

From the Chief Medical Officer
Dr Michael McBride

From the Chief Nursing Officer
Mrs Charlotte McArdle



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

HSS(MD) 6/2016

FOR ACTION

Chief Executives HSC Trusts (*for onward cascade to all relevant staff*)

Chief Executive PHA (*for onward cascade to all relevant Public Health Staff*)

Chief Executive HSCB (*for onward distribution to GP Medical Advisers*)

All General Practitioners and GP Locums (*for onward distribution to relevant practice staff*)

Castle Buildings

Stormont

BELFAST

BT4 3SQ

Tel: 028 9052 0563

Fax: 028 9052 0574

Email:

Michael.mcbride@dhsspsni.gov.uk

Charlotte.mcardle@dhsspsni.gov.uk

Our Ref: HSS(MD)6/2016

Date: 25 February 2016

Dear Colleagues

THE ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS - AUDIT OF CURRENT PRACTICE IN PREVENTING EARLY-ONSET NEONATAL GROUP B STREPTOCOCCAL DISEASE IN THE UK

ACTION REQUIRED

Chief Executives must ensure this letter regarding the audit undertaken by the RCOG on the 'Current Practice In Preventing Early-Onset Neonatal Group B Streptococcal Disease (EOGBS) in the UK' is cascaded to all relevant staff.

The HSCB must ensure this letter is cascaded to all GPs and Practice Managers for onward distribution to all primary care staff involved in the antenatal care of pregnant women.

You will be aware of the audit undertaken by the Royal College of Obstetricians and Gynaecologists (RCOG) on the '**Current Practice In Preventing Early-Onset Neonatal Group B Streptococcal Disease (EOGBS) in the UK**' which was commissioned by the UK National Screening Committee (UK NSC) and launched in 2013. The aim of the audit was to investigate the implementation of the RCOG Green-top Guideline No. 36 in NHS obstetric units, examine variations in preventive care for EOGBS across the UK, and identify areas for improving adherence to the guideline and practice.

The findings of the audit have been published in two reports, the first of which was published in March 2015, which we shared with you via Chief Professional letter in June 2015 (HSS(MD)7/2015). The first report examined current practice in preventing EOGBS in UK maternity units, how national guidelines are currently being implemented,

and identified areas for improvement in order to reduce the number of neonatal infections due to GBS. It can be accessed at:

<https://www.rcog.org.uk/globalassets/documents/guidelines/research--audit/gbs-audit-first-report.pdf>

The second report was published in January 2016 and presents the findings from midwife-led units; a review of local protocols for preventing EOGBS; and a review of written patient information on GBS infection. It can be accessed at:

<https://www.rcog.org.uk/globalassets/documents/guidelines/research--audit/gbs-audit-second-report-january-2016.pdf>

We would like to draw your attention to the **recommendations** from the second report:

1. National guidelines should be updated to reflect the findings from this audit, the forthcoming review of screening by the UK NSC and the forthcoming results from the recent national GBS surveillance study. The revision of national guidelines should address the care of women who are considering or plan to give birth in locations besides an obstetric unit.
2. National guidelines should be applied to all NHS trusts to reduce future deviations in local practice and policy. Local protocols should be reviewed at least every 3 years to ensure they are fit for purpose and that they reflect current national guidance. The last review date should be recorded on the current protocol and the recording of the last review date should be monitored in national audits.
3. Future studies on preventive care for EOGBS should address care provided in midwife-led units as this audit found that pregnant women with risk factors for EOGBS are accepted for delivery in these units.
4. Admission criteria and practice in midwife-led units should be informed by national guidelines on preventing EOGBS, including the availability of GBS-specific IV antibiotics.
5. A nationally produced patient information leaflet should be used locally by all NHS trusts. The material should reflect the findings from this audit, the forthcoming review of screening by the UK NSC and the forthcoming results from the recent national GBS surveillance study. The leaflet should be accessible to patients with low literacy.

Northern Ireland has made progress in relation to recommendations 3 & 4. In January 2016 GAIN launched evidence based guidelines for admission criteria to freestanding and alongside midwife led units. The evidence based guidance states that a planned birth in an Alongside MLU (AMU) (ie adjacent a consultant- led maternity unit) is an option for woman who is “Group B Streptococcus positive in this pregnancy with no signs of infection”. The additional supporting information in the GAIN guidance notes that “Women with group B streptococcus positive in current pregnancy require IV antibiotics as per NICE guideline cg 149 (NICE 2012)”.

Given the extensive work in Northern Ireland on GBS in pregnancy, we are disappointed to learn that not all maternity units in Northern Ireland contributed to this

important audit. We would ask that you ensure that all obstetricians and midwives are aware of the RCOG Green-top Guideline (No. 36) on ***The Prevention of Early-onset Neonatal Group B Streptococcal Disease***. <https://www.rcog.org.uk/en/guidelines-research-services/guidelines/gtg36/>

Yours sincerely



Dr Michael McBride
Chief Medical Officer

Charlotte McArdle
Chief Nursing Officer

For Information:

Chairs of HSC Trusts

Prof Stuart Elborn, Dean of the School of Medicine, Dentistry and Biomedical Sciences, QUB

Mrs Angela McLernon, Chief Executive, Northern Ireland Practice and Education Council for Nursing and Midwifery

Nursing and Midwifery, Queens University, Belfast

Dr Tom Black, Chair GPS, BMA

Dr Robin Ashe, Chair of Northern Ireland Committee, Royal College of Obstetricians and Gynaecologists

Dr John O'Kelly, Chair of Northern Ireland Council at the Royal College of General Practitioners

Dr Glynis Henry – Head of the Clinical Education Centre

Ms Janice Smyth, Director RCN Northern Ireland

Ms Breedagh Hughes, Director NI RCM Board

Patricia McStay, LSA Midwifery Officer, PHA

Members of the CMO GBS Steering Group

This letter is available on the DHSSPS website at

www.dhsspsni.gov.uk/index/phealth/professional/cmo_communications.htm