

Title of Paper	ATAIN Action Plan
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1. Background

NHS Resolution is operating a second year of the Clinical Negligence Scheme for Trusts (CNST) maternity incentive scheme to continue to support the delivery of safer maternity care. The maternity incentive scheme applies to all acute trusts that deliver maternity services and are members of the CNST. As in year one, members will contribute an additional 10% of the CNST maternity premium to the scheme creating the CNST maternity incentive fund. For ULHT, this is estimated to be in the region of £704,000

As in year one, the scheme incentivises ten maternity safety actions. Trusts that can demonstrate they have achieved all of the ten safety actions will recover the element of their contribution relating to the CNST maternity incentive fund and will also receive a share of any unallocated funds. This is not only of financial importance to ULHT who are currently in financial special measures; but more importantly, is a hallmark of safe care being provided to women and their families to maximise their clinical outcomes and birth experience.

A paper that provides the current position against all the 10 safety actions is being formulated by the Interim Head of Midwifery for the Trust Board to consider and agree action that will assist the maternity service to be able to demonstrate full compliance by 15th August 2019. In addition to the overarching paper, there is a more time pressing need to evidence compliance on Safety action 3: which relates to having the required transitional care services to support the Avoiding Term Admissions into Neonatal units Programme (ATAIN). More specifically, an ATAIN action plan requires Trust Board, Local Maternity System and Neonatal Operational Delivery Network (ODN). The action plan needs to address local findings from the ATAIN reviews by ULHT's neonatal service with improvement action aligned to each modifiable and avoidable reason for admission.

The submission date for the ATAIN action plan as part of the CNST evidence was 10th March 2019, which was not met by the United Lincolnshire Hospital Trust. A request to the ODN and NHS England for a one month's extension has been made by LECCG; but a response has not yet been received so it is yet unknown if this will count against the Trust in ascertaining compliance against safety action 3. Given the timeframe required to ensure that the paper has been discussed at the appropriate governance committees and boards, the following dates are key to meeting a one month extension:

Women’s and Children’ Cabinet	18 th March 2019
Quality Governance Committee:	19 th March 2019
Local Maternity System :	20 th March 2019
Trust Board:	2 nd April 2019
Submission to ODN:	3-4 th April 2019

In addition, the approved action plan there is a requirement to share progress made against the action plan at LMS, ODN and Trust Board Level. It is therefore proposed that a quarterly CNST report which includes the ATAIN action plan is presented to the above committees moving forward.

2. Avoiding Term Admissions into Neonatal units Programme (ATAIN)

The number of unexpected admissions to neonatal units is seen as a proxy indicator that preventable harm may have been caused at some point along the maternity or neonatal pathway. Additionally, Admission to a neonatal unit can lead to unnecessary separation of mother and baby. There is overwhelming evidence that separating mother and baby at or soon after birth can affect the positive development of the mother-child attachment process and adversely affect maternal perinatal mental health.

It is therefore and should be an area of focus for improvement. The four key clinical areas that represent a significant amount of potentially avoidable harm to babies: respiratory conditions

- hypoglycaemia
- jaundice
- asphyxia (perinatal hypoxia-ischaemia)

The action plan therefore incorporates each of the four areas.

3. Progress

No of babies admitted with Hypoglycaemia	LCH	PH
01/02/2017 – 31/01/2018	41	30
01/02/2018 – 31/01/2019	5	4

Avoidable Term Admissions into Neonatal Unit Programme (ATAIN) Action Plan

Created: September 2018

Updated: March 2019

No.	Objective	Action	Lead	Timescale	Progress	RAG
1.	To ensure that all admissions to the Neonatal Unit are reviewed using an agreed template to identify areas of improvement	To agree Review Template	CF/CB	Complete	Template in place since 12/2017 and updated in 02/2019	
2	To develop a ATAIN review process	To develop an agreed process flowchart	CF/CB	Complete	Pathway flowchart in place	
3	To report on progress	To provide progress reports to Speciality governance and LMS and Board	CF	April 2019	LMS progress report submitted Standard Agenda Item on LMS Agenda Proposal made to report quarterly to TB Joint Neonatal and Labour Ward monthly review meeting in place to identify themes and learning	

					To ensure that themes are cascaded to all staff to ensure learning has occurred	
4	Complete an annual summary of case reviews and findings	To formulate annual report	CF/CB	On-going	2017/2018 reported an avoidable admission rate of 11% for Pilgrim and 8.8% for LCH against national data of 30% - themes included in this plan	
4	To participate in Wave One Maternity Safety Collaborative	To undertake safety project regarding reducing admission for hypothermia	CF	COMPLETE	Improvement project using PDSA complete with a reduction in admissions achieved Presented at Regional Neonatal Event	
5	To ensure that ULHT guidelines comply with the BAPM Hypoglycaemia guidelines	To review ULHT policy	CB/CF	COMPLETE	Policy updated in January and available on Intranet site	
		To implement the WARM Bundle	CF	COMPLETE	WARM Bundle implemented	
	To reduce incidence of HIE	To review CTG training	JB/LW	COMPLETE	New CTG interpretation methodology implemented and training undertaken	
	To ensure that sepsis 6 is completed	Project as part of the safety	CF/JB,VA	COMPLETE	Monthly compliance being monitored	

		collaborative				
	To review cot capacity on transitional care unit at both LCH	<p>To increase cot capacity at LCH by 8</p> <p>Recruitment of staff to comply with Neonatal staffing template to ensure appropriate cover and skill mix</p> <p>Implementation of outreach service to increase cot capacity</p>	SH/PS/SJ /CJ/BB	June 2019	Job Descriptions written and approval to advertise – process delayed due to internal post authorisation process	

	To review admission criteria for Transitional Care	Implementation of new TC admission criteria in line with BAPM standards To standardise across network	EMODN network/ Cathy Franklin/Julie Bulteel/Lucy Wonnacott/HOS	July 2019		
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