

## Free online service helps first-time parents

A new interactive website to help parents and carers keep their babies healthy, happy and safe has been rolled out nationally today by the Department of Health. NHS Baby LifeCheck is designed to provide information and advice to mums, dads and carers of babies aged five to eight months.

www.babylifecheck.co.uk guides parents and carers through a set of simple multiple choice questions, then offers advice and reassurance on making the best decisions for their child. It covers topics including: development, talking and playing, feeding, healthy teeth, safety, sleep routine, immunisations and being a parent.

Created in consultation with parents, NHS Baby LifeCheck recognises that being the mum or dad of a young baby can sometimes be a challenge. It offers top tips, helpful videos and details of organisations which can support people across a range of issues – from weaning worries to feeling down or lonely.

Health Minister Ann Keen said: “NHS Baby LifeCheck is a reliable source of non-

judgemental, online information for parents and carers. It provides reassurance and advice about their baby’s health development, happiness and safety. It’s an easy way for parents to find out if they are doing the best thing for their child, whilst also supporting them to set goals or find further help to make improvements for themselves and their baby.”

First-time mum, Dina Yacob, who has used NHS Baby LifeCheck said: “I completed the NHS Baby LifeCheck for my seven month old son. It really reassured me that I am doing the right things for my baby. It also reminds you to get on with some things – for example introducing a cup instead of a bottle for drinks – which I knew I would have to do, but had forgotten in the rush of everything else.”

NHS choices

BabyLifeCheck



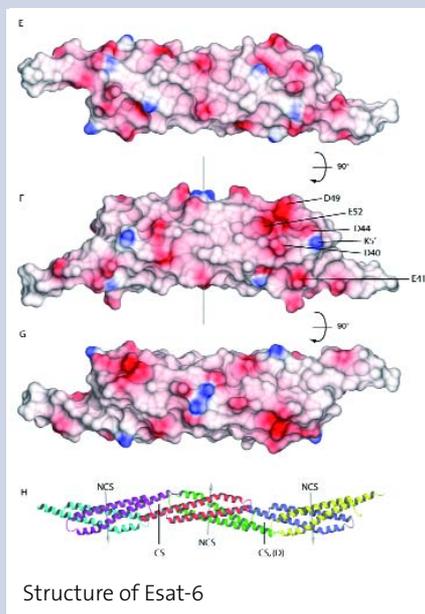
Nicola Stenning, a health visitor in Hammersmith and Fulham, said: “NHS Baby LifeCheck has been tested with parents to ensure it provides them with tailored information while giving reassurance. Becoming a parent for the first time can come with the worry of whether you are doing it right; this free service will help parents to find out. It will be a useful source of information and guidance for parents of babies between five to eight months, at a time when they receive less frequent visits from health professionals.”

## Inaugural poster presentation award at Reason 2009

For the first time this year a poster competition, sponsored by Fisher & Paykel, was held at the recent Reason meeting at Warwick University. The aim was to increase participation in the Reason conference and the substantial prize on offer from Fisher & Paykel should ensure that in time it will become one of the most prestigious poster competitions in the neonatal field where people will want to showcase their work.

There were eight posters submitted which was a good response and they generated a lot of interest at the conference. The judges, Jane Hawdon, Kevin Ives and Ben Stenson, commented that many of the posters were of a high standard. Indeed, there was a three-way tie after the first round of voting. The eventual winner was a team from Birmingham Women's Hospital, and the School of Biosciences at the University of Birmingham, headed by Dr Mark Anthony. The other team members included Anshuman Shukla, Nicola Attwood, Rebekah Whitehead, Debasis Biswas, Robin May, Melody Neely, Tony Lamas, Mark Pallen and Scott White.

Nicholas Connolly, National Sales



Manager of Fisher & Paykel Healthcare Limited commented “All the posters were of an exceptional standard this year and we even had to add another judge to split the scores of the top three posters. We anticipate the competition to be even more fierce next year and that this will become another key “reason” for selecting Reason as the neonatal conference of choice for

2010 and beyond”.

The winning poster described the work of the team in investigating how Group B Streptococcus (GBS) evades host immunity. Like *Staphylococcus aureus* and *Mycobacterium tuberculosis*, GBS was found to secrete a form of Esat-6 (Early secreted antigenic target, 6 kDa) which binds Toll-Like Receptor 2 (TLR2) and blocks innate immune recognition of GBS. The team were able to determine the structure and function of Esat-6 GBS. Esat-6 TB, Esat-6 SA and Esat-6 GBS have only very limited sequence similarity, but all three proteins, and synthetic peptides representing their C-termini, act by impeding TLR2 signalling, but probably do so by binding to different aspects of the TLR2 extracellular domain.

Dr Mark Anthony was presented with a cheque for £1500, which he is planning to put towards further research on this topic. The poster competition will be repeated at next year's Reason conference. Next year's conference will be held on 4-6 July 2010, so put the date in your diary and start planning to submit your poster now!

## Newborn infant examination to become computerised

The NHS Newborn and Infant Physical Examination Programme (NIPE) has announced the appointment of Northgate Public Services to assist in the development and implementation of a national IT system. It will capture the results of the physical examinations, making it possible to monitor and maintain standards.

Every newborn baby is offered a top-to-toe physical examination shortly after birth and again at 6 to 8 weeks of age. These examinations have been carried out routinely by healthcare professionals in England for more than twenty years, but there is considerable variation in the way the examinations are documented. Paper-based systems are mostly used making it difficult for sites to audit their performance, assess referral rates and follow-up treatment outcomes. An IT system that interfaces with both maternity and GP services will facilitate simple and accurate data capture.

Programme Director, Professor Adrian Davis said: "A national NIPE IT system will enable practitioners to drive quality and improve standards and that is good news for babies and their parents."

The IT system will be rolled out across England by 2012.



## Queens Award for SLE

On Thursday 23rd July 2009 in the presence of The Worshipful The Mayor of Croydon Councillor Margaret Mead, the Deputy Lord Lieutenant for Croydon, Colonel Ian McRobbie, OBE, TD, DL presented Mr Bernard Nelligan, Managing Director of SLE Ltd with the 'Queens Award for Enterprise: Export 2009'.

To qualify for the export award, SLE had to show over six years of export sales

growth. SLE, founded by Denis Nelligan, has international distributors in more than 70 countries enabling healthcare workers throughout the world to deliver life saving care to vulnerable infants. One of their most popular products is the SLE5000 high frequency oscillator ventilator.

Only 26 awards have been given to companies in the London area this year, so SLE are to be congratulated.

## Sands comments on stillbirth statistics in CEMACH report

Sands, the stillbirth and neonatal death charity, notes the latest CEMACH Perinatal Mortality Report for 2007 published on 24 June, which says that for the first time since 2000 there has been a significant fall in the stillbirth rate to 5.2 per 1,000 births, but warns that these statistics must be taken in context.

The reported decline has been measured from an alarming but brief spike in stillbirths during 2002 to 2004, when the rate increased significantly from 5.4 to 5.7 per 1,000 births. If we look back over ten years rather than just the last three, the story is rather different. For the past decade the stillbirth rate has hovered around 5.3/5.4 per 1,000 births. In 2007 we are back to the same rate as we had in 1999. This suggests that the 2007 figures offer no room for complacency.

The 2007 stillbirth rate still equates to over 4,000 babies stillborn every year – that's 11 babies dying every single day in the UK, or almost one in every 200 babies.

Sands strongly believes that more

urgently needs to be done to make a serious impact on the unacceptable levels of stillbirth in the UK and is calling for better monitoring during antenatal care, more midwives with greater resources to support them and more research to improve our understanding of why so many perfectly normal babies die.

Sands is also extremely concerned by CEMACH's findings regarding intrapartum-related deaths where there has been no statistically significant change in the rates of babies dying during labour for almost a decade.

Three audits carried out in the UK showed that between 40-75% of cases were found to have significant or major suboptimal care factors which may have affected the final outcome. Sands warmly welcomes CEMACH's proposed national confidential enquiry into intrapartum-related stillbirths and neonatal deaths occurring at term and hopes such an enquiry will again focus attention on action to stop the unnecessary and

tragic deaths of babies in labour.

CEMACH reports that in 2007 uptake of post-mortems for stillbirths and very young babies has improved a little from previous years but remains low – (45% for stillbirths; 21.3% for neonatal deaths), although more parents are now being asked for consent to a post mortem.

In a Sands survey of parents we found that parental consent is discouraged when there are long delays in getting results due to the severe shortage of specialist pathologists in the UK. We need double the number of perinatal pathologists if we are to provide an adequate service at even the current low rates of post mortem up-take.

There is also evidence that consent rates improve when the consent is sought by a senior member of the maternity team. We believe more needs to be done to address the poor consent rates for perinatal post mortems, which results in the loss of valuable information about why babies are dying.