

Improving the quality and safety of neonatal care

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1. Background

- Clinical audit highlighted areas for improvement in management of neonatal jaundice and bloodspot screening
- Identified as national outlier in Newborn Bloodspot screening programme

2. Aims

- All cases of neonatal jaundice to be managed in line with NICE guidelines by March 2018
- All eligible neonates to have successful bloodspot screening test within the required timescale by March 2018

3. What we did

Using QI methodology to test and implement:

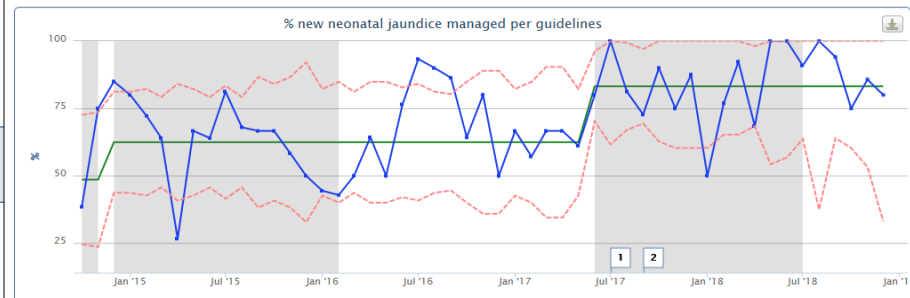
- Real-time report identifying vulnerable neonates, and key information such as weight & gestation
- Automated email prompt system highlighting babies eligible for screening to Ward Managers
- Streamlined admission processes to improve availability of mandatory screening information (e.g. NHS no.)
- Standardisation of guidance and resources for staff
- New intranet 'neonatal hub' and ward folders
- Trust guideline for management of neonatal IV fluids
- Education package: E-learning & Neonatal Practice Educator
- Neonatal care pathway (paper and EPR)

Sustainability planning:

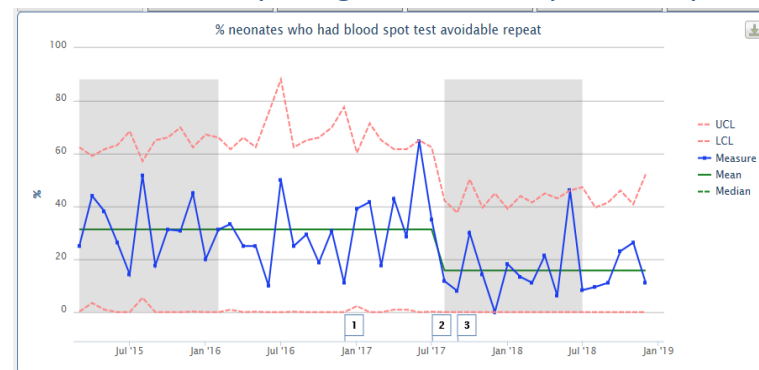
- Ward level data dashboards to enable oversight of quality following project closure

4. Measures for improvement

From 62% to 80% managed in line with jaundice guidelines



From 31% to 11% requiring avoidable repeat sample



From 93% to 98% of bloodspots within day 5-8 timeframe

