Perinatal News

Spring 2017

Update on Growth Assessment Protocol (GAP)

- Assisting evaluation of NHS England Saving Babies Lives Care Bundle
- Additional London Trusts being trained as part of 'DESiGN' study
- E-learning theory and practice modules now exceeding 30,000 users
- GAP will be in 82% of all UK Trusts & Health Boards by end of 2017
  Detailed list of all units on www.perinatal.org.uk/gap-uptake.aspx

SaBiNE shortlisted for 2017 Patient Safety Award

The GAP Team have been shortlisted for the **Saving Babies in North England** project, which engaged the help of 52 designated clinical midwives (photo). It resulted in the reduction in ONS stillbirth rates to their lowest ever levels in each of the three participating NHS regions, and has contributed significantly to the recent, year on year fall in stillbirth rates in England. Further details and full report: www.perinatal.org.uk/gap/SaBiNE.aspx
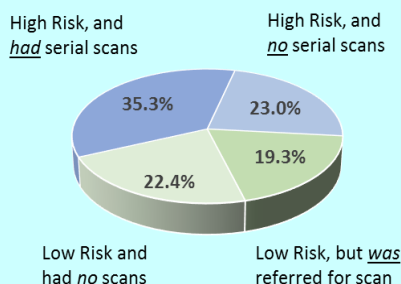

GAP units in the UK
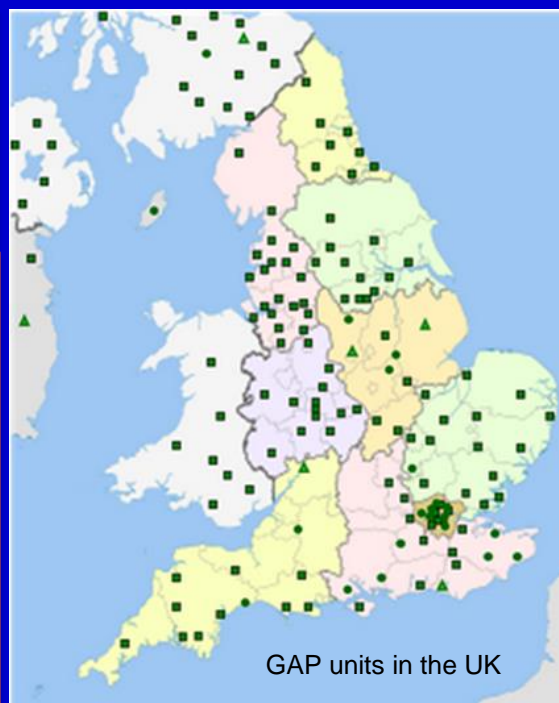
Maintaining the momentum – improving performance

All GAP units are able to monitor their antenatal referral and detection rate of SGA births.

The 'Ten Best' units are now **averaging detection rates of 55%** (SGA <10th centile) which represents a three-fold increase from the pre-GAP baseline (18%). Best unit averages 64%.

The GAP SCORE audit tool can help ascertain the reasons for missed cases. Analysis of the first 1541 cases entered by clinicians in 46 units is summarised in the pie chart ➔

- 58.3% of missed cases were 'high risk'
- 23% of these (=39.4% of all 'high risk' cases) had no serial scans, against the guidelines
- Lack of detection *despite* scan was a feature in (35.3+19.3) = 54.6% of cases
- Average interval between last scan and delivery was 3-4 weeks, which may have contributed to the poor detection rate

High Risk, and *had* serial scans

High Risk, and *no* serial scans

35.3%

23.0%

19.3%

22.4%

Low Risk and had *no* scans

Low Risk, but *was* referred for scan

Congratulations to Donna Southam and Dr Amaju Ikomi from Basildon & Thurrock University Hospitals for winning the East of England Innovation in Patient Care Award !

GAP Plus: linking with Maternity Information Systems

GROW software can now be accessed through several MIS, with the following benefits:

- ✓ Reduced double entry of data for busy clinicians
- ✓ Electronic version of the chart as well as a paper copy
- ✓ Auto-plotting of fundal height and EFW ➔ reduced plotting errors
- ✓ Customised centiles at birth and automated reports of detection rates
- ✓ Phase two: decision support (growth rate; informing when to refer)

National GAP User Forum

Friday 7 July 2017 – Birmingham

- Fetal growth audits and benchmarks
- Local successes and challenges
- New third trimester scan QA tool
- HEE funded ultrasound training
- Hypoglycaemia screening: defining 'SGA'
- Integrating with information systems

Details: www.perinatal.org.uk/diary

Standardised Clinical Outcome Review tool: continuing the national roll-out

SCOR helps to identify substandard care factors, grades avoidability and prompts action plans to implement lessons learnt from perinatal deaths

- CE registered medical device, supporting management of adverse outcome
- Covers the main 'themes' of the NHS England Saving Babies Lives Care Bundle
- Allows upload of files required for clinical review (CTGs, pathology reports)
- Automated reporting enables units to pull own reports on their standard of care
- Aligned with Duty of Candour regulation: parental consent, input & feedback
- Latest roll-out: Northern Ireland Maternal and Child Health (NiMACH) Network

Further information: www.perinatal.org.uk/scor or email scor@perinatal.org.uk

National maternity notes set the standard for information giving and choice
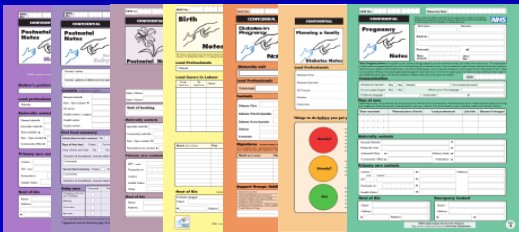
One or more of the Perinatal Institute's suite of maternity notes are in daily use in 60% of NHS Trusts in England. They are being updated regularly with the help of our national maternity notes user group. Recent improvements include:

- Dedicated mental health and well-being page; to help maternity services with early identification of any concerns, and providing care and support
- Postnatal re-admission sheet for the mother following delivery; includes prompts for clinicians to carry out thorough risk assessment. www.preg.info

MiApp standardised e-notes: the paperless version of the hand held maternity record

The Mothers' Information App (MiApp) supports the vision of 'Better Births' and the Maternity Transformation Programme

- Full electronic record for pregnancy, birth & postnatal care
- Follows principles of hand held maternity notes
- Promotes multi-professional team working
- Supports Duty of Candour regulation & full engagement
- Provides latest evidence and guidelines to support choice and personalised care plans
- Able to link seamlessly with PAS, MIS and GP systems
- Supports submission of data for Payment Pathway, MSDS, Friends & Family Test and Maternity Safety Thermometer
- Pregnancy module due for release in late 2017

Mi-App puts the mother in control of her record

MiApp user group seeking members

We are looking for enthusiastic clinicians and mothers to be part of our MiApp user group, for feedback during the final stages of development.

If you are able to commit to once-a-month, 1 hour on-line meetings, please contact the MiApp team: miapp@perinatal.org.uk

GROW International: towards the universal, individually customised growth chart

Databases received | GROW Centiles in use | GROW Charts in use

- Customised coefficients have now been derived from 'low risk' pregnancy data from 20 countries, including 2.8 Million births
- Free individual and bulk centile calculators are currently in use by clinicians and research groups in 33 countries
- Training and clinical implementation has been undertaken to date for health services in 18 countries
- The new universal GROW chart, due for release during 2017, will have functionality to adjust for over 50 ethnic groups

---

Queen's Award 2016

Patient Safety AWARD 2013 — Clinical Leadership
Patient Safety + CARE AWARD 2014 — Education & Training
Patient Safety AWARD 2015 — IT & Technology
bmj award 2015 — Clinical Leadership
Enterprise - Innovation