

September

MORTALITY learning bulletin

Equipment for Therapeutic Hypothermia

Do you have this? If not, can this be purchased through funding streams e.g. LMNS. The EMNODN can provide some training in terms of use of this equipment to keep staff up to date in units where it won't be used frequently.

Intraosseous Needles

Are these available on your neonatal resuscitation trolleys and do staff know where they are and how to use them. There were two cases presented where they were used and some challenges were identified.

When to call the consultant

Do you have guidance for your junior medical team/nursing team on when and how to call the consultant on call? Are the consultant phone numbers and rota available for those who need them in an emergency?

Parallel Planning

In the rare instance that a baby is moving units to continue palliative/comfort care is there an opportunity for the referring and receiving team to meet the family together either in person or virtually to discuss plans going forward and provide assurance and support for all those involved.

UVC use before an x-ray

To avoid delay in antibiotic administration if a UVC has bled back it can be used for plain 10% dextrose infusion and IV antibiotics while awaiting confirmation of position.

How do you document advice given over the phone?

Do you have a way of documenting advice you have given over the phone to members of the MDT. A unit has instigated a form to record both sides of conversations about patients that happen between staff.

NEWTT2

What newborn early warning score do you use and what escalation tool does it use? Many units have implemented the BAPM endorsed NEWTT2.

Oversight of PNW

Do you have a huddle with your postnatal ward staff? How do you have oversight of babies on the postnatal ward?

GRUNTING

If a baby is grunting - please consider is this baby septic? Due to the NICE guidance there are thankfully less babies who present with sepsis but we need to have an awareness of this as a presenting symptom.

Transition at >44 weeks

Neonatal care progresses to paediatric care once a baby is over 4 weeks corrected gestational age. Does your unit have a pathway for this transition?