

From the Chief Medical Officer:



Department of

**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÁNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

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Your Ref:
Our Ref:
Date: 23 November 2006

HSC (SQSD) (NICE) 17/08

For Action

Chief Executives of HSS Boards and Trusts
Directors of Nursing in HSS Boards and Trusts for cascade:

- All midwives and health visitors;

Medical directors in HSS Trusts for cascade to:

- Consultant obstetricians;
- Consultant paediatricians;

Directors of Public Health in HSS Boards;
Each GP practice for cascade to practice nurses (for
information);

Professor of Nursing, QUB;

Professor of Nursing, University of Ulster;

Professor James McElnay, QUB;

Professor Rod Hay, QUB;

Professor of General Practice, QUB;

Chief Executive, NIMDTA; and

Chief Executive, NIPEC.

For Information

Chief Executive RQIA

Dear Colleagues

RE: ROUTINE POSTNATAL CARE OF WOMEN AND THEIR BABIES – NICE CLINICAL GUIDELINES – FOR IMPLEMENTATION

Introduction

The purpose of this letter is to bring to your attention important guidance on *Routine Postnatal Care for Women and their Babies*. This guidance was issued by the National Institute for Health and Clinical Excellence in July 2006; it is one of a series of guidance, currently under development by NICE, to promote good practice in antenatal, intrapartum and postnatal care.

Endorsement of NICE Guidance by the DHSSPS

In the interests of promoting safety and quality of care for mothers and their babies, the Department is endorsing this guidance on *Routine Postnatal Care for Women and their Babies* for implementation in HSS Trusts, HSS Boards and in primary care. To facilitate this, the Department is making available a quick reference guide, via HSS Trusts and Central Services Agency, to midwives, health visitors, paediatricians, obstetricians and to each general practice in Northern Ireland.

The pocket guide is colour coded to identify:

- Policies, protocols and competencies – pink section;
- Core activities to be carried out at each postnatal visit and specific advice according to baby's age - blue section; and
- Check list for common health and life- threatening conditions- red section.

The full clinical guideline is available on www.nice.org.uk.

Awareness of Life Threatening Conditions

The Department requires HSS organisations to ensure that relevant staff know how to manage life-threatening conditions, which affect either mother or baby. Of particular note are the “emergency actions” required to manage women with:-

- sepsis;
- post-partum haemorrhage;
- pre-eclampsia/eclampsia; and
- pulmonary embolism or deep venous thrombosis.

Jaundice and Bleeding in the Newborn

A number of “emergency action” health problems in babies are also identified in the quick reference guide, including jaundice and bleeding in newborn babies. At the point of discharge from hospital, parents should be provided with written information giving explicit advice on the:

- recognition and significance of jaundice in newborn babies and warning signs of complications;
- importance and timing of Vitamin K doses;
- increased risk of haemorrhagic disease of the newborn in babies who are jaundiced and/or are being breastfed; and
- need to investigate even minor bleeds, which occur in the first 6 months of life, particularly in breastfed or jaundiced infants.

For Action

The early discharge of mothers and babies from hospital requires healthcare professionals, particularly midwives and health visitors, to be increasingly vigilant about recognition and management of early, prolonged and late – onset jaundice and bleeding in the newborn.

HSS Trust protocols should be in place to ensure effective arrangements in all settings, including in the community and in Accident and Emergency departments. These should be forwarded to the Director of Nursing in relevant HSS Boards for comment to ensure

consistency of approach across Trusts. This should be completed by **15 January 2007**. Following this, the Directors of Nursing are asked to collectively respond to the DHSSPS on arrangements and copy their response to RQIA.

The collective response should be sent to

Ms Elaine Lawson
Planning and Performance Management Directorate
elaine.lawson@dhsspsni.gov.uk

No later than **31 January 2007**

Conclusion

The Department is making available a pocket size quick reference guide to enhance the routine postnatal care of women and their babies. The full text of the clinical guideline is available on the NICE website at www.nice.org.uk.

In the interests of safety and quality of care, the Department expects this NICE guidance to be implemented by HSS Trusts, Boards and family practitioner services.

Undergraduate and postgraduate education and training establishments are asked to ensure that this important guidance is brought to the attention of relevant students and staff and that it is reflected in training programmes.

Yours sincerely



DR M McBRIDE
Chief Medical Officer

MR MARTIN BRADLEY
Chief Nursing Officer

MR ANDREW HAMILTON
Deputy Secretary

H cc: Serious Adverse Incidents (SAI) Group
Directors of Primary and Secondary Care
Dr A McCormick (for information)
Mr D Sissling (for information)