



Public Health
England

**Screening Quality Assurance visit
report**
NHS Antenatal and Newborn Screening
Programmes
Kingston Hospital NHS Foundation Trust

19 September 2018

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About PHE Screening

Screening identifies apparently healthy people who may be at increased risk of a disease or condition, enabling earlier treatment or better informed decisions. National population screening programmes are implemented in the NHS on the advice of the UK National Screening Committee (UK NSC), which makes independent, evidence-based recommendations to ministers in the 4 UK countries.

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Executive summary

Antenatal and newborn screening quality assurance covers the identification of eligible women and babies and the relevant tests undertaken by each screening programme. It includes acknowledgement of the referral by treatment or diagnostic services as appropriate (for individuals or families with screen-positive results), or the completion of the screening pathway.

The findings in this report relate to the quality assurance visit of the Kingston Hospital NHS Foundation Trust screening service held on 19 September 2018.

Quality assurance purpose and approach

Quality assurance (QA) aims to maintain national standards and promote continuous improvement in antenatal and newborn (ANNB) screening. This is to make sure that all eligible people have access to a consistent high quality service wherever they live.

QA visits are carried out by the PHE screening quality assurance service (SQAS).

The evidence for this report comes from the following sources:

- routine monitoring data collected by NHS screening programmes
- data and reports from external organisations
- evidence submitted by the providers, commissioners and external organisations
- information shared with the London SQAS as part of the visit process
- information collected during additional interviews on 18 September 2018 with:
 - Your Healthcare: South West London (SWL) Child Health Information Service (CHIS)
 - South West London Pathology laboratories (SWLP)
 - NHS England London (NHS EL)

Local screening service

Kingston Hospital NHS Foundation Trust is situated in south west London and provides care to a local population of 350,000 people across Kingston, Richmond and the surrounding areas.

The Trust provides the full range of antenatal, intrapartum and postnatal care and has a level 2 neonatal unit (NNU). From April 2016 to March 2017 there were 6,852 women booked for maternity care and 5,591 births were recorded.

The Trust has close links with St George's University Hospitals NHS Foundation Trust in Tooting with referral pathways in place for fetal medicine tertiary referrals, sickle cell and thalassaemia (SCT) services and level 3 neonatal intensive care.

External laboratory services used for the ANNB screening programmes at the Trust include:

- the Wolfson Institute of Preventive Medicine which provides first trimester screening for Down's syndrome, Edwards' syndrome and Patau's syndrome and second trimester screening for Down's syndrome
- SWLP provides infectious diseases in pregnancy screening (IDPS) and SCT screening
- South West Thames laboratory at Epsom and St Helier University Hospitals NHS Trust provides newborn bloodspot screening (NBS)

Newborn hearing screening services are provided by SWL newborn hearing screening programme (NHSP) at Hounslow and Richmond Community Healthcare NHS Trust.

Child health information services (CHIS) are provided by the SWL CHIS which is part of Your Healthcare.

Findings

This was the first ANNB screening QA visit to Kingston Hospital NHS Foundation Trust. The organisational culture is inclusive and woman centred with a strong governance structure across the screening pathways. The screening services are provided by an enthusiastic and committed team.

Immediate concerns

The QA visit team identified no immediate concerns.

High priority

The QA visit team identified 9 high priority recommendations that have been summarised below:

- the screening incidents standard operating procedure does not reference all teams involved in the screening pathways
- some members of the screening team have not completed the screening eLearning modules
- antenatal cohort tracking processes and resilience within the SCT counselling and screening support sonography roles need strengthening

- failsafe lists for positive results for SCT and IDPS are needed to make sure women are referred in a timely manner
- FASP pathways and guidelines for the combined and quadruple tests are outside of national programme guidance
- some patient information leaflets require updating

Shared learning

The QA visit team identified several areas of practice for sharing, including:

- a user-friendly, secure, well-utilised online facility for antenatal care referrals for women and GP's
- service users are regularly invited to speak about their experience of ANNB screening at the mandatory training day for midwives and other staff
- the Trust is participating in a London wide SCT audit led by NHS England London
- consistent positive user feedback on the efficiency, timeliness and friendliness of the SWL newborn hearing screening service

Recommendations

The following recommendations are for the provider to action unless otherwise stated.

Governance and leadership

No.	Recommendation	Reference	Timescale	Priority	Evidence required
1	Revise the screening incidents standard operating procedure (SOP) to include all screening programmes and teams involved in the screening pathways	1, 4, 5	6 months	High	Updated SOP approved at the Trust screening steering group (TSSG) prior to Trust ratification. Confirmation to TSSG that all staff involved in screening are trained in screening incident reporting.
2	Make sure the FASP pathway for Down's syndrome, Edwards' syndrome and Patau's syndrome screening complies with national guidance	1, 10, 11, 12	6 months	High	Revised pathway presented at TSSG

No.	Recommendation	Reference	Timescale	Priority	Evidence required
3	Update the key performance indicator (KPI) SOP to include the new KPIs introduced for 2018/2019	3	6 months	Standard	Updated SOP approved at TSSG
4	Include antenatal and newborn (ANNB) screening in the maternity audit schedule	1	12 months	Standard	Maternity screening audit schedule submitted to TSSG Audits and action plans submitted to TSSG
5	Complete a user survey to gather views about the antenatal and newborn pathways	1	12 months	Standard	Completed survey with findings and action plan submitted to TSSG

Infrastructure

No.	Recommendation	Reference	Timescale	Priority	Evidence required
6	Make sure all screening midwives complete the national ANNB screening e-Learning modules	1	3 months	High	Confirmation at TSSG that all screening midwives have completed eLearning modules and assessment
7	Make sure there is resilience within the SCT counselling screening pathway	1	6 months	Standard	Present a completed risk assessment and action plan to the TSSG

No.	Recommendation	Reference	Timescale	Priority	Evidence required
8	Identify a deputy screening support sonographer	1, 11	3 months	High	Confirmation to TSSG that there is a deputy SSS
9	Make sure sufficient staff are trained to provide resilience in creating the databases for the antenatal electronic cohort tracking process	1, 6	6 months	High	Confirmation to TSSG of number of staff trained

Identification of cohort – antenatal

No.	Recommendation	Reference	Timescale	Priority	Evidence required
10	Implement a weekly process for tracking each woman through the screening pathway to make sure screening is offered, screening tests are performed and results are received	1, 6	6 months	Standard	Standard operating procedure submitted to TSSG with roles and responsibilities defined

Identification of cohort – newborn

No.	Recommendation	Reference	Timescale	Priority	Evidence required
	No recommendations				

Invitation, access and uptake

No.	Recommendation	Reference	Timescale	Priority	Evidence required
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No.	Recommendation	Reference	Timescale	Priority	Evidence required
11	Make sure patient information resources given to women and the hyperlinks displayed on the Trust's website are up to date and accurate	1	6 months	High	Present resources to the TSSG for approval Confirmation to the TSSG that hyperlinks have been updated

Sickle cell and thalassaemia screening

No.	Recommendation	Reference	Timescale	Priority	Evidence required
	See recommendation 7				
12	Implement a tracking system for samples sent for DNA analysis to the reference laboratory	7	6 months	Standard	SOP submitted to the TSSG
13	Implement and monitor an action plan to meet the acceptable level for KPI ST3	3	12 months	Standard	Action plan presented to TSSG Implementation of eFOQ confirmed to TSSG
14	Implement a weekly failsafe list of all positive antenatal results and father results	1	3 months	High	Confirmation to the TSSG that a documented process is in place

Infectious diseases in pregnancy screening

No.	Recommendation	Reference	Timescale	Priority	Evidence required
15	Implement a tracking system for confirmatory samples sent to the reference laboratory to make sure the sample reaches the laboratory and a result is issued	8, 9	6 months	Standard	SOP submitted to the TSSG
16	Implement a weekly failsafe list of all positive antenatal results	1	3 months	High	Confirmation to the TSSG that a documented process is in place

Fetal anomaly screening

No.	Recommendation	Reference	Timescale	Priority	Evidence required
	See recommendation 2				
	See recommendation 8				
	See recommendation 11				
17	Address the Astraia software downtime issue	1, 10, 11	3 months	High	<p>Downtime failsafe SOP presented to TSSG</p> <p>Present an action plan to the TSSG</p> <p>Provide updates to the TSSG and confirmation that a solution is in place</p>

Newborn hearing screening

No.	Recommendation	Reference	Timescale	Priority	Evidence required
	No recommendations				

Newborn and infant physical examination

No.	Recommendation	Reference	Timescale	Priority	Evidence required
	No recommendations				

Newborn blood spot screening

No.	Recommendation	Reference	Timescale	Priority	Evidence required
18	Make sure staff in the neonatal unit have access to the Northgate NBS failsafe system and there is cover each day	1	6 months	Standard	Confirmation to TSSG that a sufficient number of staff in NNU have access to Northgate

Next steps

The screening service provider is responsible for developing an action plan in collaboration with the commissioners to complete the recommendations contained within this report.

SQAS will work with commissioners to monitor activity and progress in response to the recommendations made for a period of 12 months after the report is published. After this point, SQAS will send a letter to the provider and the commissioners summarising the progress made and will outline any further action(s) needed.

Appendix A: References

1. Section 7a service specification no 15 to 21
www.england.nhs.uk/commissioning/pub-hlth-res
2. NHS population screening standards www.gov.uk/government/collections/nhs-population-screening-programme-standards
3. Key Performance Indicators NHS screening programmes Antenatal, newborn, young person and adult
www.gov.uk/government/publications/nhs-population-screening-reporting-data-definitions
4. Managing Safety Incidents in NHS Screening Programmes
www.gov.uk/government/publications/managing-safety-incidents-in-nhs-screening-programmes
5. NHS England Serious Incident Framework - Supporting learning to prevent recurrence (March 2015)
www.england.nhs.uk/patientsafety/wp-content/uploads/sites/32/2015/04/serious-incident-framwrk-upd2.pdf
6. NHS population screening: failsafe procedures
www.gov.uk/government/collections/nhs-population-screening-failsafe-procedures
7. NHS Sickle cell and thalassaemia screening handbook
www.gov.uk/government/publications/handbook-for-sickle-cell-and-thalassaemia-screening
8. NHS Sickle Cell and Thalassaemia Screening Programme: Handbook for antenatal laboratories
www.gov.uk/government/uploads/system/uploads/attachment_data/file/656094/Antenatal_Laboratory_Handbook.pdf
9. NHS Screening Programme Infectious Diseases in Pregnancy Screening Programme Handbook for Laboratories 2016-17
www.gov.uk/government/publications/infectious-diseases-in-pregnancy-screening-programme-laboratory-handbook
10. NHS Screening Programme Infectious Diseases in Pregnancy Screening Programme Handbook 2016 to 2017 published 27 July 2016

www.gov.uk/government/uploads/system/uploads/attachment_data/file/539835/NHS_Infectious_Diseases_in_Pregnancy_Screening_Programme_Handbook_2016_2017_with_gateway_number.pdf

11. NHS Fetal Anomaly Screening Programme Handbook for ultrasound practitioners (April 2015)
www.gov.uk/government/uploads/system/uploads/attachment_data/file/443865/FASP_ultrasound_handbook_July_2015_090715.pdf
12. Fetal Anomaly Screening Programme - Programme handbook June 2015
www.gov.uk/government/uploads/system/uploads/attachment_data/file/456654/FASP_programme_handbook_August_2015.pdf
13. NHS Fetal Anomaly Screening Programme Down's, Edwards' and Patau's syndromes screening handbook for laboratories April 2015
www.gov.uk/government/uploads/system/uploads/attachment_data/file/420693/FASP_lab_handbook_April_2015_final.pdf
14. Newborn hearing screening programme (NHSP) operational guidance
www.gov.uk/government/publications/newborn-hearing-screening-programme-nhsp-operational-guidance
15. Newborn and infant physical examination: programme handbook
www.gov.uk/government/publications/newborn-and-infant-physical-examination-programme-handbook