%	87%	83%	71%	70%
BTH	140%	53%	147%	73%	61%	75%	150%	142%	52%	34%	71%	60%	88%	91%	94%
ELHT	88%	104%	124%	123%	94%	82%	114%	85%	109%	83%	108%	100%	101%	86%	78%
LTHTR	66%	56%	54%	48%	48%	44%	81%	100%	60%	65%	93%	77%	66%	49%	58%
MBHT – FGH													25	34	25
MBHT – RLI	58%	35%	83%	74%	39%	45%	92%	58%	44%	45%	124%	103%	67%	69%	56%
Grand Total	85%	86%	74%	71%	73%	76%	77%	69%	72%	72%	77%	74%	76%	75%	75%

Table 3.5.3

If unit has no HD cots their HD activity has been included in the locality and network totals. Instead of a % actual count of HD days are shown in the table.

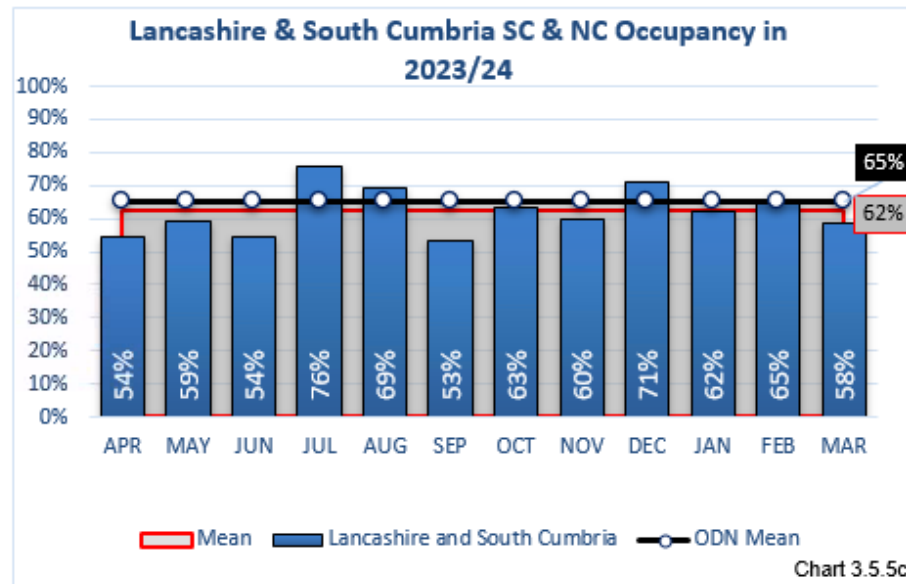
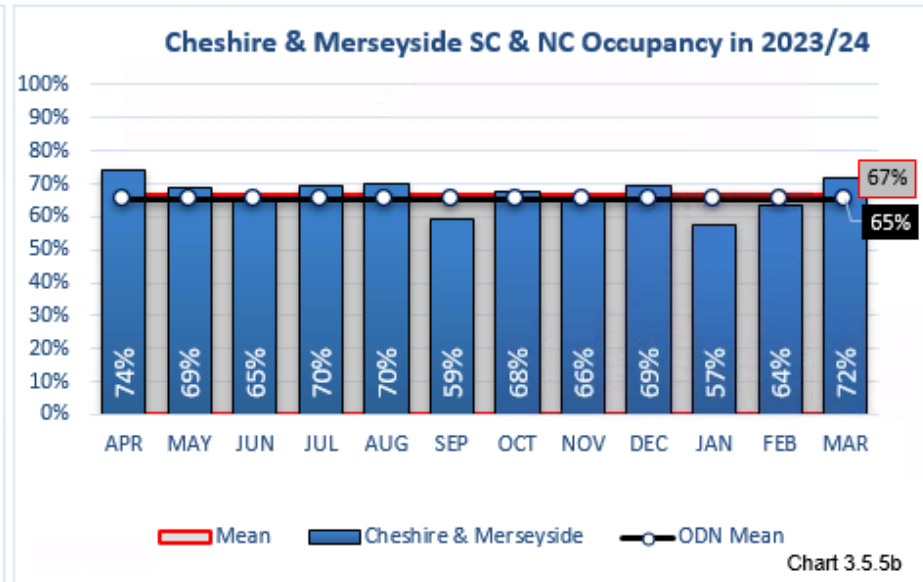
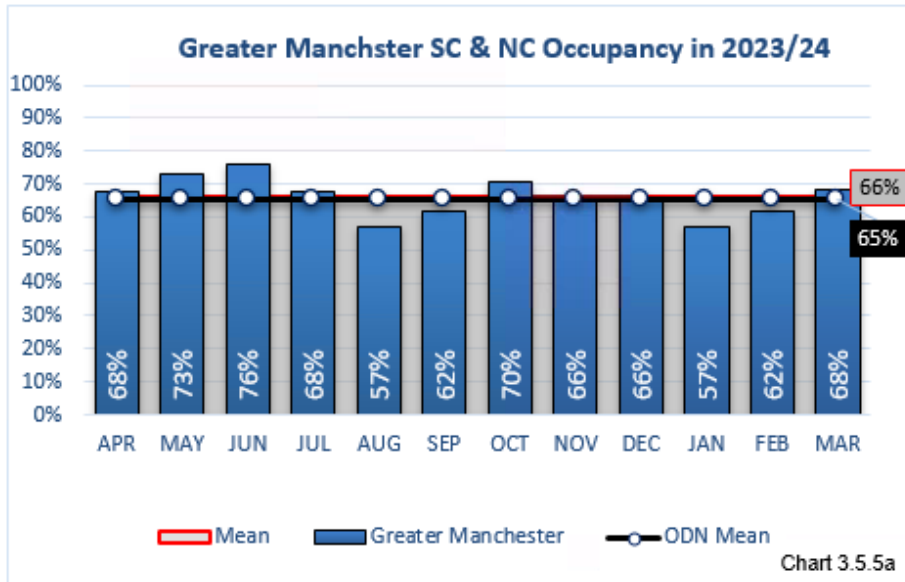
3.5.4 Average Combined XA01Z & XA02Z (IC & HD) Occupancy by Locality and Units



XA01Z & XA02Z IC & HD Occupancy	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	Mean	2122	2223
Greater Manchester	80%	81%	68%	69%	78%	78%	75%	69%	73%	69%	75%	80%	75%	76%	76%
MFT – NMGH	78%	74%	55%	45%	39%	64%	42%	49%	94%	80%	64%	77%	63%	76%	59%
MFT – SMH	87%	87%	64%	77%	87%	80%	82%	75%	85%	84%	90%	82%	82%	84%	83%
MFT – WYTH	49%	53%	87%	61%	83%	63%	46%	28%	41%	33%	90%	58%	58%	64%	68%
RBH	91%	82%	75%	79%	94%	101%	96%	89%	83%	84%	72%	95%	87%	87%	85%
ROH	92%	89%	66%	63%	65%	85%	75%	79%	66%	62%	71%	88%	75%	75%	78%
SHH	29%	39%	63%	43%	53%	41%	42%	50%	66%	30%	26%	32%	43%	50%	63%
TGH	47%	68%	78%	63%	48%	40%	63%	25%	35%	23%	36%	42%	47%	34%	36%
WWL	64%	98%	69%	48%	73%	59%	53%	45%	35%	40%	50%	94%	61%	57%	56%
Cheshire & Merseyside	68%	69%	60%	63%	57%	58%	53%	58%	65%	66%	65%	62%	62%	60%	64%
APH	58%	47%	39%	67%	63%	42%	51%	44%	60%	74%	62%	73%	57%	56%	64%
COC	47%	19%	14%	39%	33%	8%	25%	27%	25%	15%	34%	29%	26%	42%	30%
ECH													50	0	0
LNP – AHCH	80%	70%	71%	72%	68%	69%	54%	53%	55%	61%	69%	49%	64%	53%	59%
LNP – LWH	84%	86%	81%	66%	63%	72%	64%	80%	84%	73%	78%	78%	76%	70%	79%
MCTH	50%	51%	20%	14%	29%	35%	34%	33%	16%	24%	37%	28%	31%	37%	37%
MWL - ODGH	48%	132%	128%	77%	21%	52%	47%	112%	129%	161%	67%	85%	89%	72%	77%
MWL - STHK	98%	181%	95%	218%	147%	133%	95%	120%	152%	152%	119%	73%	132%	122%	121%
WHH	34%	39%	51%	53%	40%	62%	41%	24%	45%	44%	48%	46%	44%	46%	41%
Lancashire and South Cumbria	77%	71%	88%	74%	55%	68%	93%	80%	69%	70%	87%	82%	76%	65%	68%
BTH	74%	29%	114%	51%	31%	58%	94%	78%	31%	33%	41%	34%	55%	60%	55%
ELHT	96%	100%	119%	108%	86%	90%	118%	96%	95%	94%	102%	95%	100%	83%	83%
LHTR	64%	62%	51%	48%	36%	55%	71%	72%	62%	65%	82%	84%	63%	52%	59%
MBHT – FGH													47	46	44
MBHT – RLI	42%	26%	73%	68%	29%	33%	80%	39%	32%	31%	97%	72%	52%	51%	47%
Grand Total	75%	75%	69%	68%	67%	69%	71%	67%	70%	68%	74%	74%	71%	68%	71%

Table 3.5.4

3.5.5 Average Combined XA03Z, XA04Z & XA05Z (SC & NC) Occupancy by Locality and Units



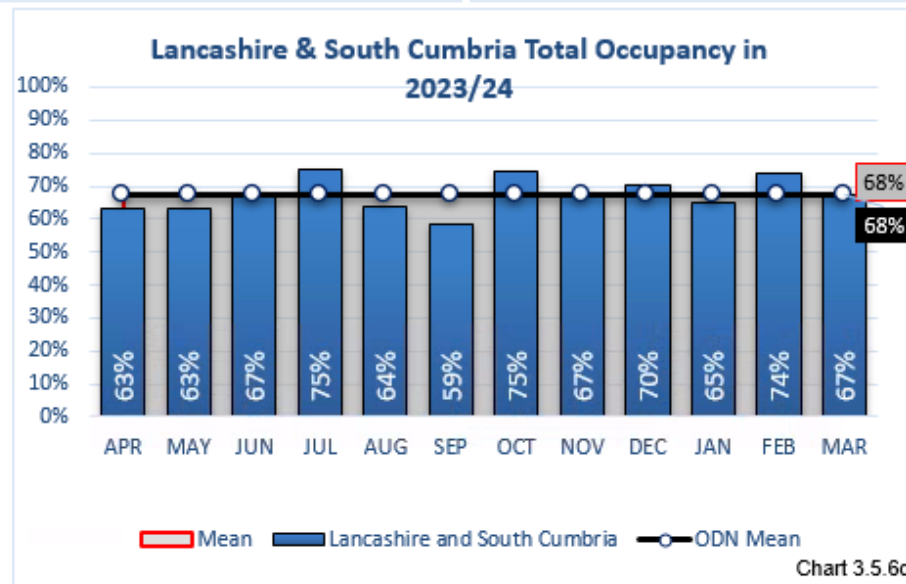
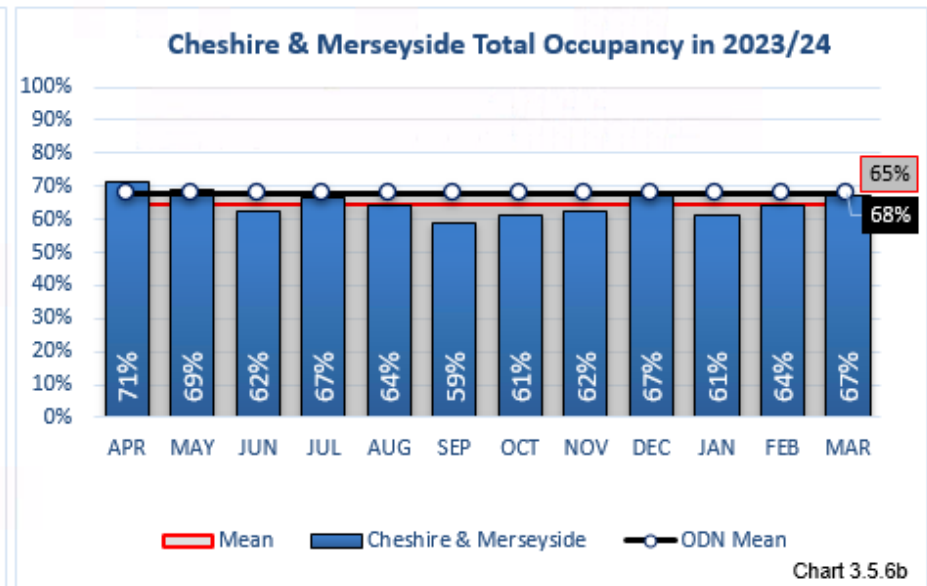
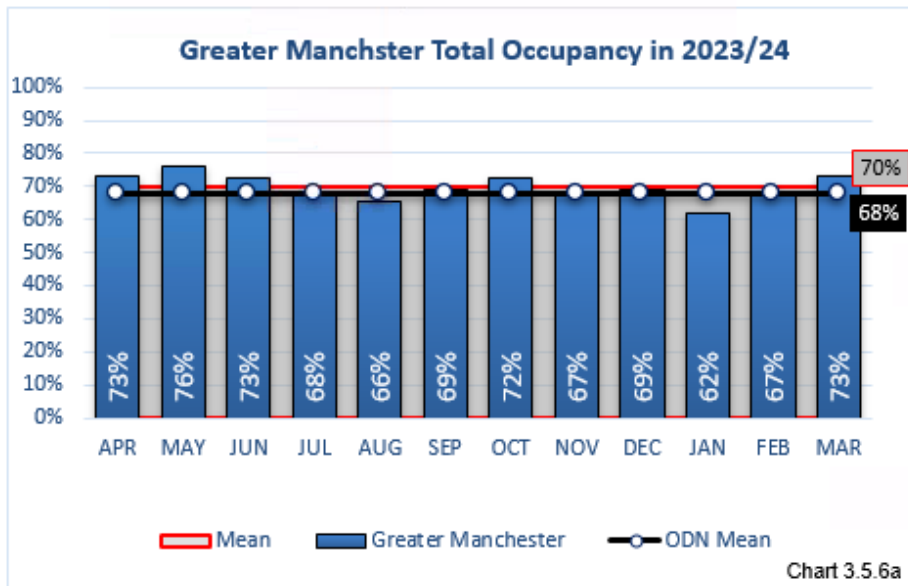
XA03Z, XA04Z & AX05Z (SC) Occupancy	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	Mean	2122	2223
Greater Manchester	68%	73%	76%	68%	57%	62%	70%	66%	66%	57%	62%	68%	66%	73%	67%
MFT – NMGH	70%	88%	84%	62%	57%	54%	67%	71%	73%	68%	61%	80%	70%	69%	73%
MFT – SMH	67%	67%	74%	61%	59%	60%	67%	71%	61%	61%	55%	58%	63%	59%	60%
MFT – WYTH	88%	74%	84%	78%	64%	62%	83%	69%	71%	39%	74%	97%	74%	84%	82%
RBH	76%	75%	76%	62%	60%	50%	87%	80%	80%	57%	77%	71%	71%	83%	76%
ROH	50%	73%	82%	68%	40%	84%	68%	50%	81%	54%	57%	55%	64%	83%	57%
SHH	35%	66%	46%	72%	57%	73%	73%	41%	49%	48%	49%	91%	58%	77%	57%
TGH	85%	95%	93%	86%	59%	30%	69%	87%	51%	67%	62%	37%	68%	75%	68%
WWL	79%	55%	70%	71%	64%	75%	42%	54%	45%	58%	63%	65%	62%	66%	68%
Cheshire & Merseyside	74%	69%	65%	70%	70%	59%	68%	66%	69%	57%	64%	72%	67%	67%	70%
APH	63%	52%	59%	48%	75%	54%	42%	79%	72%	23%	27%	33%	52%	50%	59%
COC	71%	27%	28%	55%	73%	65%	18%	36%	66%	24%	33%	38%	44%	47%	51%
ECH*	-	-	1%	4%	13%	12%	20%	9%	23%	37%	15%	29%	16%	-	-
LNP – AHCH													703	859	626
LNP – LWH	96%	88%	75%	98%	75%	67%	81%	67%	80%	62%	82%	89%	80%	86%	95%
MCTH	95%	67%	96%	62%	92%	78%	97%	122%	77%	96%	92%	102%	89%	94%	77%
MWL - ODGH	43%	75%	74%	80%	33%	37%	66%	60%	81%	75%	85%	73%	65%	53%	57%
MWL - STHK	56%	58%	64%	46%	63%	63%	64%	51%	38%	54%	66%	67%	57%	60%	59%
WHH	53%	91%	80%	119%	98%	68%	121%	70%	87%	65%	62%	95%	84%	46%	51%
Lancashire and South Cumbria	54%	59%	54%	76%	69%	53%	63%	60%	71%	62%	65%	58%	62%	64%	58%
BTH	54%	53%	59%	79%	47%	42%	69%	51%	84%	42%	41%	41%	55%	59%	55%
ELHT	33%	41%	51%	65%	82%	58%	45%	56%	69%	70%	74%	60%	59%	68%	59%
LHTR	73%	101%	60%	98%	76%	60%	71%	59%	71%	90%	90%	78%	77%	71%	60%
MBHT – FGH	54%	50%	17%	68%	77%	22%	103%	47%	31%	10%	17%	20%	43%	45%	38%
MBHT – RLI	80%	42%	67%	62%	53%	63%	67%	95%	80%	48%	61%	65%	65%	57%	65%
Grand Total	67%	69%	68%	70%	63%	59%	68%	65%	68%	58%	63%	67%	65%	70%	66%

Table 3.5.5

Note – XA04Z occupancy is not included if recorded as TC and not NNU care

*Macclesfield only re-opened late June 2024

3.5.6 Total NNU Occupancy (All HRG codes) by Locality and Units



Total Occupancy	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	Mean	2122	2223
Greater Manchester	73%	76%	73%	68%	66%	69%	72%	67%	69%	62%	67%	73%	70%	74%	71%
MFT - NMGH	72%	85%	78%	58%	53%	56%	61%	66%	77%	71%	62%	79%	68%	70%	70%
MFT – SMH	78%	78%	68%	70%	74%	71%	75%	73%	75%	74%	74%	71%	73%	73%	72%
MFT – WYTH	77%	68%	85%	73%	69%	63%	72%	57%	62%	37%	78%	86%	69%	78%	78%
RBH	83%	78%	76%	70%	75%	74%	91%	84%	81%	69%	75%	82%	78%	85%	80%
ROH	71%	81%	74%	66%	52%	84%	71%	64%	73%	58%	64%	71%	69%	79%	67%
SHH	33%	58%	51%	64%	56%	64%	64%	44%	54%	43%	42%	73%	54%	69%	58%
TGH	73%	86%	88%	79%	56%	33%	67%	68%	46%	54%	54%	38%	62%	63%	58%
WWL	75%	68%	70%	64%	67%	70%	45%	52%	42%	53%	60%	73%	61%	63%	65%
Cheshire & Merseyside	71%	69%	62%	67%	64%	59%	61%	62%	67%	61%	64%	67%	65%	64%	67%
APH	60%	49%	47%	59%	68%	47%	47%	58%	65%	53%	47%	56%	55%	54%	62%
COC	65%	26%	25%	52%	64%	52%	20%	34%	56%	22%	33%	36%	40%	46%	46%
ECH			1%	5%	13%	12%	20%	10%	22%	38%	15%	30%	17%	-	-
LNP – AHCH	100%	86%	97%	88%	91%	80%	81%	87%	81%	89%	95%	80%	88%	83%	82%
LNP – LWH	90%	87%	78%	80%	68%	69%	72%	74%	82%	68%	80%	83%	78%	77%	86%
MCTH	74%	60%	61%	40%	63%	58%	68%	81%	48%	62%	67%	67%	62%	68%	59%
MWL - ODGH	44%	87%	85%	80%	30%	40%	62%	70%	91%	92%	81%	76%	70%	57%	61%
MWL - STHK	61%	74%	68%	69%	74%	72%	68%	60%	53%	67%	73%	68%	67%	68%	67%
WHH	45%	68%	67%	91%	73%	65%	87%	50%	69%	56%	56%	74%	67%	46%	48%
Lancashire and South Cumbria	63%	63%	67%	75%	64%	59%	75%	67%	70%	65%	74%	67%	68%	65%	61%
BTH	59%	47%	73%	72%	43%	46%	75%	57%	71%	40%	41%	39%	55%	59%	55%
ELHT	59%	65%	79%	82%	83%	71%	75%	73%	79%	80%	86%	75%	76%	74%	69%
LTHTR	68%	81%	56%	73%	56%	58%	71%	65%	66%	77%	86%	81%	70%	62%	59%
MBHT – FGH	62%	52%	23%	69%	78%	23%	106%	51%	32%	11%	22%	23%	46%	48%	41%
MBHT – RLI	68%	37%	69%	64%	46%	54%	71%	78%	66%	43%	71%	67%	61%	56%	60%
Grand Total	70%	71%	68%	69%	65%	64%	69%	66%	69%	62%	68%	70%	68%	69%	68%

Table 3.5.6

4. Network and Locality Transfers.

4.1 Appropriate & Inappropriate Postnatal Transfers

Table 4.1.1 shows the Inappropriate Postnatal Transfers out of each locality and out of NWNODN. Inappropriate is any support, treatment or surgery that is available within the NWNODN pathway which took place outside of the NWNODN.

PN Inappropriate Transfers Out	Out of Locality within NWNODN 21/22	Out of Locality within NWNODN 22/23	Out of Locality within NWNODN 23/24*	Out of NWNODN 21/22	Out of NWNODN 22/23	Out of NWNODN 23/24
Greater Manchester	6	4	15	1	0	1
Cheshire & Merseyside	7	10	14	0	0	0
Lancashire & South Cumbria	2	3	17	0	0	0
Total	15	17	46	1	0	1

Table 4.1.1

*Previously transfers for specialist treatment or surgery, to another unit within the NWNODN but across locality, has been deemed as appropriate.

In 2023/24 cross locality transfers for specialist treatment or surgery due to lack of capacity have been included as inappropriate. Most post-natal transfers out of locality have been due to lack of capacity within a locality when there is a need to transfer from an LNU to a NICU for a higher level or surgical care. It is rare that babies transfer out postnatal from one unit to another solely due to capacity as where possible mothers are transferred antenatally.

Table 4.1.2 shows appropriate Postnatal Transfers out of NWNODN. These are transfers out of the NWNODN where care is not provided within the region, for example in 2023/24 there were transfers to Leeds & Great Ormond Street for specialist treatment.

PN Appropriate Transfers Out of NWNODN	21/22	22/23	23/24
Cheshire & Merseyside	0	2	1
Greater Manchester	6	2	2
Lancashire & South Cumbria	1	0	0
Total	7	4	3

Table 4.1.2

4.2 Network and Locality out of area activity.

The following tables show NWNODN activity for babies who are registered with a GP Practice assigned to either a Welsh Local Health Board (HLB) or a CCG within Yorkshire & Humber, North & West Midlands or Isle of Man (IOM).

Table 4.2.1 Babies transferred antenatally into NWNODN units by locality.

Antenatal Admissions	Wales 22/23	Wales 23/24	Yorks & Humber 22/23	Yorks & Humber 23/24	N&W Mids 22/23	N&W Mids 23/24	IOM 22/23	IOM 23/24	Other 22/23	Other 23/24	Total 22/23	Total 23/24
Greater Manchester	9	5	15	19	57	73	0	2	6	12	87	111
Cheshire & Merseyside	58	54	3	1	18	10	7	4	5	2	91	71
Lancashire & South Cumbria	3	0	13	8	2	0	1	0	3	6	22	14
Total	70	59	31	28	77	83	8	6	14	20	200	196

Table 4.2.1

Table 4.2.2 Babies transferred postnatally and admitted into NWNODN units, by locality.

PN Admissions	Wales 22/23	Wales 23/24	Yorks & Humber 22/23	Yorks & Humber 23/24	N&W Mids 22/23	N&W Mids 23/24	IOM 22/23	IOM 23/24	Other 22/23	Other 23/24	Total 22/23	Total 23/24
Greater Manchester	1	0	11	2	0	3	0	0	0	1	17	6
Cheshire & Merseyside	38	25	1	0	19	28	1	4	1	0	60	57
Lancashire & South Cumbria	0	0	6	2	0	0	0	0	2	0	8	2
Total	39	25	18	4	24	31	1	4	3	1	85	65

Table 4.2.2

Table 4.2.3 shows the number of cots required for out of area activity in 2023/24

Calculation method which includes 80% capacity: Cot Demand = (Number of care days/366)/0.8) as 23/24 leap year

Locality	19/20	20/21	21/22	22/23	23/24
Greater Manchester	13	12.1	9.8	10.9	6.5
Cheshire & Merseyside	6	4.5	4	7.6	8.5
Lancashire & South Cumbria	2.3	0.5	1.2	2.1	0.8
Total	21.3	17.1	15	20.6	15.8

Table 4.2.3

4.3 Out of Area Activity by CCG

Table 4.3 shows a breakdown by region of number of babies admitted in year and the total care days in year for all babies, whose mothers are registered with a GP whose CCG code is outside of the NWNODN.

2023-24 Out of Area CCG into Locality	No. of Babies	Care Days			
		XA01Z (IC)	XA02Z (HD)	XA03Z & XA04Z (SC)	XA05Z (NC)
Greater Manchester	117	520	421	833	124
Isle of Man	2	10	7	37	0
NHS England London	4	6	23	57	0
NHS England Midlands and East (North Midlands)	74	333	256	521	102
NHS England Midlands and East (West Midlands)	2	20	0	0	0
NHS England Midlands and East (Central Midlands)	3	37	18	111	0
NHS England North (Cumbria and North East)	1	0	2	2	0
NHS England North (Yorkshire and Humber)	21	51	41	81	7
NHS England South East (Hampshire, Isle of Wight and Thames Valley)	2	3	3	1	0
NHS England South East (Kent, Surrey and Sussex)	3	2	6	12	12
WALES	5	58	65	11	3
Cheshire & Merseyside	128	1109	793	541	50
Isle of Man	8	206	26	17	8
NHS England London	1	0	2	0	0
NHS England Midlands and East (North Midlands)	36	302	316	156	16
NHS England Midlands and East (West Midlands)	2	1	1	9	0
NHS England Midlands and East (Central Midlands)	1	3	0	0	0
NHS England North (Yorkshire and Humber)	1	0	0	13	0
WALES	79	597	448	346	26
Lancashire and South Cumbria	16	60	73	98	0
NHS England Midlands and East (Central Midlands)	2	21	1	0	0
NHS England North (Cumbria and North East)	1	0	0	2	0
NHS England North (Yorkshire and Humber)	3	0	6	24	0
NHS England South East (Hampshire, Isle of Wight & Thames Valley)	10	39	66	72	0
Grand Total	261	1,689	1,287	1,472	174

Table 4.3

4.4 Wales Activity within the NWNODN

Table 4.4.1 shows a summary of all care days across the network for patients registered to GP Practices within Welsh LHBs.

The table only includes units where Welsh activity took place over the period Apr 2023– Mar 2024. The table also shows the Welsh care days as a percentage of the total care days on NNU ward within the NWNODN by level of care.

Locality / Unit Name	Activity for Patients registered to GP Practices within Welsh LHBs								
	Admissions	XA01Z days	XA01Z as % of Unit XA01Z	XA02Z days	XA02Z as % of Unit XA02Z	XA03Z, 04Z & 05Z days	X03Z+XA04Z+ AZ05Z as % of Unit total	Total days	% Total
Greater Manchester	19	58	0.6%	65	0.4%	14	0.0%	137	0.2%
MFT – SMH	4	0	0.0%	4	0.1%	10	0.1%	14	0.1%
MFT – WYTH	3	0	0.0%	2	0.2%	2	0.0%	4	0.1%
RBH	4	58	3.7%	59	1.7%	0	0.0%	117	1.2%
ROH	5	0	0.0%	0	0.0%	0	0.0%	0	0.0%
SHH	2	0	0.0%	0	0.0%	2	0.1%	2	0.1%
WWL	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Cheshire & Merseyside	231	597	9.5%	448	4.9%	372	1.8%	1417	4.0%
APH	36	181	16.4%	145	8.0%	78	4.1%	404	8.4%
COC	45	4	7.8%	24	10.1%	92	5.7%	120	6.3%
LNP – AHCH	54	33	4.9%	167	11.7%	66	8.4%	266	9.2%
LNP – LWH	91	372	10.1%	112	3.8%	133	2.3%	617	4.9%
MCHT	4	7	3.5%	0	0.0%	3	0.1%	10	0.3%
MWL - ODGH	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Lancashire and South Cumbria	3	0	0.0%	0	0.0%	0	0.0%	0	0.0%
BTH	3	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	253	655	3.3%	513	1.6%	386	0.6%	1554	1.3%

Table 4.4.1

See Appendix 1 for LHB list for Wales.

*Note – Due to pathways babies may be cared for at both LNP - LWH & Alder Hey and therefore count as more than one admission.

Table 4.4.2 shows the NNU cot demand for Wales based on activity in table 4.4.1.

Locality / Unit Name	XA01Z Cots		XA02Z Cots		XA03Z+04Z+05Z Cots		Total Cots	
	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24
Greater Manchester	0.1	0.2	0.3	0.2	0.2	0.0	0.6	0.4
MFT – WYTH	0.0	0.0	0.1	0.0	0.2	0.0	0.3	0.0
RBH	0.0	0.2	0.1	0.2	0.0	0.0	0.1	0.4
ROH	0.1	0.0	0.1	0.0	0.0	0.0	0.2	0.0
Cheshire & Merseyside	2.7	2.0	1.6	1.6	2.3	1.3	6.6	4.9
APH	0.6	0.6	0.3	0.5	0.1	0.3	1.0	1.4
COC	0.0	0.0	0.2	0.1	1.1	0.3	1.3	0.4
LNP – AHCH	0.3	0.1	0.8	0.6	0.4	0.2	1.5	0.9
LNP – LWH	1.8	1.3	0.3	0.4	0.6	0.5	2.7	2.2
MCHT	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.0
Lancashire and South Cumbria	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.0
BTH	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0
Total	2.8	2.2	1.9	1.8	2.6	1.3	7.3	5.3

Table 4.4.2

4.5 North & West Midlands Activity in NWNODN

Table 4.5.1 shows a summary of all care days across the network for patients registered to GP Practices within North & West Midlands CCGs. The table only includes units where North & West Midlands activity took place over the period Apr 2023 – Mar 2024. The table also shows the North & West Midlands care days (divided into HRG codes) as a percentage of the total care days on NNU ward within the NWNODN by level of care.

Locality / Unit Name	Activity for Patients registered to GP Practices within North & West Midlands CCGs								
	Admissions	XA01Z days	XA01Z as % of Unit XA01Z	XA02Z days	XA02Z as % of Unit XA02Z	XA03Z, 04Z & 05Z days	XA03Z+XA04Z+ AZ05Z as % of Unit total	Total days	% Total
Greater Manchester	157	353	3.6%	256	1.6%	623	2.0%	1232	2.1%
MFT – NMGH	2	0	0.0%	5	0.6%	33	0.9%	38	0.8%
MFT – SMH	30	243	4.3%	90	1.6%	40	0.6%	373	2.0%
MFT – WYTH	4	3	1.2%	5	0.5%	69	1.7%	77	1.5%
RBH	2	58	3.7%	2	0.1%	9	0.2%	69	0.7%
ROH	7	18	1.0%	2	0.1%	0	0.0%	20	0.2%
SHH	81	29	19.6%	117	18.4%	307	12.0%	453	13.5%
TGH	31	2	1.3%	35	6.5%	165	7.3%	202	6.9%
Cheshire & Merseyside	106	303	4.8%	317	3.5%	181	0.9%	801	2.2%
APH	6	49	4.4%	66	3.7%	4	0.2%	119	2.5%
COC	5	2	3.9%	6	2.5%	3	0.2%	11	0.6%
ECH	2	0	0.0%	0	0.0%	6	1.7%	6	1.5%
LNP – AHCH	54	128	18.9%	200	14.0%	91	11.6%	419	14.5%
LNP – LWH	22	124	3.4%	35	1.2%	13	0.2%	172	1.4%
MCHT	17	0	0.0%	10	1.7%	64	2.4%	74	2.2%
Total	263	656	3.3%	573	1.8%	804	1.2%	2033	1.8%

Table 4.5.1

See Appendix 1 for North Midlands and West Midlands CCG Codes.

*Note – Due to pathways babies may be cared for at both LNP - LWH & Alder Hey and therefore count as more than one admission

Table 4.5.2 shows the NNU cot demand based on the Midlands activity in table 4.5.1.

Locality / Unit Name	XA01Z Cots		XA02Z Cots		XA03Z+04Z+05Z Cots		Total Cots	
	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24
Greater Manchester	1.2	1.2	1.2	0.8	1.9	2.0	4.3	4.0
MFT – NMGH	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.1
MFT – SMH	0.9	0.8	0.7	0.3	0.4	0.1	2.0	1.2
MFT – WYTH	0.0	0.0	0.0	0.0	0.0	0.2	0.0	0.2
RBH	0.0	0.2	0.0	0.0	0.0	0.0	0.0	0.2
ROH	0.2	0.1	0.0	0.0	0.0	0.0	0.2	0.1
SHH	0.1	0.1	0.4	0.4	1.0	1.0	1.5	1.5
TGH	0.0	0.0	0.1	0.1	0.5	0.6	0.6	0.7
Cheshire & Merseyside	0.8	1.0	0.8	1.0	1.0	0.5	2.6	2.5
APH	0.2	0.2	0.2	0.2	0.0	0.0	0.4	0.4
LNP – AHCH	0.3	0.4	0.4	0.7	0.1	0.3	0.8	1.4
LNP – LWH	0.2	0.4	0.1	0.1	0.1	0.0	0.4	0.5
MCHT	0.1	0.0	0.1	0.0	0.8	0.2	1.0	0.2
Lancashire and South Cumbria	0.1	0.0	0.2	0.0	0.0	0.0	0.3	0.0
ELHT	0.1	0.0	0.2	0.0	0.0	0.0	0.3	0.0
Total	2.1	2.2	2.2	1.8	2.9	2.5	7.2	6.5

Table 4.5.2

4.6 Yorkshire & Humber Activity in NWNODN

Table 4.6.1 shows a summary of all care days across the network for patients registered to GP Practices within Yorkshire & Humber CCGs.

The table only includes units where Yorkshire & Humber activity took place over the period Apr 2023 – Mar 2024. The table also shows the Yorkshire & Humber care days (divided into HRG codes) as a percentage of the total care days on NNU ward within the NWNODN by level of care.

Locality / Unit Name	Activity for Patients registered to GP Practices within Yorkshire & Humber CCGs								
	Admissions	XA01Z days	XA01Z as % of Unit XA01Z	XA02Z days	XA02Z as % of Unit XA02Z	XA03Z+04Z+05Z days	XA03Z+04Z+05Z as % of Unit Total	Total days	% Total
Greater Manchester	52	51	0.5%	41	0.3%	88	0.3%	180	0.3%
MFT – NMGH	2	0	0.0%	1	0.1%	3	0.1%	4	0.1%
MFT – SMH	9	35	0.6%	13	0.2%	2	0.0%	50	0.3%
MFT – WYTH	6	10	4.1%	2	0.2%	2	0.0%	14	0.3%
RBH	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
ROH	19	6	0.3%	3	0.1%	33	0.7%	42	0.4%
SHH	11	0	0.0%	18	2.8%	44	1.7%	62	1.9%
TGH	3	0	0.0%	4	0.7%	4	0.2%	8	0.3%
WWL	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Cheshire & Merseyside	6	0	0.0%	0	0.0%	13	0.1%	13	0.0%
APH	2	0	0.0%	0	0.0%	0	0.0%	0	0.0%
LNP – LWH	2	0	0.0%	0	0.0%	0	0.0%	0	0.0%
MCHT	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
WHH	1	0	0.0%	0	0.0%	13	0.5%	13	0.4%
Lancashire & South Cumbria	29	39	1.1%	66	1.1%	72	0.6%	177	0.8%
BTH	2	0	0.0%	0	0.0%	0	0.0%	0	0.0%
ELHT	26	39	1.8%	66	2.2%	72	1.7%	177	1.9%
LTHTR	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	87	90	0.5%	107	0.3%	173	0.3%	370	0.3%

See Appendix 1 for Yorkshire & Humber CCG Codes.

Table 4.6.1

Table 4.6.2 shows the NNU cot demand based on Yorkshire & Humber activity in table 4.6.1.

Locality / Unit Name	XA01Z Cots		XA02Z Cots		XA03Z+04Z+05Z Cots		Total Cots	
	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24
Greater Manchester	0.6	0.1	0.8	0.1	0.4	0.3	1.8	0.5
MFT – NMGH	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.0
MFT – SMH	0.1	0.1	0.4	0.0	0.1	0.0	0.6	0.1
ROH	0.5	0.0	0.4	0.0	0.2	0.1	1.1	0.1
SHH	0.0	0.0	0.0	0.1	0.0	0.2	0.0	0.3
Cheshire & Merseyside	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.0
APH	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.0
Lancashire & South Cumbria	0.3	0.1	0.4	0.2	0.3	0.2	1.0	0.5
BTH	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.0
ELHT	0.3	0.1	0.3	0.2	0.2	0.2	0.8	0.5
LHTR	0.0	0.0	0.1	0.0	0.0	0.0	0.1	0.0
Total	1.0	0.2	1.2	0.3	0.7	0.5	2.9	1.0

Table 4.6.2

4.7 Isle of Man Activity in NWNODN

Table 4.7.1 shows a summary of all care days across the network for patients registered to GP Practices within Isle of Man. The table only includes units where Isle of Man activity took place over the period Apr 2023 – Mar 2024. The table also shows the Isle of Man care days as a percentage of the total care days on NNU ward within the NWNODN by level of care.

Locality / Unit Name	Activity for Patients registered to GP Practices within Isle of Man								
	Admissions	XA01Z days	XA01Z as % of Unit XA01Z	XA02Z days	XA02Z as % of Unit XA02Z	XA03Z+04Z+05Z days	XA03Z+04Z + 05Z as % of Unit Total	Total days	% Total
Greater Manchester	2	10	0.1%	7	0.0%	37	0.1%	54	0.1%
RBH	2	10	0.6%	7	0.2%	37	0.8%	54	0.5%
Cheshire & Merseyside	19	206	3.3%	26	0.3%	25	0.1%	257	0.7%
APH	3	13	1.2%	0	0.0%	0	0.0%	13	0.3%
LNP – AHCH	3	148	21.9%	24	1.7%	0	0.0%	172	5.9%
LNP – LWH	11	45	1.2%	2	0.1%	25	0.4%	72	0.6%
MWL - ODGH	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
WHH	1	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	21	216	1.1%	33	0.1%	62	0.1%	311	0.3%

Table 4.7.

Table 4.7.2 shows the NNU cot demand based on Isle of Man activity in table 4.7.1

Locality / Unit Name	XA01Z Cots		XA02Z Cots		XA03Z+04Z+05Z Cots		Total Cots	
	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24	2022/23	2023/24
Greater Manchester	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.1
RBH	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.1
Cheshire & Merseyside	0.2	0.7	0.3	0.1	0.3	0.1	0.8	0.9
APH	0.1	0.0	0.2	0.0	0.1	0.0	0.4	0.0
LNP – AHCH	0.0	0.5	0.0	0.1	0.0	0.0	0.0	0.6
LNP – LWH	0.1	0.2	0.1	0.0	0.1	0.1	0.3	0.3
MWL - ODGH	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
WHH	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.0
Lancashire and South Cumbria	0.1	0.0	0.1	0.0	0.0	0.0	0.2	0.0
ELHT	0.1	0.0	0.1	0.0	0.0	0.0	0.3	0.0
Total	0.3	0.7	0.4	0.1	0.3	0.2	1.0	1.0

Table 4.7.2

4.8 Connect North West Activity

Table 4.8 & chart 4.8 show the cot bureau referrals and advice calls for units within the NW over the past 3 years.

Referrals to Cot Bureau	Total 2021/22	22/23 Q1	22/23 Q2	22/23 Q3	22/23 Q4	Total 2022/23	23/24 Q1	23/24 Q2	23/24 Q3	23/24 Q4	Total 2023/24
In-utero Transfers	714	194	232	198	211	835	223	173	189	251	836
Advice Calls only	42	9	1	7	11	28	14	13	11	5	43
Acute Post-Natal	1037	246	271	286	241	1044	264	240	265	335	1104
Elective Post-Natal	1096	223	220	251	221	915	245	253	269	286	1053
Total Post-Natal	2133	469	491	537	462	1959	509	493	534	621	2157

Table 4.8

Despite the introduction of the NWNODN Advice Guideline in early 2022 there has been an increase in the number of advice calls only, over the past 12 months. However, In-utero transfers remained static, whilst the number of post-natal transfers has increased.

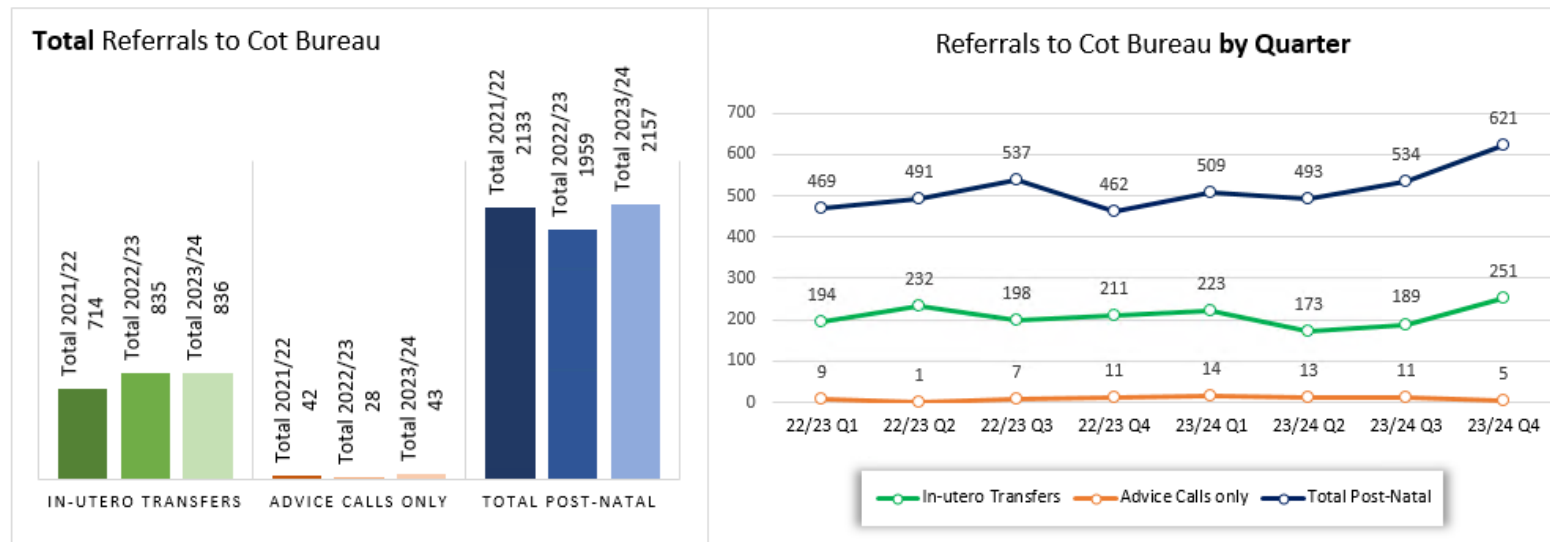


Chart 4.8

5. Nursing & Medical Workforce

This section will give a brief overall view of nursing, medical and Allied Health Professions, Psychologists and Pharmacists (AHPP & P) across the NW. Whilst there is an agreed national tool for calculating nurse staffing, which units will submit as part of their MIS evidence, there is no similar tool for AHP, P & P or medical staffing. However, the NWNODN to support the tracking of Ockenden funding and workforce submissions to NHSE and The Neonatal Delivery Board, carried out a year end scoping exercise on AHP, P & P provision and Medical Tier 1, 2 & 3 BAPM compliance to find out the situation across the North West.

5.1 Nurse Staffing across the NWNODN

Table 5.1 shows the WTE agreed establishment (as budgeted), vacancies and additional requirements against the Neonatal Nursing Workforce Tool (2020). The 2023/24 staffing information was collected from each NNU and depicts the staffing numbers as of the 31st March 2024.

Locality	WTE Agreed Establishment (Budget).	WTE In Post.	WTE Vacancies (Establishment minus in post)	Neonatal Nursing WF Tool (2020) Requirements (Based on Activity)	Neonatal Nursing WF Tool overage against Agreed Establish. (Budget)	23/24 Overall Shortage against WTE in post
GM	620.6	574.5	46.1	594.2	26.3	19.7
CM	412.7	364.6	48.2	388.4	24.3	23.9
LSC	241.3	223.3	18.0	227.9	13.4	4.6
NWNODN	1274.6	1162.4	112.3	1210.6	64	48.2

Occupancy figures used to calculate the requirements are number of HRG 01 - 05 days for 2021/22, 2022/23 & 2023/24.

Table 5.1

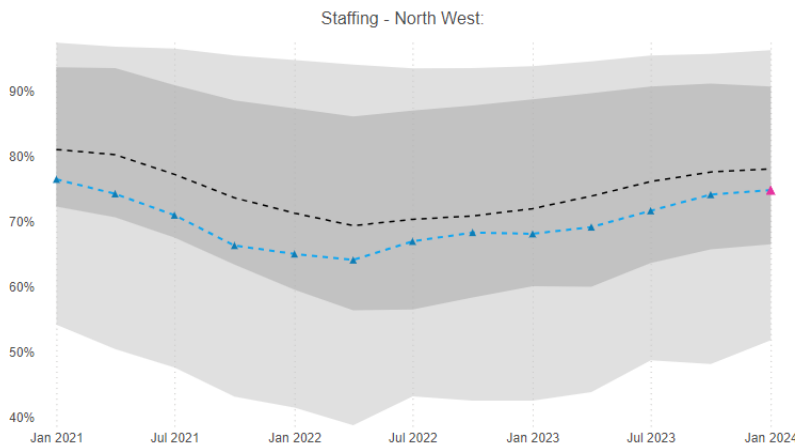
Chart 5.1 shows that there are currently 112.2 WTE vacancies across the NWNODN but only a further 48.2 WTE nurses are required to achieve BAPM compliance, as recommended by the CRG Nursing Workforce Tool (2020).

During 2022/23, as part of the NCCR an additional 95 WTE nurses were funded within the North West from nationally allocated funds with the aim of establishing BAPM compliance within all units. All 95 NCCR posts were added to the individual neonatal units' budgets. Nurses were successfully recruited into these additional posts but unfortunately, other vacancies have arisen so there is still a need for further recruitment across the region.

It is important to acknowledge that there are still very few quality roles in the NW units. A small amount of Ockenden funding was allocated in 2023/24 to ensure all units had education and governance nurses in post. The BAPM Service and Quality Standards for Provision of Neonatal Care in the UK (2022) states 'identified nurses acting as champions for the quality of practice within each unit should also have protected time and responsibility for infant feeding, family care, developmental care, QI in perinatal optimisation, safeguarding children, bereavement support and palliative care, discharge planning and outreach nursing'. Many NW units do not have protected time for these additional roles, which are essential in improving the quality and standard of care for neonates and their families.

Whilst it is acknowledged there are vacancies, the annual NNAP / NWNODN dashboard shows that throughout the year the percentage of shifts staffed to BAPM requirements fell below the national mean and development standard of 100%. A further piece of work is planned to understand the impact of maternity leave, increased rates of sickness absence and annual leave on BAPM 2022 compliance.

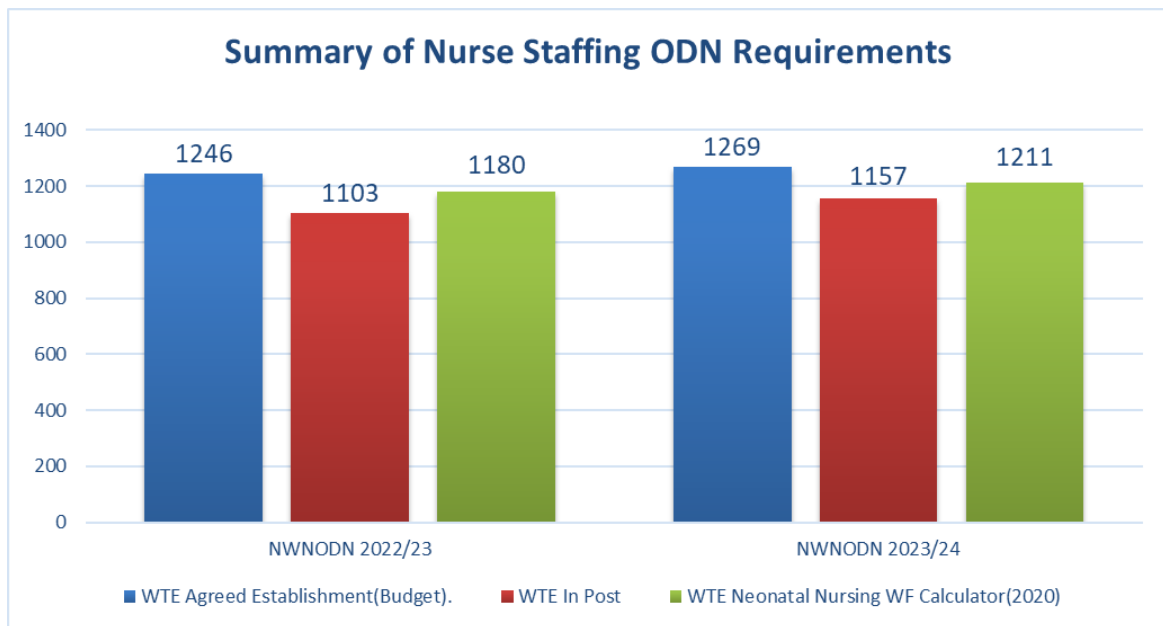
In comparison to the national mean (NNAP on-line, June 2024) the NW have continued to fall below this for at least the past 3 years, with only 76% of shifts being staffed to the recommended standard.



Graph taken from NNAP on-line public dashboard showing the proportion of shifts that are numerically staffed according to national guidelines and service specification.

----- National mean
 - - - - - NWNODN mean

The agreed establishment (budgeted WTE nurses) across the NWNODN is 23 more than in 2022/23. The Neonatal Nursing Workforce Tool (2020) shows the number of nurses required to be BAPM 2011 compliant, based upon the activity for the previous 3 years up to 31st March 2023 is 31 more than the previous year. There were 143 vacancies at the end of March 2023 and only 112 at the end of 2023/24, so whilst vacancies remain the number has decreased over the past year.



This table needs amending – 23/24 Budget is 1274 (5 extra) & in-post 1162 due to an error when the form was completed at Burnley. Analyst is on A/L and will amend prior to the 18th July.

Chart 5.1

5.2 Nurse Staffing by Locality

This table needs amending due to an error when the form was completed at Burnley. Analyst is on A/L and will amend prior to the 18th July. 5.29 extra in budget & 5 extra in post

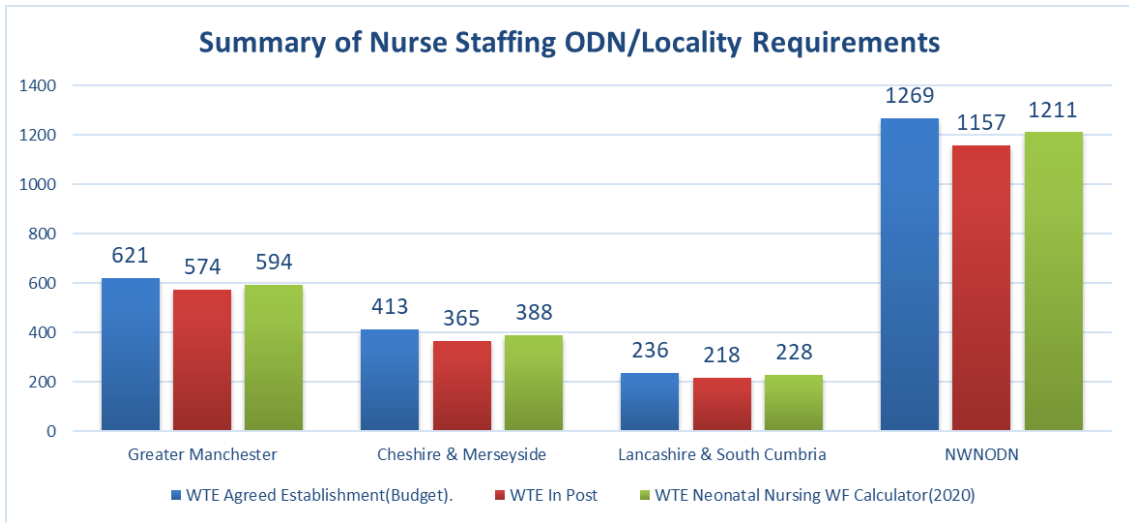


Chart 5.2

5.3 Nurse Staffing by Unit

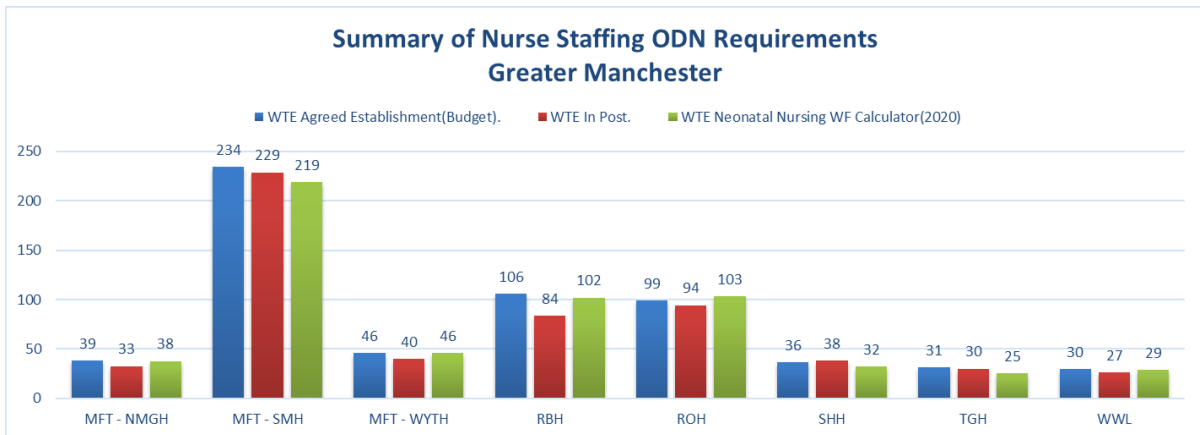


Chart 5.3.1

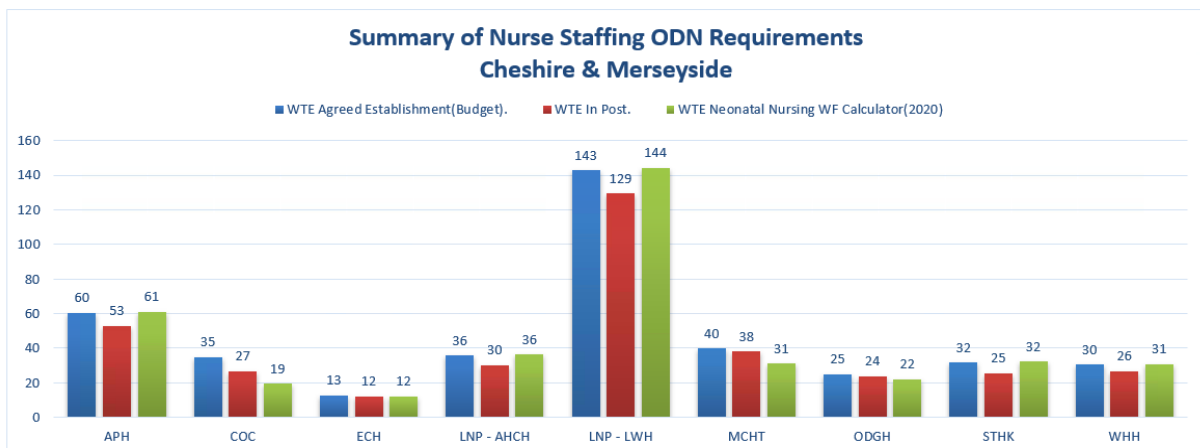
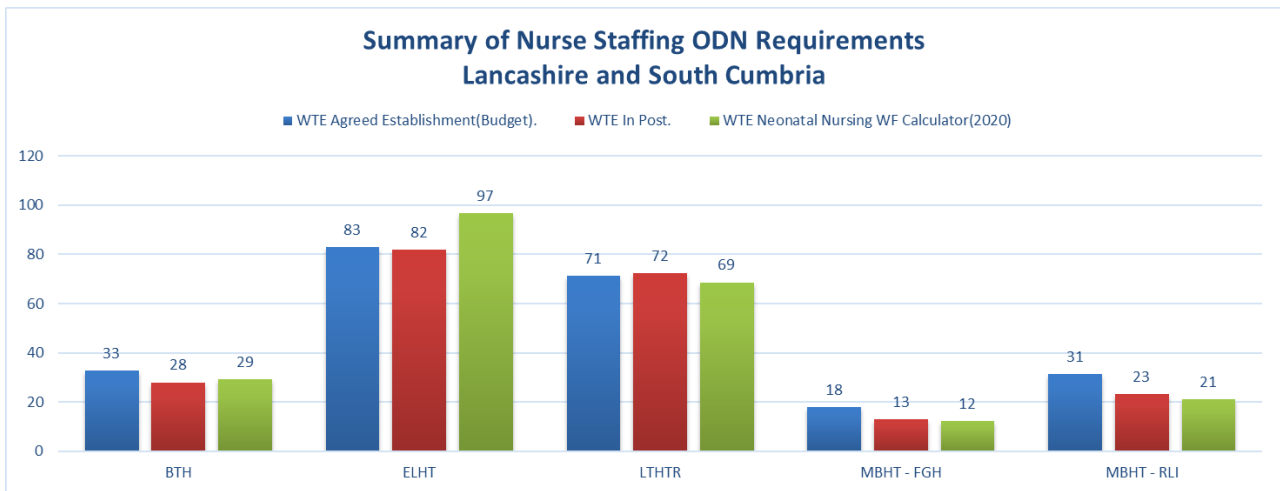


Chart 5.3.2

*Note - LNP - AHCH nurse staffing is for the Neonatal surgical unit only as in table 7.1a



This table needs amending due to an error when the form was completed at Burnley. Analyst is on A/L and will amend prior to the 18th July. 5.29 extra in budget & 5 extra in post

Chart 5.3.3

Charts 5.1 to 5.3 highlight there is a shortfall in the number of nurses in post to meet the BAPM 2011 requirements. It is important to note that the number of WTE in agreed establishment in this report is for those providing direct patient / cot side care only. Therefore, nurses in non-direct care roles, including Ward Managers, Clinical Educators and other quality/link roles described in DOH Toolkit (2010) are not included here. It should also be recognised that this is a snapshot in time and recruitment, or attrition rates will cause fluctuations in these figures.

5.4 Additional Nurse Requirements

Chart 5.4 shows the number and percentage of additional nurses required to be BAPM 2011 compliant, as calculated using the Neonatal Nursing Workforce Tool (2020) plus current vacancies against the agreed establishment (budgeted nurses). Therefore, across the region an additional 53 WTE nurses would need to be in post to meet the BAPM recommendation for Nurse Staffing.

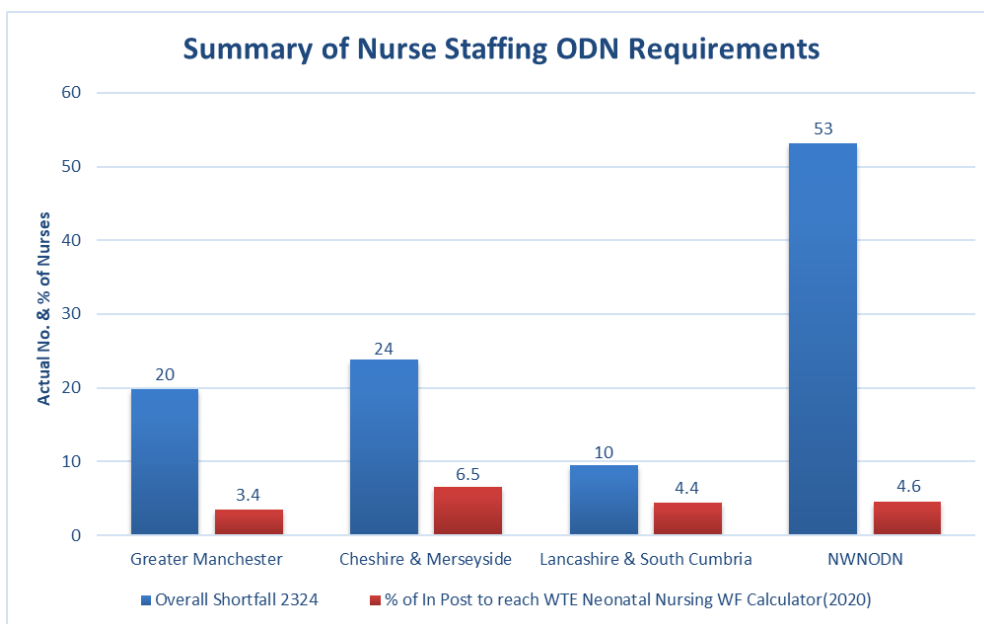


Chart 5.4

Needs amending to reflect change in LSC. Difference now 5 & percentage reduced before 18th July.

5.5 Medical staffing across the NWNODN

In March 2024 a follow-up **self-reporting survey** was carried out across all units within the NW region. The purpose of the survey was to re-assess compliance against BAPM standards across all NWNODN NICUs, LNUs and SCUs.

Tables 5.5.1 – 5.5.4 show compliance against the Tier 1, Tier 2 and Tier 3 recommendations, as outlined in the the British Association of Perinatal Medicine Service and Quality Standards for Provision of Neonatal Care in the UK (2022), for all the units within the NWNODN.

NICUs 2023/24	Tier 1 separate rota compliance 24/7	Tier 2 separate rota compliance 24/7	Tier 3 separate rota compliance 24/7	Tier 3 presence on the unit
Greater Manchester				
MFT – SMH	Compliant	Non-compliant	Compliant	Compliant
RBH	Compliant	Compliant	Compliant	Non-compliant
ROH	Compliant	Compliant	Compliant	Compliant
Cheshire & Merseyside				
APH	Compliant	Compliant	Compliant	Non-Compliant
LNP – LWH	Compliant	Compliant	Compliant	Compliant
Lancashire and South Cumbria				
ELHT	Compliant	Compliant	Compliant	Non-compliant
LTHTR	Compliant	Compliant	Compliant	Non-compliant

Table 5.5.1

LNUs 2023/24	Tier 1 separate rota compliance 24/7	Tier 2 separate rota compliance 12h per day	Tier 2 compliance: significant geographical separation between neonatal & paediatric units	Tier 3 daytime compliance	Tier 3 compliance on-call rota
Greater Manchester					
MFT – NMGH	Compliant	Non-compliant	Compliant	Compliant	Compliant
MFT – WYTH	Compliant	Compliant	Non-compliant	Compliant	Non-compliant
SHH	Non-compliant	Compliant	n/a	Non-compliant	Compliant
TGH	Compliant	Compliant	n/a	Compliant	Compliant
WWL	Non-compliant	Compliant	n/a	Compliant	Compliant
Cheshire & Merseyside					
COC	Non-compliant	Non-compliant	n/a	Compliant	Compliant
MCHT	Non-compliant	Non-compliant	n/a	Compliant	Compliant
ODGH	Compliant	Compliant	Compliant	Compliant	Compliant
STHK	Non-compliant	Compliant	n/a	Compliant	Compliant

WHH	Non-compliant	Compliant	n/a	Compliant	Compliant
Lancashire and South Cumbria					
BTH	Non-compliant	Non-compliant	n/a	Compliant	Compliant
MBHT – RLI	Non-compliant	Non-Compliant	Compliant	Compliant	Compliant

Table 5.5.2

SCBs 2023/24	Tier 1 separate rota compliance 24/7	Tier 2 shared rota compliance	Tier 3 compliance: Lead Consultant & all consultants should undertake CPD
Cheshire & Merseyside			
ECH	Compliant	Compliant	Compliant
Lancashire and South Cumbria			
MBHT – FGH	Compliant	Compliant	Non-compliant

Table 5.5.3

Surgical	Tier 1 separate rota compliance 24/7	Tier 2 separate rota compliance 12h per day	Tier 3 daytime compliance	Tier 3 compliance on-call rota
Cheshire & Merseyside				
LNP – AHCH	Non-compliant	Non-Compliant	Compliant	Compliant

Table 5.5.4

5.6 AHP & Psychologist staffing

Budgets for Allied Health Professionals and Psychology have gradually increased since 2022 mainly due to Ockenden funding for these roles. However, it is acknowledged there is still a significant shortfall for all AHP & P roles if comparing to the nationally recommended standards.

Tables 5.6.1 – 5.6.5 show a summary of budgeted and ideal AHP & P roles across the 3 localities.

	PHYSIOTHERAPISTS				
	In Budget	In post	Vacancy	Ideal	Difference budget v ideal
Greater Manchester	2.75	2.65	0.1	12.8	10.05
Cheshire & Merseyside	2.52	2.42	0.1	8	5.48
Lancashire & South Cumbria	1.8	1.8	0	5.9	4.05
Total for NWNODN	7.07	6.87	0.2	26.7	19.58

Table 5.6.1

	Occupational Therapists				
	In Budget	In post	Vacancy	Ideal	Difference budget v ideal
Greater Manchester	1.36	1.48	0.3	11.25	9.47
Cheshire & Merseyside	1.56	1.56	0	7.6	6.04
Lancashire & South Cumbria	0.8	0.8	0	4.6	3.8
Total for NWNODN	3.72	3.84	0.3	23.45	19.31

Table 5.6.2

	Dieticians				
	In Budget	In post	Vacancy	Ideal	Difference budget v ideal
Greater Manchester	2.66	2.66	0	12.32	9.66
Cheshire & Merseyside	1.9	1.9	0	8.45	6.55
Lancashire & South Cumbria	1.4	1.4	0	5.23	3.83
Total for NWNODN	5.96	5.96	0	26.0	20.04

Table 5.6.3

	Speech & Language Therapists				
	In Budget	In post	Vacancy	Ideal	Difference budget v ideal
Greater Manchester	2.91	2.91	0	10.40	7.49
Cheshire & Merseyside	1.85	0.85	1.0	6.43	4.58
Lancashire & South Cumbria	1.2	1.1	0.1	3.81	2.61
Total for NWNODN	5.96	4.86	1.1	20.64	14.68

Table 5.6.4

	Qualified Psychologists				
	In Budget	In post	Vacancy	Ideal	Difference budget v ideal
Greater Manchester	2.42	2.02	0.2	15.18	12.76
Cheshire & Merseyside	1.7	1.7	0	10.08	8.38

Lancashire & South Cumbria	0.59	0.19	0.4	6.12	5.53
Total for NWNODN	4.71	3.91	0.6	31.38	26.67

Table 5.6.5

The total WTE equivalent for budgeted AHPs & Psychologists (AHP & P) across the NW has slightly decreased from 28.42 at the end of March 2023 to 27.42 at end of March 2024. This is due to re-grading of some positions. However, there only 2.2 WTE vacancies across the region compared to 13.17 at the end March 2023, so the number of AHP & Ps in post has increased over the past 12 months. Unfortunately there is still considerable shortfall of around 100 WTE budgeted posts, against the ideal standard (128 WTE), recommended by BAPM, [Neonatal Specialties | British Association of Perinatal Medicine \(bapm.org\)](https://www.bapm.org/).

In addition to the above roles, it is recommended that there are Hub Psychologist roles, but to date these haven't been introduced due to the need for a more solid infrastructure in the AHP & P specialisms.

It is also a national recommendation that for every 10,000 births there is a 0.3 WTE AHP & P ODN lead. This equates to a total of 8.4 WTE, based on a total of 72,000 births in the NW. There are currently 4 AHP & Ps at 0.5WTE each, Therefore this is an additional shortfall of 6.4 WTE at ODN level.

It is acknowledged that recruiting AHPs and psychologists is a difficult task due to both the lack of additional funding from Trusts and a shortage of suitably qualified, experienced personnel. However, the new National Service Specification for Neonatal Care (2024) [Neonatal-critical-care-service-specification-March-2024.pdf \(england.nhs.uk\)](https://www.england.nhs.uk/publications/neonatal-critical-care-service-specification-march-2024/) and the BAPM Service and Quality Standards for Provision of Neonatal Care in the UK (2022) highlight that 'Neonatal units require key contributions from an essential group of AHPs, psychological professionals and pharmacists who have special expertise in their discipline. These are essential to champion the need to view neonatal care that looks forward to improving longer term outcomes for babies and their families'(NHSE 2024). These roles are particularly important in championing strategies to support the neurodevelopment of babies and raising awareness amongst the wider MDT.

5.7 Pharmacist Staffing

Following the recruitment of an NWNODN Pharmacist, in March 2024 self-reporting survey was carried out across all units within the NW region to find out the WTE hours for pharmacists across the region. The purpose of the survey was to assess compliance against the national recommendations as outlined in the Pharmacy Staffing Standards for Neonatal Services, September 2022.

	In post	Ideal	Difference in post v ideal
Greater Manchester	4.35	12.3	7.95
Cheshire & Merseyside	3.95	8.16	4.21
Lancashire & South Cumbria	2.25	4.71	2.46
Total for NWNODN	10.55	25.17	14.62

Table 5.7.1

6. Greater Manchester Activity

6.1 GM Activity by Level of Care

Table 6.1 shows the total care level days by unit and across the GM locality. XA04Z care if delivered in TC is not included.

HRG 2016	XA01Z			XA02Z			XA03Z + XA04z + XA05Z			Total		
Unit Name	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
MFT – NMGH	179	121	133	924	736	795	3,776	3,989	3,823	4,879	4,846	4,751
MFT – SMH	5,347	5,684	5,672	6,268	5,777	5,701	6,709	6,787	7,175	18,324	18,248	18,548
MFT – WYTH	298	263	245	1,103	1,221	1,018	4,593	4,491	4,037	5,994	5,975	5,300
RBH	1,450	1,566	1,562	3,603	3,389	3,527	5,763	5,244	4,928	10,816	10,199	10,017
ROH	2,102	2,026	1,857	2,835	3,095	3,078	5,742	3,962	4,417	10,679	9,083	9,352
SHH	222	140	148	690	1,006	635	3,374	2,478	2,562	4,286	3,624	3,345
TGH	115	105	153	378	419	540	2,473	2,247	2,250	2,966	2,771	2,943
WWL	110	178	120	716	641	771	2,398	2,490	2,258	3,224	3,309	3,149
Total	9,823	10,083	9,890	16,517	16,284	16,065	34,828	31,688	31,450	61,168	58,055	57,405

Table 6.1

6.2 GM Activity as % of locality activity by Level of Care

HRG 2016	XA01Z %			XA02Z %			XA03Z + XA04Z + XA05Z %			Total %		
Unit Name	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
MFT – NMGH	2%	1%	1%	6%	5%	5%	11%	13%	12%	8%	8%	8%
MFT – SMH	54%	56%	57%	38%	35%	35%	19%	21%	23%	30%	31%	32%
MFT – WYTH	3%	3%	2%	7%	7%	6%	13%	14%	13%	10%	10%	9%
RBH	15%	16%	16%	22%	21%	22%	17%	17%	16%	18%	18%	17%
ROH	21%	20%	19%	17%	19%	19%	16%	13%	14%	17%	16%	16%
SHH	2%	1%	1%	4%	6%	4%	10%	8%	8%	7%	6%	6%
TGH	1%	1%	2%	2%	3%	3%	7%	7%	7%	5%	5%	5%
WWL	1%	2%	1%	4%	4%	5%	7%	8%	7%	5%	6%	5%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Table 6.2

6.3 GM Surgical Activity

Table 6.3 shows the surgical activity in St Mary’s Hospital for the period 2023/24 and trend data from previous years. Surgical care days are included in the activity tables 6.1 for Greater Manchester.

The data for table 6.3 is collected locally. For the purpose of this report a surgical cot day is defined as ‘any patient with a surgical diagnosis which requires input from the surgical team and for whom a Consultants Surgeon is named alongside the neonatologist’.

The surgical cots shown in the table are cot demand based on the total surgical days using the following calculation:

$$\text{Required Capacity} = (\text{Total annual surgical days}/366)/0.8 \text{ due to leap year}$$

St Mary's Hospital Surgical Activity	Surgical Days	Cot Demand
2019/20	7,314	25.0
2020/21	5,690	19.5
2021/22	6,914	23.7
2022/23	6,743	23.1
2023/24	7,134	24.4

Table 6.3

6.4 GM Activity and Workload

6.4.1 GM NICU Activity and Workload Data

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all NICUs should, as a minimum, look after at least 100 very low birth weight (VLBW) infants per year and be delivering >2000 intensive care days (Health Resource Group definition, 2016 & BAPM Optimal Arrangements for Neonatal Intensive Care Units in the UK, 2021).

Table 6.4.1 shows all NICU activity, regardless of episode number, and includes surgical care at St. Mary’s Hospital.

NICU	Intensive Care (HRG XA01Z)			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
MFT – SMH	5,347	5,684	5,672	8,681	8,717	8,392	208	183	192
RBH	1,450	1,566	1,562	4,721	4,694	4,799	115	111	106
ROH	2,102	2,026	1,857	4,407	4,784	4,641	128	125	107

Table 6.4.1

6.4.2 GM LNU Unit Activity and Workload Data

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all LNUs should aim to undertake a minimum of 500 days of combined intensive and high dependency care, which is the minimum requirement to maintain expertise. LNUs providing ongoing HD should be working towards delivering 1000 combined ITU/HD days per year, in the longer term (i.e. 5 years from publication of NCCR in 2019). Units designated as LNUs should also admit >25 infants annually (BAPM Optimal arrangements for Local Neonatal Units and Special Care Units in the UK, 2016).

LNU Unit	IC & HD HRG XA01Z & XA02Z			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
MFT – NMGH	1,103	857	928	993	661	613	50	52	57
MFT – WYTH	1,401	1,484	1,263	1,210	1,254	1,098	60	61	45
SHH	912	1,146	783	873	1,073	748	41	41	32
TGH	493	524	693	387	459	513	34	23	33
WWL	826	819	891	736	724	850	34	35	38

Table 6.4.2

6.5 GM Cot Activity

Table 6.5 shows the demand (**D**) for cots based upon activity within each of the providers against actual (**A**) cots. Care Levels are based upon HRG 2016 codes but are referred to as IC, HD & SC cots as these are the commissioned cots in each category. Surgical care included in the figures as it is not possible to identify surgical activity within the data.

Calculation method which includes 80% capacity: Cot Demand = (Number of care days/366)/0.8) due to leap year

Greater Manchester	Cots D: Demand A: Actual															
	D IC	D IC	D IC	A IC	D HD	D HD	D HD	A HD	D SC	D SC	D SC	A SC	Total D	Total D	Total D	Total A
	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24
MFT – NMGH	0.6	0.4	0.5	2	3.2	2.5	2.7	2	12.9	13.7	13.1	15	16.7	16.6	16.3	19
MFT – SMH	18.3	19.5	19.4	19	21.5	19.8	19.5	19	23	23.2	24.6	31	62.8	62.5	63.5	69
MFT – WYTH	1	0.9	0.8	2	3.8	4.2	3.5	4	15.7	15.4	13.8	15	20.5	20.5	18.1	21
RBH	5	5.4	5.3	9	12.3	11.6	12.1	7	19.7	18.0	16.9	19	37	35	34.3	35
ROH	7.2	6.9	6.4	9	9.7	10.6	10.5	9	19.7	13.6	15.1	19	36.6	31.1	32	37
SHH	0.8	0.5	0.5	2	2.4	3.4	2.2	3	11.6	8.5	8.8	12	14.8	12.4	11.5	17
TGH	0.4	0.4	0.5	1	1.3	1.4	1.8	3	8.5	7.7	7.7	9	10.2	9.5	10	13
WWL	0.4	0.6	0.4	1	2.5	2.2	2.6	3	8.2	8.5	7.7	10	11.1	11.3	10.7	14
Total	34	35	34	45	57	56	55	50	119	109	108	130	210	199	197	225

Key: Short by 1 or more cot = Red, over by 1 or more cot = Yellow

Table 6.5

6.6 Greater Manchester Summary

Dr Ajit Mahaveer, Clinical Lead for GM & Catherine Nash, Lead Nurse for GM

Key Findings:

- Decrease in live births seen across the locality keeping in-line with the reduction in the NW birth rate.
- Reduction in term and late preterm admissions across the locality with significant work around length of stay at MFT at SMH / Wythenshawe, ROH and TGH. WWL are currently flagging above the national target of 6% but have an action plan in place in-line with NHS requirements.
- Babies born at right place is below the national target of 85% and the NWNODN mean of 87%.
- Activity remains high in GM and consistent over the years, with 70% occupancy in 2023/24.
- The combined IC & HD activity at SMH & RBH is higher than the number of commissioned cots.
- ITU activity in NICU remains at 92% and has been consistent over the past 3 years.
- Surgical activity within GM has risen in comparison to pre-covid years.
- NCCR benchmarking – NICU and LNU activity is varied across the units. This will be reviewed during the annual visits.
- Medical staffing is varied across the locality with a wide workforce gap.
- AHP&P staffing is very limited across the network and locality.

Recommendations:

- Continue to work with LMNS and maternity colleagues with each provider to reduce babies born at the wrong place (< 27 Weeks / <800g)
- In collaboration with the LMNS to support ongoing work on transitional care offers within units to further decrease the number term and late preterm admissions, thus reducing mother / baby separation.
- As part of the Neonatal Critical Care Review (NCCR) to carry out further work, in collaboration with the commissioners to benchmark against the NCCR standards.
- To support RBH with any commissioning discussions around potentially increasing their number of IC & HD cots.
- To continue to work with network AHP&Ps to build a more robust AHP, Psychologist & Pharmacist offer across the locality.
- Engage with Workforce and education group within NWNODN to reduce variations for medical and nursing workforce.

7. Cheshire & Merseyside

7.1 CM Activity by level of care

Table 7.1 shows the total care level days by unit and across the CM locality. XA04Z care if delivered in TC is not included.

HRG 2016	XA01Z			XA02Z			XA03Z + XA04Z + XA05Z			Total		
Unit Name	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
APH	1,296	1,361	1,102	1,581	1,918	1,808	1,843	2,165	1,913	4,720	5,444	4,823
COC	70	54	51	387	278	237	1,703	1,848	1,628	2,160	2,180	1,916
ECH	0	0	8	0	0	42	0	0	349	0	0	399
LNP – LWH	3,090	3,893	3,691	3,017	3,001	2,943	6,274	6,936	5,860	12,381	13,830	12,494
MCHT	243	211	198	703	741	594	2,752	2,252	2,620	3,698	3,204	3,412
ODGH	117	101	96	411	460	552	1,541	1,670	1,909	2,069	2,231	2,557
STHK	163	203	193	731	679	774	2,852	2,813	2,731	3,746	3,695	3,698
WHH	294	290	275	704	607	687	2,025	2,241	2,468	3,023	3,138	3,430
Total	5,273	6,113	5,614	7,534	7,684	7,637	18,990	19,925	19,478	31,797	33,722	32,729

Table 7.1

	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
LNP – AHCH	383	548	676	1,369	1,384	1,433		765	784	2,714	2,697	2,893

Table 7.1a

7.2 CM Activity as % of locality activity by level of care

HRG 2016	XA01Z %			XA02Z %			XA03Z + XA04Z + XA05Z			Total %		
Unit Name	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
APH	25%	24%	20%	21%	21%	24%	10%	10%	10%	15%	15%	15%
COC	1%	1%	1%	5%	5%	3%	9%	9%	8%	7%	7%	6%
ECH	0%	0%	0%	0%	0%	1%	0%	0%	2%	0%	0%	1%
LNP – LWH	59%	59%	66%	40%	40%	39%	33%	33%	30%	39%	39%	38%
MCHT	5%	5%	4%	9%	9%	8%	14%	14%	13%	12%	12%	10%
MWL - ODGH	2%	2%	2%	5%	5%	7%	8%	8%	10%	7%	7%	8%
MWL - STHK	3%	3%	3%	10%	10%	10%	15%	15%	14%	12%	12%	11%
WHH	6%	6%	5%	9%	9%	9%	11%	11%	13%	10%	10%	10%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Table 7.2

7.3 CM Surgical Activity

Table 7.3.1 shows the neonatal surgical activity (care days) at Alder Hey for the period 2023/24, which took place on the Neonatal Unit and other surgical care wards. Only NNU data is recorded on the neonatal Badgernet system so additional data for PICU, HDU & other wards has been provided by the LNP - AHCH data team.

	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Total
PICU	72	36	73	32	9	2	141	213	40	20	54	10	702
HDU	3	12	0	171	140	0	0	0	0	0	0	0	326
Other Wards	17	184	19	12	59	11	108	7	22	3	6	10	458
Total	92	232	92	215	208	13	249	220	62	23	60	20	1,486
Neonatal Unit	271	240	261	246	255	216	225	236	225	249	247	222	2,893
Grand Total	363	472	353	461	463	229	474	456	287	272	307	242	4,379

Table 7.3.1

Table 7.3.2 shows the demand (D) for cots based upon activity at Alder Hey as reported in Table 7.3.1(IC Proxy for non NNU care days factored in).

Surgical Activity at Alder Hey	2020/21 Care Days	2020/21 Cot Demand	2021/22 Care Days	2021/22 Cot Demand	2022/23 Care Days	2022/23 Cot Demand	2023/24 Care Days	2023/24 Cot Demand
HDU & Special Care (Both within & outside NNU)	3,903	13.4	4,625	15.8	3,629	12.4	3001	10.3
IC Care (NNU IC + IC Proxy for care outside of NNU)	1,073	3.7	586	2	1,110	3.8	1378	4.7
Total Care Days (Both within & outside NNU)	4,983	17.1	5,211	17.8	4,739	16.2	4,379	15.0

Table 7.3.2

Calculation method based on 80% capacity: Cot Demand = (Number of care days/366)/0.8) due to leap year

As it is not possible to derive full care levels for the non NNU activity a proxy of invasive ventilation has been used as an indicator for some intensive care activity, therefore care days are included for babies who meet the following criteria:

- All babies (excluding cardiac) <60 weeks Post Conceptual Age at admission.
- Only babies where source of referral is a recognised neonatal unit
- Admitted under surgical speciality

With the proxy for Intensive care being babies which were receiving IC where we used ventilator support:

1. Days: Invasive ventilation via endotracheal tube
2. Days: Invasive ventilation via tracheostomy tube
3. Advanced ventilation support (Jet or Oscillatory ventilation)

7.4 CM Activity and workload

7.4.1 CM NICU activity and workload data

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all NICUs should, as a minimum, look after at least 100 very low birth weight (VLBW) infants per year and be delivering >2000 intensive care days (Health Resource Group definition, 2016 & BAPM Optimal Arrangements for Neonatal Intensive Care Units in the UK, 2021).

Table 7.4.1 shows all NICU activity, regardless of episode number, but excludes surgical care at Alder Hey.

NICU	Intensive Care (HRG XA01Z)			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
APH	1,296	1,361	1,102	2,638	3,068	2,696	72	81	61
LNP - LWH	3,090	3,893	3,691	5,237	5,964	5,677	160	202	163

Table 7.4.1

7.4.2 CM LNU & SCU Unit Activity and Workload Data

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all LNUs should aim to undertake a minimum of 500 days of combined intensive and high dependency care, which is the minimum requirement to maintain expertise. LNUs providing ongoing HD should be working towards delivering 1000 combined ITU/HD days per year, in the longer term (i.e. 5 years from publication of NCCR in 2019). Units designated as LNUs should also admit >25 infants annually (BAPM Optimal arrangements for Local Neonatal Units and Special Care Units in the UK, 2016).

LNU Unit	IC & HD HRG XA01Z & XA02Z			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	20/21	21/22	23/24	20/21	21/22	23/24	20/21	21/22	23/24
COC*	457	332	288	349	231	227	28	18	21
ECH**	0	0	50	0	0	50	0	0	3
MCHT	946	952	792	672	748	606	35	26	36
MWL - ODGH	528	561	648	441	409	473	20	22	21
MWL - STHK	894	882	967	636	604	618	35	31	31
WHH	998	897	962	753	737	837	26	33	26

Table 7.4.2

* COC currently only accepts deliveries of 32 weeks gestation and above

** ECH Neonatal Unit was closed from March 2020 to July 2024

7.5 Cot Activity

Table 7.5 shows the demand (D) for cots based upon activity within each of the providers against actual (A) cots. Care Levels are based upon HRG 2016 codes but are referred to as IC, HD & SC cots as these are the commissioned cots in each category.

Calculation method which includes 80% capacity: Cot Demand = (Number of care days/366)/0.8 as it is a leap year

Cheshire & Merseyside	Cots												D: Demand				A: Actual			
	D IC 21/22	D IC 22/23	D IC 23/24	A IC 23/24	D HD 21/22	D HD 22/23	D HD 23/24	A HD 23/24	D SC 21/22	D SC 22/23	D SC 23/24	A SC 23/24	Total D 21/22	Total D 22/23	Total D 23/24	Total A 23/24				
APH	4.4	4.7	3.8	6	5.4	6.6	6.2	8	6.3	7.4	6.5	10	16.1	18.7	16.5	24				
COC	0.2	0.2	0.2	1	1.3	1.0	0.8	2	5.8	6.3	5.6	10	7.3	7.5	6.6	13				
ECH*	0.0	0.0	0.0	0	0.0	0.0	0.1	0	0.0	0.0	1.7	8	0.0	0.0	1.8	8				
LNP – AHCH	1.3	1.9	2.3	0	4.7	4.7	4.9	9	3.3	2.6	2.7	0	9.3	9.2	9.9	9				
LNP – LWH	10.6	13.3	12.6	12	10.3	10.3	10.1	12	21.5	23.8	20	20	42.4	47.4	42.7	44				
MCHT	0.8	0.7	0.7	3	2.4	2.5	2	4	9.4	7.7	8.9	8	12.6	10.9	11.6	15				
MWL - ODGH	0.4	0.3	0.3	1	1.4	1.6	1.9	1	5.3	5.7	6.5	8	7.1	7.6	8.7	10				
MWL - STHK	0.6	0.7	0.7	0	2.5	2.3	2.6	2	9.8	9.6	9.3	13	12.9	12.6	12.6	15				
WHH	1	1	0.9	2	2.4	2.1	2.3	4	6.9	7.7	8.4	8	10.3	10.8	11.6	14				
Total	19	23	22	25	30	31	31	43	68	71	69	84	118	125	122	152				

Key: Short by 1 or more cot = Red, over by 1 or more cot = Yellow

Table 7.5

*Only open from end of June 2024, but calculation at unit level based on estimated occupancy if unit had been open for a full year.

7.6 Cheshire & Merseyside – Summary

Dr Anand Kamalanathan, Clinical Lead for CM & Heather Martin, Lead Nurse for CM

Key Findings:

- Births have shown reducing trend over the last 3 years.
- Admissions have remained unchanged over last 3 years.
- Term admission rates remain below national target and have remained static over the last 3 years. WHH are currently flagging above the national target of 6% but have an action plan in place in-line with NHSE requirements.
- Late preterm admissions (34-36 weeks) have reduced, there is variation within the neonatal units in the locality (35% to 59%).
- Avoidable separation for late preterm admissions (34-36 weeks) varies within the neonatal units in the locality from 2.9 to 9.1 days (C&M mean 5.2 days).
- Proportion of babies <27-week gestation babies born in the right place remains same as last year (87%) which is above national target of 85%.
- Neonatal care activity across CM reduced by 3% compared to last year, but levels of care remain similar.
- Activity at 1 NICU and 1 LNU does not meet current BAPM thresholds; 1 LNU currently only admits babies 32 weeks gestation and above.
- In CM 85% of IC activity and 62% of HD activity is undertaken in NICUs.
- CM has a surplus capacity of 30 cots (when cot demand is based on 80% capacity).
- Surgical activity at AHCH has decreased and cot demand is now 2 cots less than in 2021/22, although this data is collected manually due to the lack of a robust data collection method for babies cared for outside of the neonatal unit.
- 2 LNU had a very high HD occupancy for 9 months of the year, 1 NICU had a high IC occupancy for 9 months of the year. Overall mean monthly occupancy is 69%.
- Antenatal transfer to C&M from other ODNs has reduced, while postnatal transfer to CM from other ODNs have remained the same.
- There is 6% shortfall in nursing workforce across C&M (when compared against activity), variation within units in locality from being in excess to having a 23% shortfall.
- Non-compliance with tier 1, tier 2 and tier 3 medical rota persists.
- AHP and psychology support has increased but there is still a significant shortfall.

Recommendations:

- Neonatal Critical Care Review - Use data to support commissioner-led NCCR
- To continue work with CM Preterm Birth Network to maintain improvement of < 27week deliveries in non-NICU maternity units.
- Support ODN wide repatriation project to monitor compliance across locality.
- Engage with stakeholders to encourage and facilitate recruitment into AHP posts.
- Term admissions – Project investigating length of stay in CM term admissions.
- Continue to monitor CM admission rates for preterm and term admissions, and support units in collaboration with the LMNS to further develop transitional care services.

8. Lancashire & South Cumbria Activity & Workload

8.1 LSC Activity by Level of Care

Table 8.1 and 8.1a show the total care level days by unit and across the LSC locality. XA04Z care if delivered in TC is not included.

HRG 2016	XA01Z			XA02Z			XA03Z + XA04Z + XA05Z			Total		
Unit Name	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
BTH	208	125	170	667	684	642	2,590	2,395	2,426	3,465	3,204	3,238
ELHT	1,714	1,964	2,152	2,502	2,291	2,965	4,966	4,325	4,293	9,182	8,580	9,410
LTHTR	1,230	1,317	1,279	1,444	1,685	1,929	3,629	3,074	3,965	6,303	6,076	7,173
MBHT – FGH	12	19	22	34	25	25	660	548	631	706	592	678
MBHT – RLI	57	106	80	505	411	487	1,469	1,666	1,671	2,031	2,183	2,238
Total	3,221	3,531	3,703	5,152	5,096	6,048	13,314	12,008	12,986	21,687	20,635	22,737

Table 8.1

8.2 LSC Activity as a % of locality activity by level of care

HRG 2016	XA01Z %			XA02Z %			XA03Z + XA04Z + XA05Z			Total %		
Unit Name	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
BTH	6%	4%	5%	13%	13%	11%	19%	20%	19%	16%	16%	14%
ELHT	53%	56%	58%	49%	45%	49%	37%	36%	33%	42%	42%	41%
LTHTR	38%	37%	35%	28%	33%	32%	27%	26%	31%	29%	29%	32%
MBHT – FGH	0%	1%	1%	1%	0%	0%	5%	5%	5%	3%	3%	3%
MBHT – RLI	2%	3%	2%	10%	8%	8%	11%	14%	13%	9%	11%	10%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Table 8.2

8.3 LSC Activity and workload

8.3.1 LSC NICU Activity and Workload Data

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all NICUs should, as a minimum, look after at least 100 very low birth weight (VLBW) infants per year and be delivering >2000 intensive care days (Health Resource Group definition, 2016 & BAPM Optimal Arrangements for Neonatal Intensive Care Units in the UK, 2021).

LNU Unit	Intensive Care HRG XA01Z			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
ELHT	1,714	1,964	2,152	3,834	3,906	4,785	87	89	93
LTHTR	1,230	1,317	1,279	2,420	2,849	2,951	67	57	77

Table 8.3.1

8.3.2 LSC LNU & SCU Unit Activity and Workload Data

In-line with the recommendations included as part of the Neonatal Critical Care Transformation Review (2019) all LNUs should aim to undertake a minimum of 500 days of combined intensive and high dependency care, which is the minimum requirement to maintain expertise. LNUs providing ongoing HD should be working towards delivering 1000 combined ITU/HD days per year, in the longer term (i.e. 5 years from publication of NCCR in 2019). Units designated as LNUs should also admit >25 infants annually (BAPM Optimal arrangements for Local Neonatal Units and Special Care Units in the UK, 2016).

LNU Unit	IC & HD HRG XA1Z & XA02Z			Respiratory support days (Ventilation/CPAP/HFT)			VLBW admissions (Less than 1500g)		
	21/22	22/23	23/24	21/22	22/23	23/24	21/22	22/23	23/24
BTH	875	809	812	700	698	765	41	27	27
MBHT - FGH (SCU)	46	44	47	45	38	46	5	7	7
MBHT – RLI	562	517	567	542	473	503	17	22	24

Table 8.3.2

8.4 LSC Cot Activity

Table 8.4 shows the demand (D) for cots based upon activity within each of the providers against actual (A) cots. Care Levels are based upon HRG 2016 codes.

Calculation method which includes 80% capacity: Cot Demand = (Number of care days/366)/0.8 as it is a leap year

Lancashire & South Cumbria	Cots D: Demand A: Actual															
	D	D	D	A	D	D	D	A	D	D	D	A	Total	Total	Total	Total
	IC	IC	IC	IC	HD	HD	HD	HD	SC	SC	SC	SC	D	D	D	A
	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24	21/22	22/23	23/24	23/24
BTH	0.7	0.4	0.6	2	2.3	2.3	2.2	2	8.9	8.2	8.3	12	11.9	10.9	11.1	16
ELHT	5.9	6.7	7.3	6	8.6	7.8	10.1	8	17	14.8	14.7	20	31.5	29.3	32.1	34
LTHTR	4.2	4.5	4.4	6	4.9	5.8	6.6	8	12.4	10.5	13.5	14	21.5	20.8	24.5	28
MBHT – FGH	0	0.1	0.1	0	0.1	0.1	0.1	0	2.3	1.9	2.2	4	2.4	2.1	2.4	4
MBHT – RLI	0.2	0.4	0.3	1	1.7	1.4	1.7	2	5	5.7	5.7	7	6.9	7.5	7.7	10
Total	11	12	13	15	18	17	21	20	46	41	44	57	74	71	78	92

Key: Short by 1 or more cot = Red, over by 1 or more cot = Yellow

Table 8.4

8.5 Lancashire & South Cumbria – Summary

Dr Richa Gupta, Clinical Lead for LSC & Catherine Nash, Lead Nurse for LSC

Key Findings:

- The LSC birth rate showed a 1.3% decrease from 2022/2023 (a fall of 5% from 2019).
- First admissions admitted across LSC remains steady at 10% of liveborn babies, (range between providers is 8-11%)
- A slight rise in term admissions (average 5.1%, lowest 3.9% at RLI, highest at 6.1% ELHT). An action plan is in place at ELHT to reduce below 6% in-line with NHSE requirements.
- There is a continued decrease in the proportion of babies admitted at 34-36 and 37weeks gestation (40%) and reduction in length of separation days (5.1 days), but variation between units (lowest LTH 32% - highest BTH 49% admission rates), possibly reflecting provision of Transitional Care resources or admission criteria.
- There is a marked improvement to 94% of 27 week gestation babies being born in a NICU (vs 80% in 2022/2023).
- There was a continued disproportionate split of IC activity, between the two NICUs, with ELTH experiencing activity exceeding recommended levels (>80% occupancy) for 10 out of 12 months, when there was capacity at LTHTR. Neither NICU achieved the 'recommended' VLBW admissions, although ELTH had higher IC days complying with NCCR recommendations.
- LNU activity shows an overall reduction in VLBW admissions, and neither LNU is currently achieving the NCCR combined IC and HD activity.
- The medical workforce is non-compliant for Tier 3 doctors at both LSC NICUs, and FGH SC and Tier 1 and 2 medics at both the LNUs.
- There is still a significant deficit across all units for all AHP&Ps

Recommendations:

- Further focus is needed on admissions and LOS for babies 34 and 36weeks gestation to understand themes contributing to separation, including both TCS and Outreach provision.
- Work with the LMNS to understand impact on maternal pathways on demand, capacity and patient flows, whilst continuing embedding Preterm optimisation QI work.
- Repatriation processes across the NWNODN from NICUs to LNUs requires attention to support care closer to home.
- Meet with East Lancashire NHS Trust NICU to discuss consistently high levels of IC and HD activity.
- Review of the designations of units towards a sustainable Neonatal service, as part of the joint NCCR/ NWNODN review, should consider population demographics and clinical outcomes alongside activity and capacity.

Appendix 1: Out of Area Activity Base

LHB Code	Welsh - LHB Name	LHB Code	Welsh - LHB Name
7A1	Betsi Cadwaladr University LHB	7A5	Cwm Taf LHB
7A2	Hywel DDA University LHB	7A6	Aneurin Bevan LHB
7A3	Abertawe Bro Morgannwg University LHB	7A7	Powys Teaching LHB
7A4	Cardiff & Vale University LHB		

Q76 - North Midlands		Q77 - West Midlands	
CCG Code	CCG Name	CCG Code	CCG Name
03Y	NHS HARDWICK CCG	05A	NHS COVENTRY AND RUGBY CCG
04E	NHS MANSFIELD AND ASHFIELD CCG	05C	NHS DUDLEY CCG
04J	NHS NORTH DERBYSHIRE CCG	05F	NHS HEREFORDSHIRE CCG
04K	NHS NOTTINGHAM CITY CCG	05J	NHS REDDITCH AND BROMSGROVE CCG
04L	NHS NOTTINGHAM NORTH AND EAST CCG	05L	NHS SANDWELL AND WEST BIRMINGHAM CCG
04M	NHS NOTTINGHAM WEST CCG	05R	NHS SOUTH WARWICKSHIRE CCG
04R	NHS SOUTHERN DERBYSHIRE CCG	05T	NHS SOUTH WORCESTERSHIRE CCG
04Y	NHS CANNOCK CHASE CCG	05Y	NHS WALSALL CCG
05D	NHS EAST STAFFORDSHIRE CCG	06A	NHS WOLVERHAMPTON CCG
05G	NHS NORTH STAFFORDSHIRE CCG	06D	NHS WYRE FOREST CCG
05N	NHS SHROPSHIRE CCG	15E	NHS BIRMINGHAM AND SOLIHULL CCG
05Q	NHS SOUTH EAST STAFFORDSHIRE AND SEISDON PENINSULA CCG	15E	NHS Birmingham and Solihull CCG
05V	NHS STAFFORD AND SURROUNDS CCG		
05W	NHS STOKE ON TRENT CCG		
05X	NHS TELFORD AND WREKIN CCG		
15M	NHS DERBY AND DERBYSHIRE CCG		

Q72 - Yorkshire & Humber			
CCG Code	CCG Name	CCG Code	CCG Name
02N	NHS AIREDALE, WHARFEDAILE AND CRAVEN CCG	03H	NHS NORTH EAST LINCOLNSHIRE CCG
02P	NHS BARNESLEY CCG	03J	NHS NORTH KIRKLEES CCG
02Q	NHS BASSETLAW CCG	03K	NHS NORTH LINCOLNSHIRE CCG
02R	NHS BRADFORD DISTRICTS CCG	03L	NHS ROTHERHAM CCG
02T	NHS CALDERDALE CCG	03M	NHS SCARBOROUGH AND RYEDALE CCG
02W	NHS BRADFORD CITY CCG	03N	NHS SHEFFIELD CCG
02X	NHS DONCASTER CCG	03Q	NHS VALE OF YORK CCG
02Y	NHS EAST RIDING OF YORKSHIRE CCG	03R	NHS WAKEFIELD CCG
03A	NHS GREATER HUDDERSFIELD CCG	13Q	NATIONAL COMMISSIONING HUB 1
03E	NHS HARROGATE AND RURAL DISTRICT CCG	15F	NHS LEEDS CCG

