

DOI: 10.1111/1471-0528.21\_17521 www.bjog.org

**Abstracts** 

## **EP.0150**

Delivering small babies at term: 5 year progress towards national targets

Emily Butler; Hanna Ellson; Oliver Hugh; Jason Gardosi

Perinatal Institute, Birmingham, UK

**Objective:** An essential component of fetal growth surveillance is the timely delivery of pregnancies at risk due to being small for gestational age (SGA). At term, the protocols of the UK GAP program and the NHS England 'Saving Babies Lives' care bundle is for SGA <3 centile babies to be delivered before 38+0 weeks, and for babies <10 centile to be delivered before 40+0 weeks. We set out to assess the performance of this quality indicator in English hospitals over the last 5 years.

**Design:** Prospective cohort study.

**Methods:** Performance is audited by the Power BI functionality of the GROW software in all hospitals in the GAP program where clinicians can access their respective unit's data 'live'. Complete, routinely collected audit data was available from 65 hospitals in England over the 5 year study period (January 2018- December 2022). We calculated for each year the rates of SGA babies and the proportion of <3 centile babies that were delivered before 38 + 0 weeks and <10th centile before 40 + 0 weeks, respectively. Significance in trends was tested using a  $\chi^2$  trend test.

**Results:** There were in total 1,232,729 deliveries over the 5 year period, with an average SGA rate of 13.6% (<10th centile) and 4.7% (<3rd centile). The average detection rate increased from 39.1 to 42.2% for SGA <10, and from 56.7 to 61.0% for SGA <3. The proportion (%) of SGA<3 centile babies delivered by 38+0 weeks over the 5 years was 47.3, 46.8, 47.7, 49.3 and 50.3%, representing significant improvement (p = 0.01). The proportion of babies <10 centile delivered by 40+0 weeks was 68.3, 69.2, 69.6, 71.9, 74.0%, which also represented significant improvement (p < 0.01).

**Conclusion:** Despite the intervening effect of COVID on maternity services, there has been a gradual increase in detection and timely delivery of SGA babies which was likely to have contributed to stillbirth prevention. Rolling audit at unit level and benchmarking of performance will help facilitate further improvements.