

Assessment of neonatal care

The following are an aide-memoire to help identify common issues when assessing neonatal care. They are not an exhaustive list.

Specific stages of the neonatal care pathway

Supporting Transition and Resus

- Did neonatal staff meet with the baby's family prior to delivery, and if so were the personnel suitably experienced to undertake the counselling given?
- Were the neonatal team present at delivery, and if so were they appropriately experienced?
- Were there difficulties in obtaining and maintaining a secure airway?
- Were resuscitation guidelines followed appropriately?
- Was attention given to the baby's thermal environment?

Stabilisation and Transfer to NNU

- Was the condition of the baby prior to, during and following transfer documented?
- Were any difficulties encountered?

Admission and First Hours

- Were an admission examination and all procedures fully documented?
- Were procedures in place to minimise thermal stress and complete admission procedures in a timely fashion?

Ongoing Treatment

- Was the baby's clinical condition and examination regularly undertaken?
- Were results of investigations acted on in a timely manner?

Referral

- Were there clear pathways for on-going or specialist care?
- Was referral made in a timely manner?

Discharge or Transfer from Care

- Were there clear pathways for discharge?
- Was discharge undertaken in a planned and timely manner?

Aspects of care common to all stages of the care pathway

Clinical leadership

- Was senior support available in a timely manner?
- Were senior members of the team able to provide a 'helicopter view' in critical situations?
- Did senior members of the team communicate regularly with the family?

Education, Knowledge and Training

- Did all team members demonstrate expected appropriate competencies?
- If difficulties were encountered, was senior help requested in a timely manner?
- Were national guidelines regarding practice followed?
- Was good prescribing practice demonstrated?



Documentation

- Were all events and procedures documented in line with national guidance?
- Was there evidence of reflective thinking regarding differential diagnosis in critically ill babies?

Communication

- Was there full documentation of communication between team members, between teams and between the neonatal team and the family?
- Was the help of interpreters sought as required?
- Were any clinical or social risk factors communicated to the neonatal team by the obstetric/midwifery team?

Policies and Procedures

- Were local and national policies followed?
- Were procedures documented in a standard manner?

Family

- Were family members kept regularly updated in their baby's condition?
- Were the family encouraged to be involved in all aspects their baby's care?