



# Neonatal Transfer Service

## Biennial Report

ISSUE 8

2020 – 2022

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## How did we do over the last few years



The Neonatal Transfer Service for London (NTS) is in its 19th year of providing a dedicated specialist neonatal transport services for the London area.

2020 - 2022 were very challenging times, COVID –19 had an impact on our service and the Barts Health Trust as a whole, we faced difficulties in staffing our service while also keeping our staff safe.

We feel despite this we continued to provide an excellent service during the pandemic.



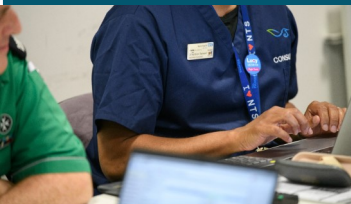
## Mission Statement

Neonatal Transfer Service (NTS) is the dedicated regional neonatal transfer service for London. We aim to be the single port of call for cot location and transfer of neonates between neonatal units across the London region.

We provide a consultant led service based round the clock 365 days a year. We take pride in being a safe, caring, collaborative and efficient transfer operation committed to our users. We strive to excel and deliver high standards of care in the field of neonatal transport medicine.



*Established in  
2003, growing  
stronger each year*



### Introduction

The London Neonatal Transfer Service (NTS) is a pan-London clinical service at the Royal London Hospital (Barts Health NHS Trust). NTS works in partnership with St John Ambulance. We serve all London hospitals' neonatal in-patients across 27 neonatal unit hospitals. NTS provides clinical advice, triage, stabilisation & transfer services (uplift & repatriation) between all London units, including specific transfers into paediatric & cardiac intensive care units and into or out of specialist paediatric wards.



The service is central to patient flow & network function within the footprint of the London Neonatal Operational Delivery Network (ODN). The service also provides outreach education and risk review to all service users as part of its core remit & proactively canvasses feedback. Performance is reported through the three London neonatal sector clinical oversight & governance groups and Local Maternity and neonatal Systems.

Performance metrics are submitted to the Neonatal Implementation Board quarterly & benchmarking data is submitted to the UK Neonatal Transport Group (a subset of the British Association of Perinatal Medicine) annually. NHSE London commissions the service.



### **Moving babies through the pandemic**

Like many of the NHS services, NTS was impacted by the issues related to the pandemic during these years. We continued to provide a seamless service to our patients and stakeholders and are grateful to our colleagues for their camaraderie, support and unrelenting service. We are also thankful to our sister teams, NTS KSS, CATS, STRS and PaNDR, for the collaboration and mutual aid we provided each other.

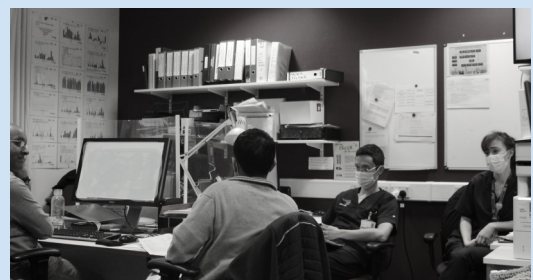
Unfortunately, because of the infection control precautions, we had to stop taking parents along on transfers temporarily but gradually resumed taking parents along towards the end of this period. Thankfully, our activity was steady and did not change much compared to the previous years. Our outreach, training and simulation courses were also impacted, but adversity provided a growth of virtual learning and outreach, which has become truly embedded within the service model.



### **Capacity constraints**

London NTS continues to be one of the busiest & highest acuity single-centre neonatal transfer services in the UK. Capacity constraints, especially in the repatriation leg, continue to impact the flow, timeliness and quality of service as local hospital non-specialist teams currently undertake this workload in conjunction with patient transport services & private ambulance providers. This is now objectively being quantified to seek further commissioning for building service capacity.

During 2021/2022, NTS time critical transfer dispatch times <1 hr was 76.4% against the national KPI threshold of 95%. This is a consequence of call stacking as a result of referral volume. This also highlights the need to build not just the repatriation but also the uplift capacity of the service.



# Data 2021— 2022

We have data from all of 2021 and the first 6 months of 2022

Data allows organisations to visualize relationships between what is happening in different locations, departments, and systems



## NTS Data

During 2021 NTS received a total of 2197 referrals

1338 Emergency referrals, 1097 were completed, & 241 cancelled

859 Elective referrals, 518 were completed, & 341 cancelled

During 2022 (Jan-June) NTS received 1031 referrals – comparable with 2021

608 Emergency referrals, 515 completed & 93 cancelled

423 Elective referrals, 256 completed & 167 cancelled

## Reasons for cancellation

local team did the transfer – often the local team would arrange the transfer with a private company prior to NTS undertaking the transfer within the 48hr window given to the referring units (the referring unit did not want to run the risk of losing the bed)

Cot not available – cot was available at time of referral but was unavailable at the time NTS were available to transfer the patient

Baby not ready at time of transfer – referring unit contacted NTS to initiate a transfer, and either the baby still had tests pending, the paperwork was not completed, bed not confirmed, parents not informed or medical handover not completed

We sent a checklist for referring units to use prior to referring to NTS

SERVICE LONDON

**London Neonatal Transfer Service Elective transfer suitability checklist**

Is mum booked at a London Hospital	Yes
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**Is the baby.....?**

Over 1kg	Yes
Above 27 weeks corrected gestational age	Yes
Any baby below 30 weeks corrected gestational age to be over 48 hours old	Yes
Baby under 5kg and less than 60cm in length	Yes
Clinically stable for last 24 hours with no increase in FiO2, no significant bradycardia, apnoea or desaturation	Yes
One of the following <ul style="list-style-type: none"> <li>Self-ventilating in air for 24 hours minimum</li> <li>low flow nasal cannula oxygen for 24 hours minimum</li> <li>On non-invasive ventilation with &lt;FiO2 40% for 48 hours minimum</li> </ul>	Yes

**Is the baby.....?**

Transferring to unit closer to home	Yes
Going for wait and return outpatient appointment at another hospital	Yes

**Have we got prepared....?**

Bed confirmed	Yes
Are the parents aware and happy with the transfer	Yes
Doctor to Doctor handover done	Yes
Infection status communicated to receiving hospital	Yes
Discharge summary completed	Yes

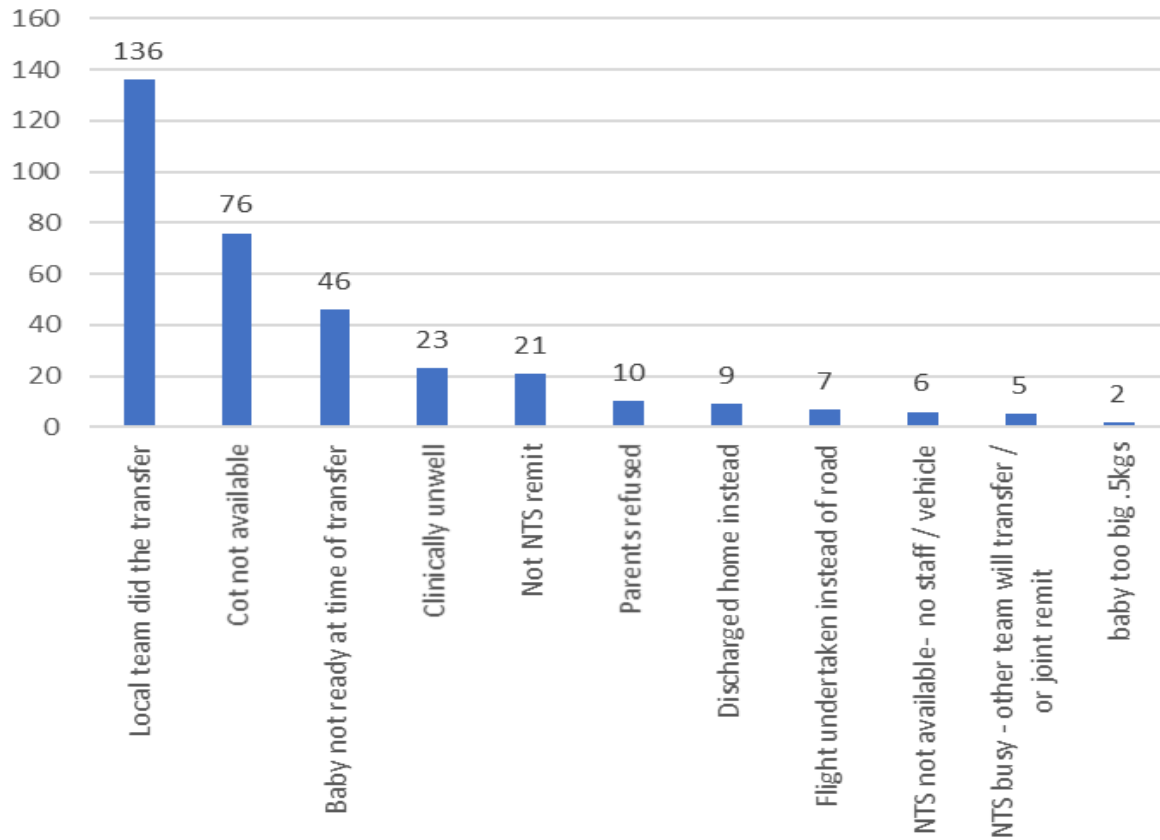
If the above answers are **yes** then please call the London Neonatal transport elective service hotline on

**020 359 40888**

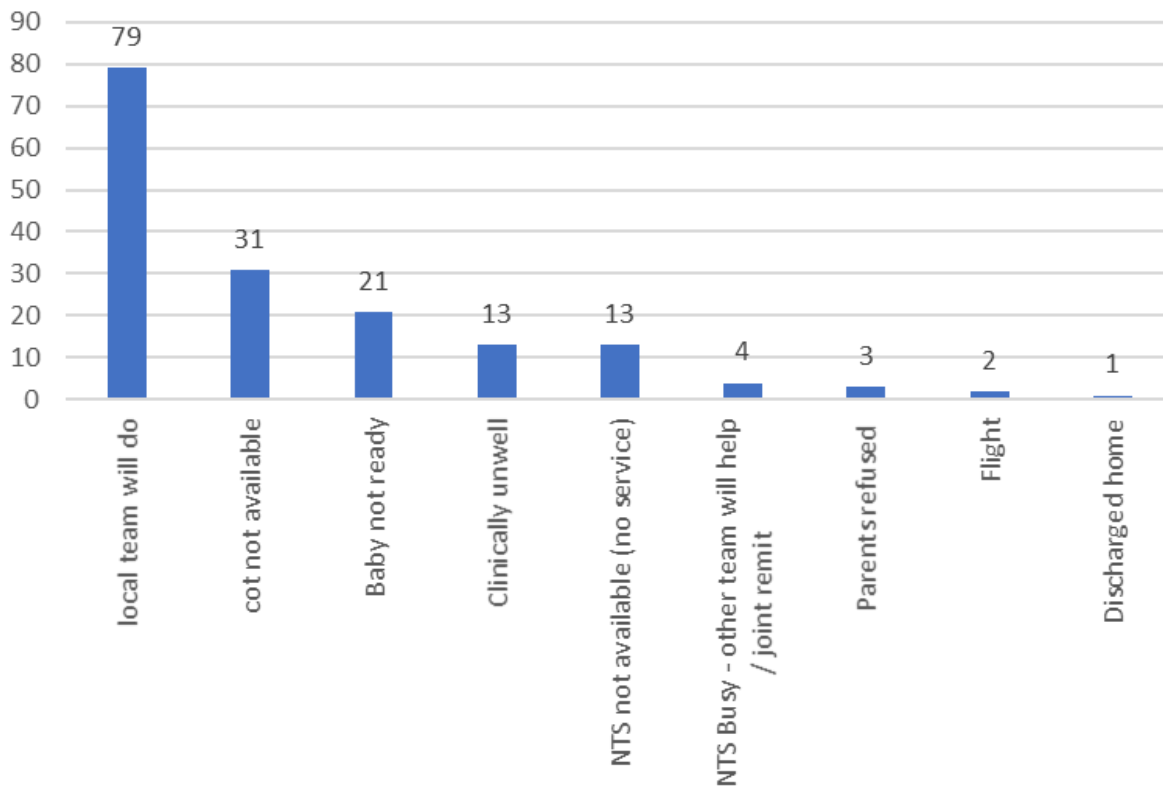
If an emergency transfer is **required** please call us via EBS on 020 740 74999

For more detailed information please refer to website  
[www.london-nts.nhs.uk](http://www.london-nts.nhs.uk)

## Reasons for cancellations for Elective referrals 2021

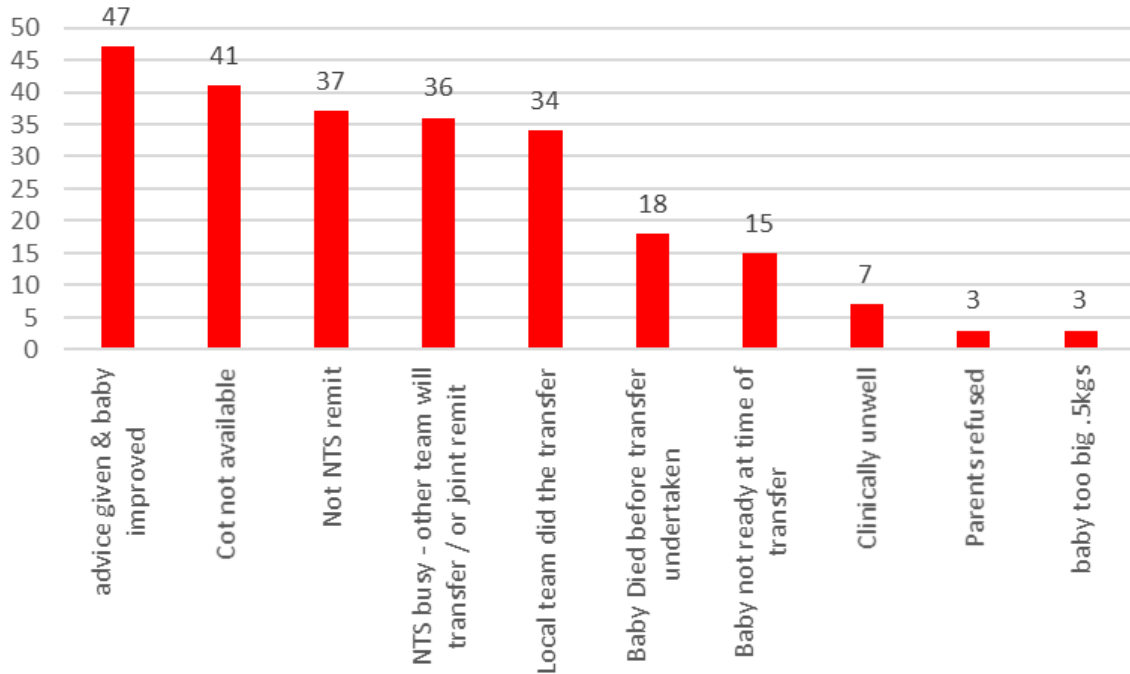


## Elective cancellations 2022

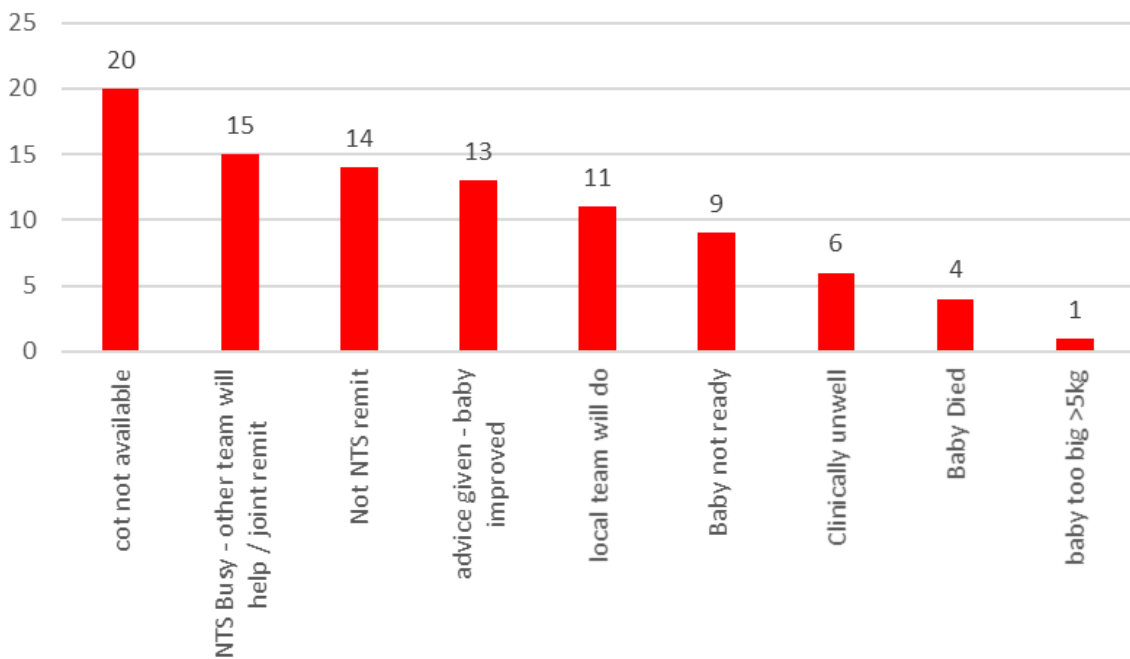


## Data

Reasons for cancellations for Emergency referrals 2021



Reasons for Emergency cancellations 2022



Local team did the transfer – often the local team would arrange the transfer themselves for capacity transfers that were referred when NTS were busy / call stacking emergency transfers

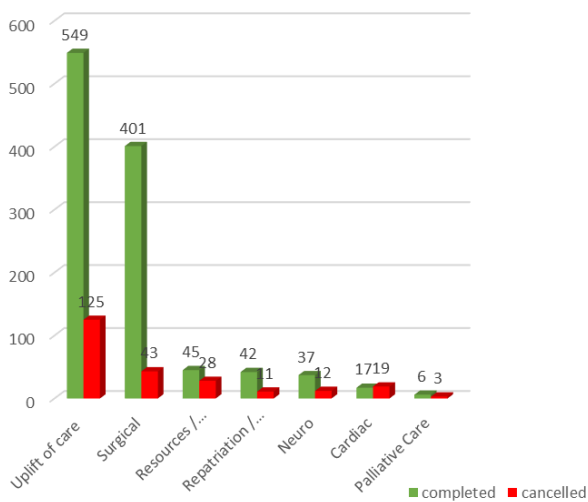
Cot not available – these are mainly planned emergency transfers, babies going for planned surgery, ROP / PDA, or being admitted for clinical work up, and the bed was not available on the intended day of transfer.

Not NTS remit – these are either babies that fall under CATS, STRS remit or were referred to NTS as other teams (KSS, PANDR) were busy and required help, NTS were already busy / stacking calls.

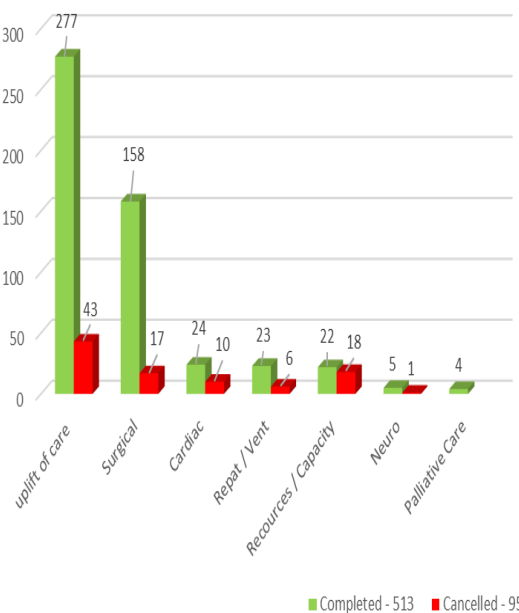
NTS busy – NTS stacking calls and asked sister teams (CATS / STRS / KSS) for help for time critical transfers

Advise given and baby improved – some units contact NTS for advice prior to transfer and the baby improves so the referring unit decide to keep baby, or if NTS are stacking emergency calls, the time NTS are available the baby has improved and remains at the referring unit

Reasons for transfer - Emergency referrals  
2021



Reasons for transfer - emergency referrals 2022





## Data

In 2021 NTS had 1338 Emergencies Referrals – these have been categorised into Networks

Referrals separated into networks 2021	NC & NE Network referred 617		NW Network referred 288		SE & SW Network referred 394	
	completed	cancelled	completed	cancelled	completed	cancelled
NC & NE	433	70	40	3	20	4
NW	41	3	161	19	15	0
SE & SW	31	6	15	0	283	40
Specialist (Royal Brompton)	1	0	20	7	2	5
KSS	1	0	1	2	2	1
Out of Area	3	1	1	0	0	0
Hospice	0	1	0	0	1	2
No bed at time of referral / cancellation	0	26	0	19	0	19

	Specialist [Royal Brompton] referred 20		Out of Area referred 7		Private [The Portland] referred 4		KSS [Kent, Surrey & Sussex] referred 8	
	completed	cancelled	completed	cancelled	completed	cancelled	completed	cancelled
NW	11	2						
SE & SW	4	1					2	1
NC & NE	1	1	4	2	3	1	0	3
Out of Area			0	1				
KSS							1	1

## 2022 – referrals by Networks

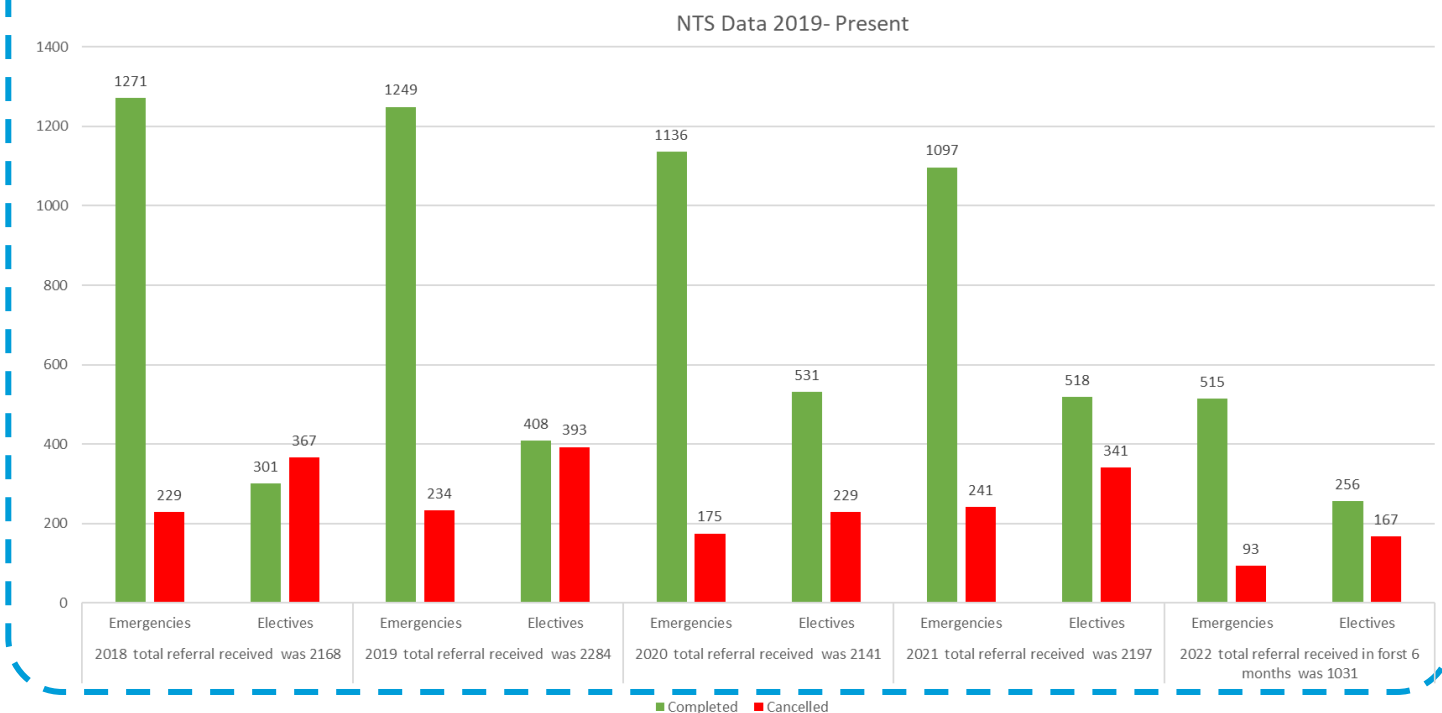
Emergencies	NC & NE Network		NW Network		SE & SW Network		KSS		Out of Area		Private	
	completed	cancelled	completed	cancelled	completed	cancelled	completed	cancelled	completed	cancelled	completed	cancelled
Total per network	240	39	106	19	161	22	0	6	3	10	2	0
NC & NE	187	23	20	5	13	3			1	4	1	
NW	30	1	78	10	3	4			1	3		
SE & SW	22		7		145	11		4	1		1	
Out of Area	1		1							1		
No bed at time of referral / cancellation		15		4		4		2		2		

Electives	NC & NE Network		NW Network		SE & SW Network		KSS		Out of Area		Private	
	completed	cancelled	completed	cancelled	completed	cancelled	completed	cancelled	completed	cancelled	completed	cancelled
Total per network	142	75	31	29	78	59	1	2	0	3	2	1
NC & NE	109	63	9	11	14	4	1	2		2	2	
NW	15	3	19	9		3				1		
SE & SW	12	3	3	4	63	43						
KSS				1		4						
Out of Area	6	5		4	1	4						1
No bed at time of referral / cancellation		1				1						



Reason for cancellations	Emergency 2018	Emergency 2019	Emergency 2020	Emergency 2021	Emergency 2022
Not NTS remit	61	17	26	37	14
NTS Busy - other team will help / joint remit	33	69	64	36	15
local team will do	30	32	12	34	11
cot not available	28	60	24	41	20
Baby not ready	24	15	9	15	9
advice given - baby improved	17	17	18	47	13
Clinically unwell	13	12	9	7	6
Baby Died	6	3	3	18	4
Capacity - team busy	6				
NTS not available (no service)	6		2		
baby too big >5kg	3	2		3	1
Parents refused	2	3	1	3	
Discharged home		2			
No reason recorded		2	6		
Flight			1		

Reason for cancellations	Elective 2018	Elective 2019	Elective 2020	Elective 2021	Elective 2022
local team will do	155	137	108	136	79
cot not available	85	69	35	76	31
Not NTS remit	25	32	25	21	
Baby not ready	24	39	24	46	21
Clinically unwell	24	29	27	23	13
NTS not available (no service)	22	16	2	6	13
Discharged home	9	22	7	9	1
Re-referred as capacity	9	8			
Flight	5	3	3	7	2
Parents refused	5	8	9	10	3
NTS Busy - other team will help / joint remit	3	6	8	5	4
baby too big >5kg	1	7	2	2	
Duplicate referral		4	3		
No reason recorded		13	46		



# Charity



We continue to work closely with LUCY Air Ambulance to help facilitate air transfers when repatriating babies long distance, without their help these baby's couldn't move closer to home to continue their neonatal journey

The Ickle Pickles Charity and Barts Health Charity to fund our equipment to the benefit of all our patients



*Charities play an essential role in NTS, we appreciate the time and effort that goes into raising these much need funds*



Lucy Air Ambulance for Children (Lucy AAC) is a national charity that ensures babies and critically ill children can access specialist treatment and care, wherever they are in the UK. Often the only way these children can access this care is to travel between hospitals by aeroplane and we are the only air ambulance charity in the UK that provides this unique service.

Each week a child is referred to our Charity needing a transfer by aeroplane between hospitals. We work in partnership with air ambulance providers and NHS transport teams throughout the UK by providing funding to make these flights happen.

On average each transfer costs Lucy AAC £9,300. The NHS does not have any budget for air ambulance transfers and relies on Lucy AAC to provide this essential service at no cost. We are a small team trying to help as many families as possible, and we are so happy that we are helping yours!

## CritiCool Mini Control Unit

London Neonatal Transfer Service | The Royal London Hospital, Whitechapel Road, Whitechapel E1 1BB | London

Some neurological conditions such as Neonatal Encephalopathy are incredibly dangerous to newborn babies. Not every hospital is equipped to deal with these conditions by cooling the babies to prevent brain damage. The effects of not cooling can sometimes be fatal or cause cognitive, behavioural or memory difficulties. The LNTS team have the responsibility to stabilise the baby, start the cooling process and transfer them to a hospital that is able to care for the baby in the longer term with the right equipment. The situation is highly stressful and heartbreaking for everyone involved. Clinicians have a 6 hour therapeutic window in which neuronal death can be slowed by rapidly cooling the infant, known as therapeutic hypothermia - the only treatment that has been proven to help these types of condition.

The LNTS team have requested x2 CritiCool Mini Machines to enable them to cool and stabilise the babies in their care during the transfer to the specialised hospital for treatment.

The device can also be used to warm patients which in turn will help the tiny/ premature babies that may need transferring to another hospital.



# PARENT FEEDBACK

To the most amazing, competent, kind, and reassuring Filippa

I just wanted to say an enormous thank you from the bottom of my heart for your heroic work last Thursday. From the word go both you and Ange were on a mission to keep all three together and transfer them in a day. It was overwhelming how hard you both worked for my boys with super-efficient hand overs at both ends. It was so reassuring for a hormonal mum to see only 3 days post births. Swaddled and geared up for their travels.....with a triumphant last pic of triplet three!!!

We've settled on Tristan, Avery and Leo as names. They're all doing really well at North Middlesex and we're aiming to get them home towards the end of this week/beginning of next.

I really cannot thank you enough I thought it was going to be a stressful day but thanks to you both it was very smooth and calm for both myself and the triplets

Thank you both for being so amazing at your jobs.

Kindest of regards and enormous thanks,

Jenny

