

amongst those who contributed.
The password is the same for both and will follow.

I have made the changes made as suggested in your email below and the comments have been mostly accepted
For clarification of other questions –

- Para 4.6.2 the network CEMs had reported a few unexpected unresponsive collapses in the minutes of their meetings but perhaps there was insufficient information to presume these were similar to what your team had noted.
- We have updated various data sections with 2015-6 network data - thanks for suggesting this
- Para 4.4.5 – yes the Child I was not born nor died at COCH

Please let me know if there is anything else we can assist with
With best wishes

Sue

Sue Eardley
Head of Invited Reviews
RCPCH *Leading the Way in Child Health*
5-11 Theobald's Road, London, WC1X 8SH
I&S / I&S
sue.eardley@i&s

From: HARVEY, Ian (COUNTRESS OF CHESTER HOSPITAL NHS FOUNDATION TRUST) [mailto:i.harvey@i&s]
Sent: 15 November 2016 10:22
To: Sue Eardley
Subject: Amended review

Dear Sue

Please find attached an amended report. It has been seen by the Execs, Steve Brearey, Ravi Jayaram and Ann Murphy (in place of Eirian Powell) and their comments have been taken in to account.

The report has the tracked changes and comments within it.

In addition, I have attached a document that Steve wanted shared with you about activity and he made further comments to be shared:

1. "I can confirm that Debbie Peacock, risk facilitator, did attend the thematic review meeting on 8th Feb, and her attendance was recorded in the minutes.
2. Regarding term admissions, I will forward you the email I sent to Sue Eardley on 13th October. The activity, capacity and demand network report for 2015-2016 shows that the percentage of live births >37 weeks admitted to NNU was 7.8%. Although I accept this is still above the national average, it is less than Ormskirk and Warrington hospitals in our region (9.2% and 9.0%) and shows we are improving. **This data was available in October and is more relevant to the times the review looked at and therefore it would be better if they quoted this data.**
3. Regarding the comment on neonatal guidelines, I would be very grateful if you highlight to the RCPCH that the following guidelines all reference LWH or Arrowe park guidelines:

Central Venous Lines Umbilical Venous Catheter UVC and Peripheral Long Line Insertion
Insertion and sampling from umbilical arterial lines (uac) and peripheral arterial lines
Renal tract abnormalities – postnatal management Neonatology and Paediatrics
Candida Infection (Neonatal)
Parenteral nutrition and electrolyte disturbance-Neonatal
DRUG INFUSIONS IN NEONATES - PRESCRIBING & ADMINISTERING
PNEUMOTHORAX AND CHEST DRAIN INSERTION IN NEONATES
RESPIRATORY FAILURE IN NEONATES MANAGEMENT PATHWAY

In addition, the following guidelines have been taken from LWH guidance:

Hepatitis B infection
Hepatitis C Infection
Neonatal encephalopathy
Neonatal hypoglycaemia
Elective intubation and the use of sedation and paralysis
DRUG INFUSIONS IN NEONATES - PRESCRIBING & ADMINISTERING
Surfactant guideline
Enteral feeding for Very Low birth weight babies <1500g

There is existing NICE guidance on Jaundice and early neonatal sepsis and therefore NICE is referenced in preference to other units."

I'd like to take the opportunity again, of thanking you and the team for the way the review has been conducted and the comprehensive report.

The password is the same.

Kind regards

Ian