

Reasons for concerns regarding a possible criminal cause for increased neonatal mortality at the Countess of Chester Hospital NHS Foundation Trust, June 2015 – July 2016

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Summary

The historical annual number of deaths on the neonatal unit at the hospital has been between 1 and 3. From June 2015 there were 13 deaths in the 13 months. The probability of this increase in mortality occurring by chance alone is very low. Many of the babies who died were born at gestations where death is statistically very unlikely (Appendix 1).

Of the babies who died, most deteriorated unexpectedly without explanation at the time or subsequently. It is very unusual not to see any clinical evidence of a baby becoming unwell e.g. you might expect to see their heart beating faster or the level of oxygen in their blood changing. In some of these cases there was no recovery to adequate resuscitation measures. For this to occur in such a large number of babies is highly unusual and could be considered as suspicious.

There is an association with a member of staff who was present during the majority of instances when the babies unexpectedly deteriorated. When this member of staff was put onto day shifts for 3 months, no sudden collapses occurred during the night. Previous to this change in her work pattern, in 6 out of 9 deaths, the arrests occurred between 0000 and 0400. When this member of staff was no longer working on the unit (July 2016-present), there have been no neonatal deaths on the unit and no unexpected or unexplained sudden deteriorations. This member of staff was present on the unit during the deterioration of the babies who died **A** **C** **D** **E** **I** **O** and **Child P**

The gestation at birth of the babies who died was between 27 weeks and 40 weeks. 6 babies were >32 weeks gestation. The redesignation of the unit from July 2016 (only permitted to