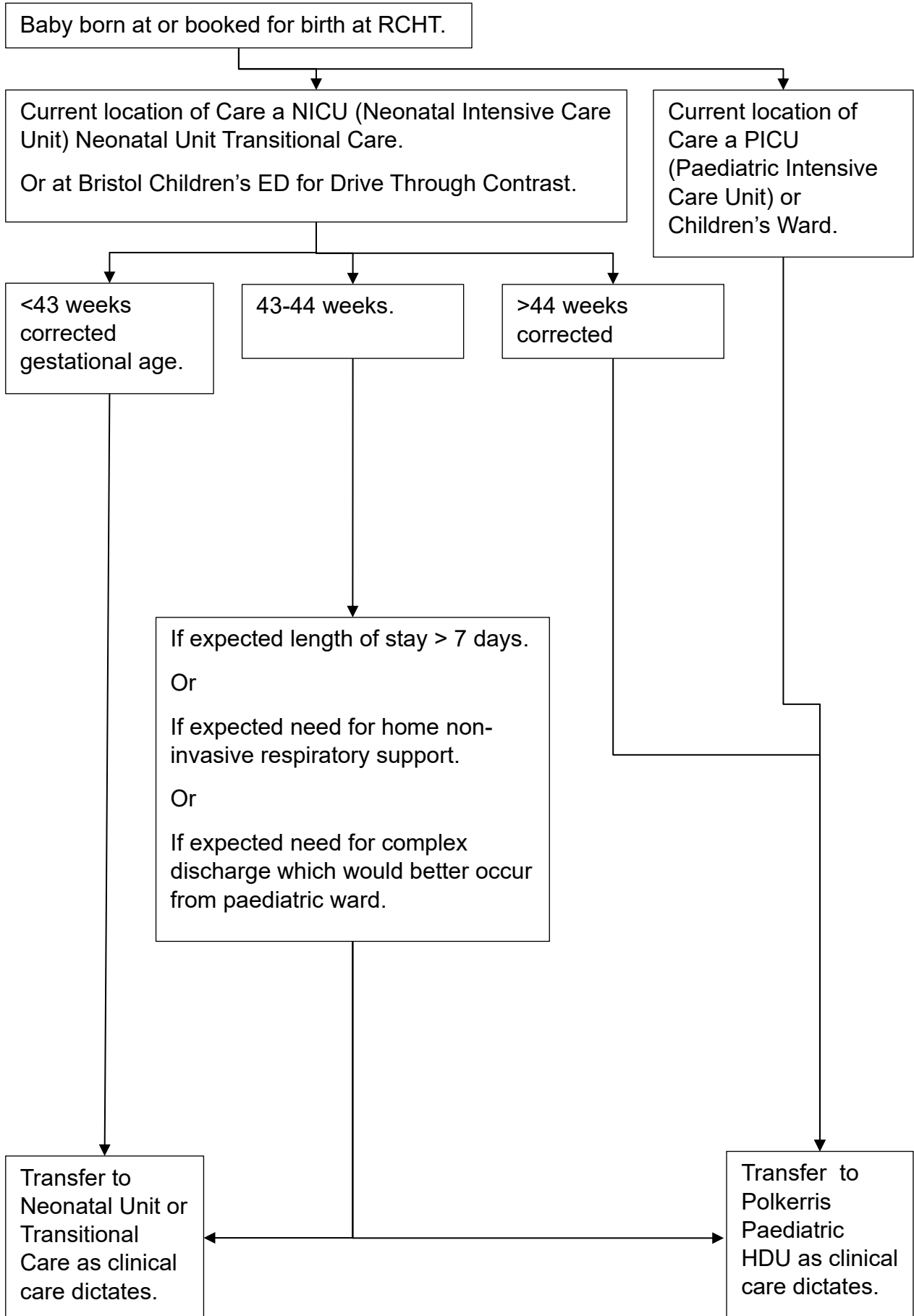


Repatriation Neonatal Clinical Guideline

V1.0

December 2025

Summary



1. Aim/Purpose of this Guideline

To support the repatriation of neonates who have received care at another unit to the correct care location.

Data Protection Act 2018 (UK General Data Protection Regulation – GDPR) Legislation.

The Trust has a duty under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team.

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2. The Guidance

- 2.1. Some Neonates will have care delivered in a location outside of Cornwall due to either capacity, unexpected delivery elsewhere, or needing intervention or a level of care not available at RCHT (Royal Cornwall Hospital Trust). The expectation for most babies is that once appropriate for care at RCH, that these babies are repatriated. The flowchart which forms the guidance outlines the expected pathway for these babies, defining their expected location of care.
- 2.2. Babies who have had care at a non-NICU/LNU (Local Neonatal Unit) location e.g. Bristol Children's Hospital or PICU should have their onward care at RCHT in a paediatric ward due to infection control concerns
- 2.3. Babies who have had all of their care at a NICU/LNU, and who are less than 44 weeks CGA (Corrected Gestational Age) should have their onward care at RCHT in the Neonatal Unit or Wheal Fortune Ward.
- 2.4. Babies who are older than 44 weeks should have their onward care at RCHT in a paediatric ward, in line with the Neonatal Service Specification
- 2.5. Babies approaching 44 weeks, who may remain inpatient beyond 44 weeks could be considered for either location. Decision will need to consider the clinical status and the relative needs of the patient and services.

3. Monitoring compliance and effectiveness

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	Compliance with policy/key changes to practice.
Lead	Neonatal Guidelines lead.
Tool	Adherence to guidelines will be monitored as part of the ongoing audit process on a Word or Excel template.
Frequency	As dictated by audit findings.
Reporting arrangements	Neonatal Audit and Guidelines meeting.
Acting on recommendations and Lead(s)	Ward Managers/Matron/Consultants/CD(Clinical Director).
Change in practice and lessons to be shared	Required changes to practice will be identified and actioned within three months, immediately if required. A lead member of the team will be identified to take each change forward where appropriate. Lessons will be shared with all the relevant staff/stakeholders.

4. Equality and Diversity

- 4.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the [Equality Diversity And Inclusion Policy](#) or the [Equality and Diversity website](#).
- 4.2. The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Information Category	Detailed Information
Document Title:	Repatriation Neonatal Clinical Guideline V1.0
This document replaces (exact title of previous version):	New Document
Date Issued/Approved:	December 2025
Date Valid From:	December 2025
Date Valid To:	December 2028
Author/Owner:	Dr. Chris Bell; Neonatal Consultant
Contact details:	01872 252667
Brief summary of contents:	Outlines repatriation process for babies returning to RCHT who may be suitable for care on NNU.
Suggested Keywords:	Repatriation, Neonatal Unit.
Target Audience:	RCHT: Yes CFT: No CIOS ICB: No
Executive Director responsible for Policy:	Chief Medical Officer
Approval route for consultation and ratification:	Neonatal Audit and Guidelines Group
Manager confirming approval processes:	Caroline Chappell
Name of Governance Lead confirming consultation and ratification:	Michael Cross
Links to key external standards:	Southwest Neonatal Repatriation Policy https://uhbw.mystaffapp.org/16432/document_view.pdf .
Related Documents:	None required
Training Need Identified:	No

Information Category	Detailed Information
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
Document Library Folder/Sub Folder:	Clinical/Neonatal

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
August 2025	V1.0	Initial issue.	Dr. Chris Bell; Neonatal Consultant

All or part of this document can be released under the Freedom of Information Act 2000.

All Policies, Strategies and Operating Procedures, including Business Plans, are to be kept for the lifetime of the organisation plus 6 years.

This document is only valid on the day of printing.

Controlled Document.

This document has been created following the Royal Cornwall Hospitals NHS Trust [The Policy on Policies \(Development and Management of Knowledge Procedural and Web Documents Policy\)](#). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance, please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity, and Inclusion Team
rcht.inclusion@nhs.net

Information Category	Detailed Information
Name of the strategy/policy/proposal/service function to be assessed:	Repatriation Neonatal Policy V1.0
Department and Service Area:	Neonatal
Is this a new or existing document?	New
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	Neonatal Audit and Guidelines Group
Contact details:	01872 252667

Information Category	Detailed Information
1. Policy Aim - Who is the Policy aimed at? (The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)	Neonatal Staff involved in repatriation of neonates to RCHT.
2. Policy Objectives	To ensure clarity of process, and alignment with network standards
3. Policy Intended Outcomes	To improve the well-being of patients by offering the appropriate management of patients.
4. How will you measure each outcome?	Audit/multidisciplinary team weekly discussion/incidents/risk management.
5. Who is intended to benefit from the policy?	Patients.

Information Category	Detailed Information
6a. Who did you consult with? (Please select Yes or No for each category)	<ul style="list-style-type: none"> • Workforce: Yes • Patients/visitors: No • Local groups/system partners: No • External organisations: No • Other: No
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/groups: Neonatal Audit and Guidelines Group.
6c. What was the outcome of the consultation?	Approved.
6d. Have you used any of the following to assist your assessment?	National or local statistics, audits, activity reports, process maps, complaints, staff, or patient surveys: No.

7. The Impact

Following consultation with key groups, has a negative impact been identified for any protected characteristic? Please note that a rationale is required for each one.

Where a negative impact is identified without rationale, the key groups will need to be consulted again.

Protected Characteristic	(Yes or No)	Rationale
Age	No	
Sex (male or female)	No	
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No	
Race	No	Any information provided should be in an accessible format for the parent/carer/patient's needs- i.e., available in different languages if required/access to an interpreter if required.

Protected Characteristic	(Yes or No)	Rationale
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	No	Those parent/carer/patients with any identified additional needs will be referred for additional support as appropriate- i.e., to the Liaison Team or for specialised equipment. Written information will be provided in a format to meet the family's needs e.g., easy read, audio etc.
Religion or belief	No	All staff should be aware of any beliefs that may impact on the decision to treat and should respond accordingly.
Marriage and civil partnership	No	All staff should be aware of any marital arrangements that may have an impact on care (for example: separated parents, domestic abuse).
Pregnancy and maternity	No	
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment: Neonatal Audit and Guidelines Group.

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here:
[Section 2. Full Equality Analysis](#)