

THAMES VALLEY & WESSEX NEONATAL OPERATIONAL DELIVERY NETWORK

Standard Operating Procedure (SOP) for Thames Valley & Wessex Neonatal Operational Delivery Network Guidelines	
Approved by	Thames Valley & Wessex Neonatal ODN Governance Group (17 th November 2022)
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Related documents	N/A
Implications of race, equality & other diversity duties for this document	This SOP must be implemented fairly and without prejudice whether on the grounds of race, gender, sexual orientation or religion.

Standard Operating Procedure (SOP) for Thames Valley & Wessex Neonatal Operational Delivery Network Guidelines

1.0 Introduction

The Network have a selection of medical, nursing and developmental care guidelines and Network policies. These documents are required to be reviewed at a minimum of every three years. This SOP is designed to describe the process that new guidelines and reviewed guidelines should take in the ratification process.

2.0 Aim

The aim of this SOP is to clearly set out the steps and processes required to introduce new guidelines and review existing guidelines before they are ratified by the Network.

3.0 Scope of SOP

This SOP should be followed by the Network team and involve representatives from the neonatal units across Thames Valley and Wessex as detailed in the table below.

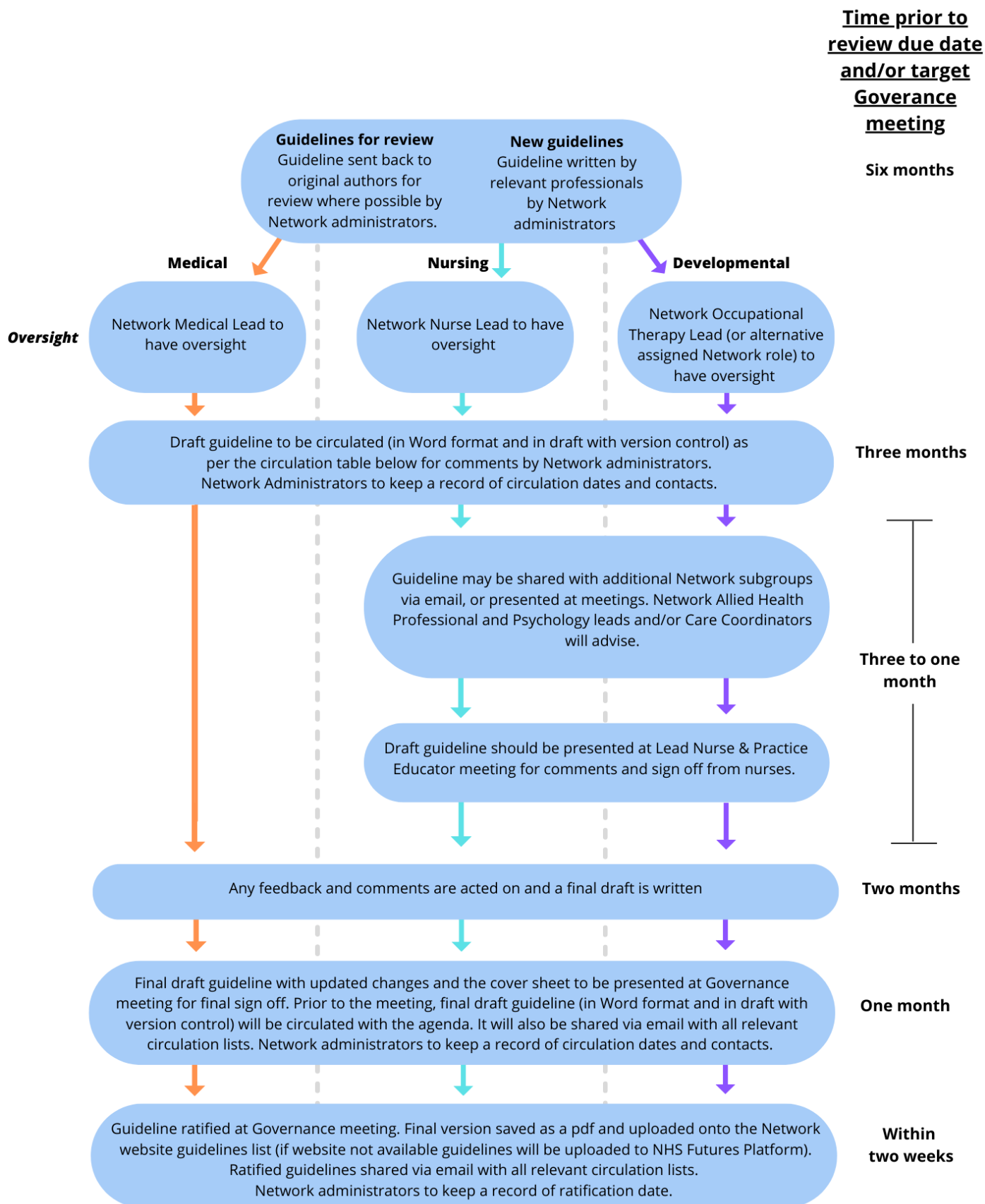
Thames Valley		
Trust	Hospital	Designation
Oxford University Hospitals NHS Foundation Trust	- John Radcliffe Hospital, Oxford	NICU
Buckinghamshire Healthcare NHS Trust	- Stoke Mandeville Hospital, Aylesbury	LNU
Frimley Health NHS Foundation Trust	- Wexham Park Hospital, Slough	LNU
Milton Keynes University Hospital NHS Foundation Trust	- Milton Keynes General Hospital	LNU
Royal Berkshire NHS Foundation Trust	- Reading	LNU

Wessex		
Trust	Hospital	Designation
University Hospital Southampton NHS Foundation Trust	- Princess Anne Hospital, Southampton	NICU
Portsmouth Hospitals NHS Trust	- Queen Alexandra Hospital, Portsmouth	NICU
Dorset County Hospital NHS Foundation Trust	- Dorchester	SCU
Hampshire Hospitals Foundation Trust	- Basingstoke	LNU
Hampshire Hospitals Foundation Trust	- Winchester	LNU
Isle of Wight NHS Trust	- St Mary's Hospital	SCU
University Hospitals Dorset NHS Foundation Trust	- Poole	LNU
Salisbury NHS Foundation Trust	- Salisbury	LNU
Western Sussex Hospitals NHS Foundation Trust	- St Richard's Hospital, Chichester	SCU

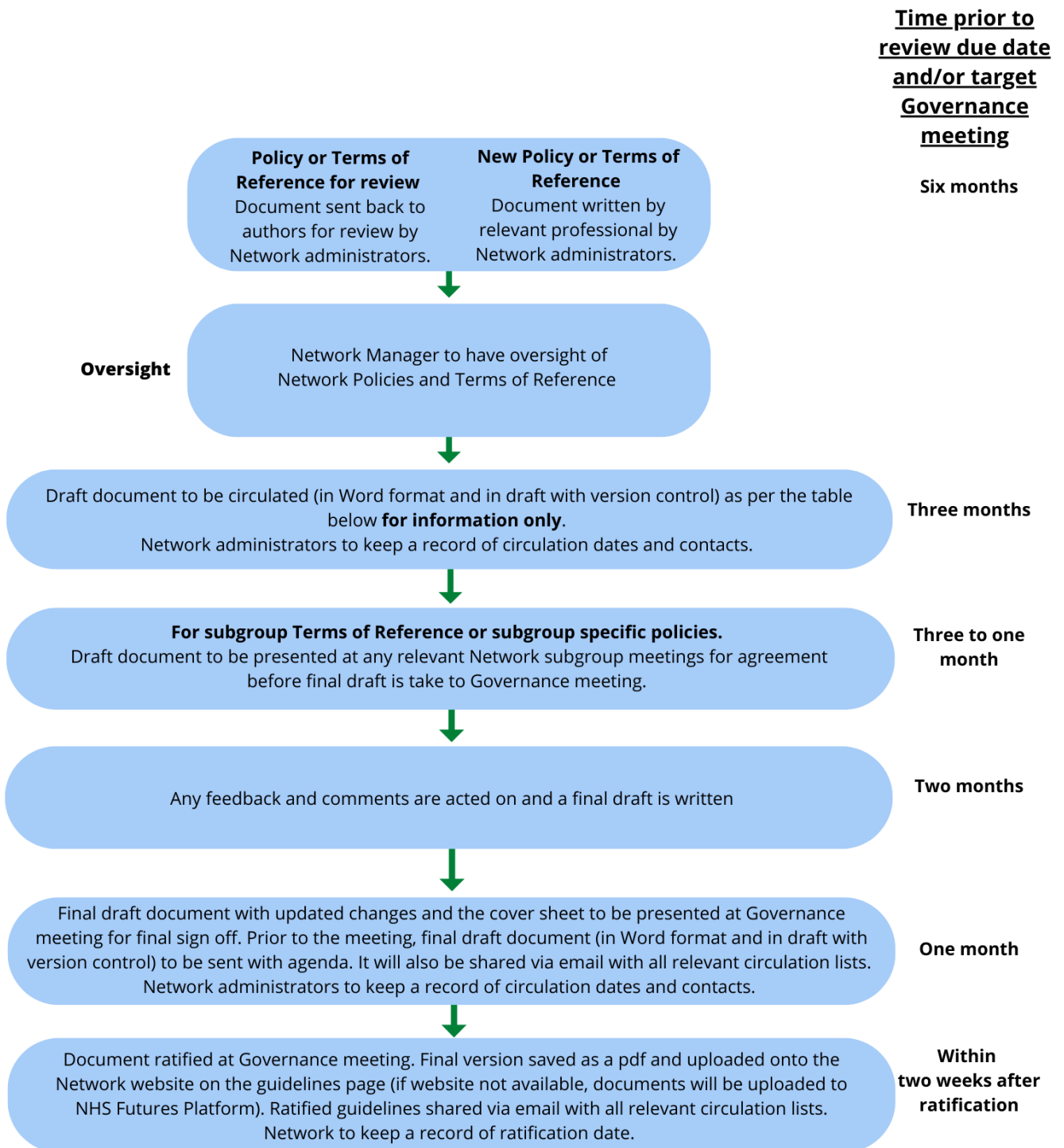
3.0 Process

The guidelines and policies should follow the steps outlines in the diagrams below.

3.1 Guidelines



3.2 Policies and Terms of Reference



4.0 Circulation

The documents will be circulated as per the diagrams above to the following contacts. Three weeks should be given for each circulation.

Circulation Table	
Type of document	Circulated to:
Medical guideline	<p>Network Guidelines Group Network Medical Leads Network Nurse Leads & Practice Educators Network ANNP group Network Pharmacist group (if drugs included) Network AHP & Psychology Leads (recommend if to be distributed further) Network Care Coordinators (recommend if to be distributed further) If the guideline includes a parent information leaflet send to Network Parent & Family Engagement Lead</p> <p>Cc'd – Network Medical Lead</p>
Nursing guideline	<p>Network Guidelines Group Network Medical Leads Network Nurse Leads & Practice Educators Network ANNP group Network Pharmacist group (if drugs included) Network AHP & Psychology Leads (recommend if to be distributed further) Network Care Coordinators (recommend if to be distributed further) If the guideline includes a parent information leaflet send to Network Parent & Family Engagement Lead</p> <p>Cc'd – Network Nurse Lead</p>
Developmental guideline	<p>Network Guidelines Group Network Medical Leads Network Nurse Leads & Practice Educators Network ANNP group Network Pharmacist group (if drugs included) Network AHP & Psychology Leads (recommend if to be distributed further) Network Care Coordinators (recommend if to be distributed further) If the guideline includes a parent information leaflet send to Network Parent & Family Engagement Lead</p> <p>Cc'd – Network Occupational Therapy Lead</p>
Network Policies	<p>Network Management Team Network Medical Leads (Circulated for information only) Network Nurse Leads & Practice Educators (Circulated for information only) Network Guidelines Group (Circulated for information only)</p> <p>Cc'd Network Manager</p>
Network Terms of Reference	<p>Network Management Team If for a subgroup, send to the subgroup members Network Medical Leads (Circulated for information only) Network Nurse Leads & Practice Educators (Circulated for information only) Network Guidelines Group (Circulated for information only)</p> <p>Cc'd Network Manager</p>

5.0 Timeframes from review to ratification

Governance meetings occur quarterly in March, June, September, and November.

Below is a suggested timeframe for the review process:

Time prior to review due date and/or target Governance meeting	Action
Six months	Guideline sent back to original authors / reviewers
Three months	Guideline circulated for the first time as per the process above
Three to one month	Guideline presented to any relevant Network meetings/ subgroups for comment
Two months	Any comments received acted on and final draft written
One month	Final draft circulated
Two weeks	Final draft shared with Governance agenda
Following ratification at Governance meeting	
Within two weeks	Final version of guideline to be saved in pdf format and uploaded to website (if website not available, guidelines to be uploaded to NHS Futures platform)

Reviewing the SOP

This SOP will be presented at Governance for ratification. It will be updated and reviewed by the Network a minimum of every three years. If any new information should come to light before this time, then it may need to be revised sooner.

Version Control (add when final draft agreed and ready for ratification):

Version	Date	Details	Author(s)	Comments
Draft 1	13.09.22	First draft	CR & EG	
Draft 1.1	19.10.22	Amended after feedback received	CR & EG	Ratified at Nov 22 Governance
Review Date:	November 2025			