Maternity and Neonatal Safety Improvement Programme

South Tees Hospitals NHS Foundation Trust

Diabetes Detection and Prevention of Neonatal Hypoglycaemia in Pregnancy

The Project

Outcome measures:

- To reduce the DNA rate for GTTs from 37% to 18% by 2020 (50% reduction)
- To Improve the detection and management of neonatal hypoglycaemia

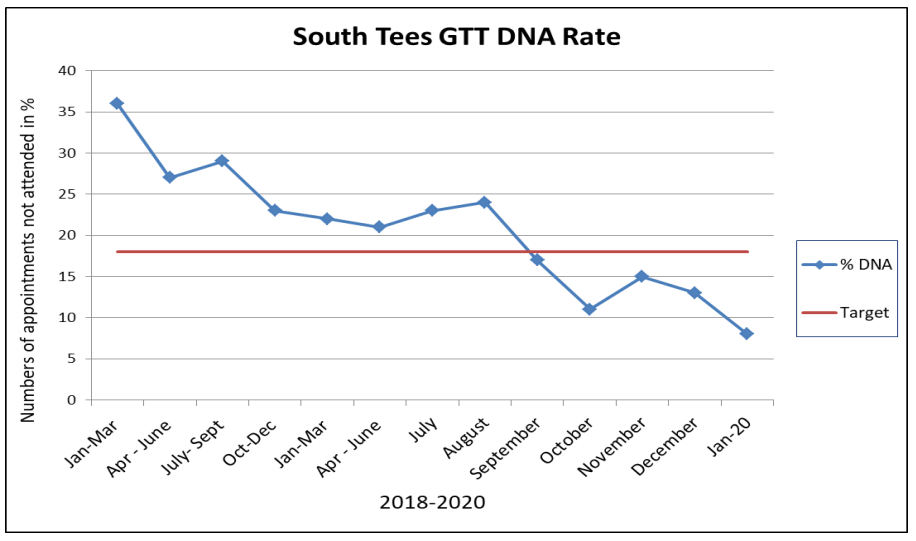
Background

- As a trust we recognized that attendance rates for glucose tolerance tests were low. It is widely acknowledged that undiagnosed diabetes in pregnancy can increase the risks of shoulder dystocia, instrumental delivery and caesarean section; in order to reduce these risks we decided to work on improving the uptake of GTTs as a means to improve the detection of diabetes.

- We also identified that we didn't have a standardized pathway of care or written information for the prevention of neonatal hypoglycaemia and although our management of neonatal hypoglycaemia was generally good we needed to ensure this was reinforced through policy and patient education

Approach taken

- Process mapping to identify areas of concern
- Weekly meetings to identify and discuss PDSA cycles
- Development of driver diagrams
- Data gathering and measuring impact
- Learning and sharing at National learning sets and local system events



Outcome and impact

- The DNA rate for GTTs has reduced dramatically throughout this project and we have achieved our target
- Pathway for prevention of neonatal hypoglycaemia is in place
- Neonatal hypoglycaemia patient information is standardized in notes
- Evaluation of use of pathway and compliance with ensuring all women receive neonatal hypoglycaemia information is underway

Learning

- Lack of allocated time for project affected the project initially
- Small, measurable changes, allowing time for evaluation are more effective to make progress
- Regular meetings are essential to ensure project moves forward

Change ideas

- Change appointment process for GTT's
- Introduce centralised, easily accessible GTT clinic
- Raise profile of diabetes in pregnancy using trust TV screens and intranet
- Devise GTT letters in different languages
- Develop a pathway of care and patient information for the prevention of neonatal hypoglycaemia
- Discuss prevention of neonatal hypoglycaemia with women at 32 and 36 week clinic appointments

DNA Rate for GTTs has fallen from 36% to 8% Jan 2018 - Jan 2020