



### Managing the risk under the spotlight at Bristol

Picturesque Tortworth Court just outside Bristol was the venue for the *What Next? Manage the Risk* conference, organised by Southmead Hospital and supported by Inspiration Healthcare.

The majority of delegates arrived on Thursday, May 13, with time to make the most of the hotel's spa facilities before joining exhibitors, speakers and organisers for an excellent meal where the wine flowed and conversation on occasion reached near-deafening levels.

Everyone was up bright and early, however, for the conference to begin in earnest. A packed hall heard interesting talks on the theme of risk management with speakers using quizzes, personal experience and the occasional sobering statistic to get their audience thinking. Topics covered included Clinical risk - pushing the top five off the pedestal; Infection, prevention and control – zero tolerance to what?; Education – how do we get it into their heads?; Funding vs capacity – balancing the give and take; Families – when reality hits; and Thinking differently – critical to managing risk.

Lunch in the library gave delegates a chance to chat with colleagues and visit exhibitors in the marquee before returning for more talks and round-table discussions which were regularly encouraged to get lively debate going across the floor and give delegates plenty to think about on their way home.

### BAPEN welcomes nutrition enquiry report

The British Association for Parenteral and Enteral Nutrition (BAPEN) has welcomed a report by the National Confidential Enquiry into Patient Outcome and Death (NCEPOD) which suggests that many hospitals are currently delivering unsafe artificial nutrition to the most vulnerable babies.

According to BAPEN Chair Dr Mike Stroud, the report confirms what it and other organisations such as NICE have been claiming for some time – that standards in nutritional care must be improved to ensure all patients receive safe and equal treatment from staff who are appropriately trained and supervised.

Parenteral nutrition is an invasive and complex procedure which requires input from a multidisciplinary team to deliver the specialist training, supervision and monitoring needed to avoid the inappropriate use and avoidable complications identified in the NCEPOD 'A Mixed Bag' report.

BAPEN recommends that all acute hospitals should have multidisciplinary Nutrition Support Teams in place and that an audit of all patients on parenteral nutrition should be performed. BAPEN's Malnutrition Matters Toolkit makes four key recommendations:

- Screening to identify nutritional care needs followed by detailed assessment.
- Care pathways in place with appropriate monitoring.
- Training for all staff to appropriate levels.
- Management structures in place to support the delivery of safe nutritional care of the highest quality.

### Incubator covers donated to neonatal unit

Special care baby charity Bliss and Mothercare have donated specially designed incubator covers to the SCBU at Chelsea and Westminster Hospital, London. With the help of the neonatal unit at Southmead Hospital in Bristol, 450 covers have been produced and distributed around the UK to keep noise and light out of the incubator and ensure the best comfort for the baby.

Bliss Chief Executive Andy Cole said: "We are very grateful to Mothercare for their kind donation as they are helping us in our aim to ensure the best possible care for sick and premature babies."

Liz Day, Parenting Consultant at Mothercare, said: "We are delighted to be working with Bliss and helping units across

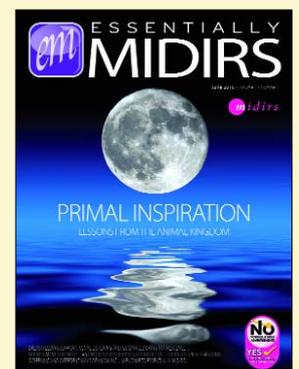


Pictured are Jane Dulieu Povey, Joanne Tilley (Mothercare), Andy Cole (Bliss) and Alex Mancini (Chelsea and Westminster Hospital).

the UK by providing free incubator covers. It's a privilege to be able to help and make the babies' stay in hospital a little more comfortable. This has been a way to thank the many nurses who provided Mothercare with suggestions during the time we spent designing our range of premature baby clothing twelve months ago."

### MIDIRS announces arrival of new maternity care journal

A new monthly publication aimed at those working with women, babies and their families has been launched by UK maternity charity, MIDIRS. *Essentially MIDIRS*, edited by well known midwife, author, teacher and researcher Sara Wickham, offers maternity care workers an affordable, easily accessible tool to support them in their practice, professional development and studies. The first issue is available now and can be sourced by visiting [www.midirs.org/em](http://www.midirs.org/em).



Visit [www.midirs.org/em](http://www.midirs.org/em), email [enquiries@midirs.org](mailto:enquiries@midirs.org) or telephone 0800 581009.

## NICE proffers advice on neonatal jaundice

NHS healthcare professionals who look after newborn babies are being called on to adopt different ways of assessing and treating cases of jaundice, one of the most common conditions needing medical attention in newborn babies.

Although generally harmless, some cases of severe jaundice can result in a serious neurological condition called kernicterus which is associated with long-term problems such as cerebral palsy, hearing loss and visual and dental problems. In other cases, jaundice may indicate serious underlying liver disease which requires urgent specialist care.

A new guideline published by the National Institute for Health and Clinical Excellence (NICE), recommends alterations to current NHS practice to recognise and treat neonatal jaundice effectively and avoid problems like kernicterus. NICE has also published a range of practical tools to help facilitate these recommended changes, available at [www.nice.org.uk](http://www.nice.org.uk).

Around 80% of premature babies and 60% of babies born at full term develop

jaundice in their first week of life. Despite this, clinical recognition of the severity of the jaundice can be difficult, especially in babies with darker skin tones, and uncertainty currently exists about when and how to treat it.

It is recommended that staff:

- Examine all babies for jaundice in the first 72 hours.
- Measure and record the serum bilirubin level within two hours for all babies in the first 24 hours of life with suspected or obvious jaundice.
- Use a transcutaneous bilirubinometer (TBM) to measure newborns' bilirubin level. If a TBM is not available, or if it indicates a bilirubin level greater than 250 micromol/L, check the result by measuring the baby's serum bilirubin.
- Use phototherapy to treat jaundice or double volume exchange transfusion to treat babies with serious jaundice.
- Use intravenous immunoglobulin alongside continuous multiple phototherapy in certain cases.
- Offer parents or carers information about neonatal jaundice.



## Infacol Baby Bonding Award

Hundreds of parents from around the UK sent in their stories about how a particular healthcare professional helped them form a bond with their baby, often in difficult circumstances. The winner of the 2010 Infacol Baby Bonding Award was Dr Robert Dawson from Westcliffe Medical Centre in Shipley, West Yorkshire.

His caring approach, professionalism and endless patience helped new mum Zoe Swift to fight depression and form a strong bond with her baby. Zoe had suffered from depression prior to becoming pregnant but came off antidepressants while trying to conceive and during her pregnancy. Once her daughter was born she really began to struggle but, she says, Dr Dawson helped her fight her demons and form a loving relationship with her daughter. Zoe's story highlights how hard it can be for parents to form a special bond, particularly if their baby is premature or the labour is difficult.



## Neonatal transfer service celebrates fifth birthday

The Greater Manchester Neonatal Transport Service (GMNeTS) was launched in 2005 and since then the team have clocked up over 120,000 ambulance miles helping the smallest and most vulnerable babies reach the specialist care they need. With more than 3,900 babies transferred during over 43,800 hours spent on-call, the dedicated team have been so busy the occasion nearly passed them by. They have carried out over 1,422 emergency transfers and 2,480 planned non-emergency transfers, including babies who have been treated at both St Mary's Hospital and Salford Royal Hospital newborn intensive care units.

GMNeTS is central to the region-wide *Making it Better* plans to improve the level of care for premature and sick babies. The transport team will continue to ensure safe planned and emergency transfer of babies from smaller units offering less intensive care to ones with highest levels of care, including the three proposed regional centres of excellence at St Mary's Hospital and purpose built developments at the Royal Bolton and Royal Oldham Hospitals.

## Sofa sleeping remains a risk

Figures obtained by cot death charity Foundation for the Study of Infant Deaths (FSID) reveal that in the last two years at least 25 babies in the UK have died while sleeping together with an adult on a sofa.

The figures confirm that parents are still choosing one of the most dangerous places in the home to sleep with their babies. Previous studies have demonstrated that an adult falling asleep beside an infant on a sofa increases the risk of the baby dying suddenly and unexpectedly 50-fold.

FSID and DH advice for all parents remains that the safest place for a baby to sleep, for the first six months, is in a separate cot in a room with their parent.