From: Groggins Peter (NHS ENGLAND) [/O=MAIL/OU=NHSFB04/CN=RECIPIENTS/CN=UASR1R8J]

Sent: 07/07/2016 09:47:42

To: COOPER, Lisa (ALDER HEY CHILDREN'S NHS FOUNDATION TRUST)

[/o=MAIL/ou=NHSFB12/cn=Recipients/cn=IPQQXFB7]; SEDGWICK, Marie (NHS ENGLAND)

[/o=MAIL/ou=NHSFB05/cn=Recipients/cn=E8Y7HKH6]; Creed Michelle (NHS ENGLAND) [michelle.creed@ I&S];

VALJALO, Barbara (THE WALTON CENTRE NHS FOUNDATION TRUST)

[/o=MAIL/ou=NHSFB12/cn=Recipients/cn=I3TTR6IU]

CC: ALLAN, Joe (WIRRAL UNIVERSITY TEACHING HOSPITAL NHS FOUNDATION TRUST)

[/o=MAIL/ou=NHSFB05/cn=Recipients/cn=U067TENG]; HESTER, James (NORTH WEST BOROUGHS HEALTHCARE NHS

FOUNDATION TRUST) [/o=MAIL/ou=NHSFB11/cn=Recipients/cn=I5LYG3AH]; SPELMAN, Melanie (NHS SOUTH

SEFTON CCG) [/o=MAIL/ou=NHSFB09/cn=Recipients/cn=UL4WYY53]

Subject: COCH NNU Closure

Dear Colleagues

Please note the incident reported by the Countess of Chester today. I'm assuming Spec Comm will manage?

Description

Information from The Countess of Chester Hospital NHS Foundation Trust re neonatal services. We are temporarily changing the admission arrangements for our neonatal unit to focus predominantly on lower risk babies, who are born after 32 weeks. This decision is being taken with the support of the Cheshire and Merseyside Neonatal Care Network. Due to an increase in neonatal mortality rates for 2015 and 2016 compared to previous years. In light of this, we have asked for an external review of our neonatal service from the Royal College of Paediatrics and Child Health and The Royal College of Nursing, which is expected to be completed by the end of August. While this takes place, we will be closing three intensive care cots at the Chester neonatal unit. A total of 13-cots will continue to provide specialist and high dependency care for newly born and premature babies born at 32-weeks and above. •By way of summarising our position: o We have identified a change in what our internal data and information is telling us. o We are acting responsibly in requesting an external review to help us understand this change. o At the same time we are responding to the advice of our neonatal clinicians in how most importantly we support the needs of expectant or new Mums and their babies.

Immediate Action

Escalation to Executive Team, NHS England, CCG & CQC. Internal analysis of data and clinical case reviews whilst awaiting an independet review with amendment to the admissions criterion implemented, supported by the Neonatal network. Press release is drafted for release today, with identified patient families to be contacted.

Peter

Serious Incident Reporting Document Created by URJR on 07/07/2016 at 10:39:17					
[Exit] [Save and Submit] [Save and mark as closed]					
Organisation reporting SI on STEIS:	Countess Of Chester Hospital NHS Foundation Trust	Log No:	I&S		
Region (Geography):	Cheshire and Merseyside	Status:	Ongoing		

Internal Investigation	[internal comprehensive \V]	Expected SIRI Completion date	09/30/2016	
Required:		: ?	Read Only This will be calculated 60 days from date report submitted	
Independent Required:	(X)Yes ()No ()Unknown ()Pending Review	Expected date of Completion		
Non-health led investigation required	[Not applicable ∨]	Expected date of Completion		
Description of what happened:	Information from The Countess of Chester Hospital NHS Foundation Trust re neonatal services. We are temporarily changing the admission arrangements for our neonatal unit to focus predominantly on lower risk babies, who are born after 32 weeks. This decision is being taken with the support of the Cheshire and Merseyside Neonatal Care Network. Due to an increase in neonatal mortality rates for 2015 and 2016 compared to previous years. In light of this, we have asked for an external review of our neonatal service from the Royal College of Paediatrics and Child Health and The Royal College of Nursing, which is expected to be completed by the end of August. While this takes place, we will be closing three intensive care cots at the Chester neonatal unit. A total of 13-cots will continue to provide specialist and high dependency care for newly born and premature babies born at 32-weeks and above. •By way of summarising our position: o We have identified a change in what our internal data and information is telling us. o We are acting responsibly in requesting an external review to help us understand this change. o At the same time we are responding to the advice of our neonatal clinicians in how most importantly we support the needs of expectant or new Mums and their babies.			
Immediate action taken:	Escalation to Executive Team, NHS England, CCG & CQC. Internal analysis of data and clinical case reviews whilst awaiting an independet review with amendment to the admissions criterion implemented, supported by the Neonatal network. Press release is drafted for release today, with identified patient families to be contacted.			
Patient family / victims family informed?	()Yes ()No ()Not applicable (X)Obtaining contact details			
Patient(s) informed?	()Yes (X)No ()Not applicable			
Duty of Candour comments - include Steps taken to involve and support those affected (including patient(s), victims, families, staff):	Identified patient families are to be contacted.			
Media Interest:	(X)Yes ()No	Line being taken by Trust/CCG:	Press release drafted to be released today. Potential interest from HSJ with article published around newborn care.	
Externally reportable:	(X)Yes ()No	Externally reportable to:	[Care Quality Commission (via direct communication/notification) V]	